## CS Form No. 212 Revised 2017 **PERSONAL DATA SHEET** WARNING: Any misrepresentation made in the Personal Data Sheet and the Work Experience Sheet shall cause the filing of administrative/criminal case/s against the person concerned. READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM. (Do not fill up. For CSC use on 1. CS ID No. Print legibly. Tick appropriate boxes ( ) and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. 2. SURNAME MANAPSAL NAME EXTENSION (JR., SR) N/A FIRST NAME SHAYLENE MIDDLE NAME BALLICUD 3. DATE OF BIRTH 16. CITIZENSHIP ☑ Filipino (mm/dd/yyyy) 06/22/2000 ☐ Dual Citizenship ☑ by birth □ by naturalization 4. PLACE OF BIRTH CATARMAN, NORTHERN SAMAR If holder of dual citizenship Pls. indicate country: please indicate the details. 5. SEX ☐ Male ✓ Female Philippines ✓ Single ■ Married 17. RESIDENTIAL ADDRESS PUROK 3 6 CIVIL STATUS House/Block/Lot No. ■ Widowed ☐ Separated LINAO ☐ Other/s: Subdivision/Village INOPACAN 1.68 LEYTE 7. HEIGHT (m) 8. WEIGHT (kg) 70 6522 ZIP CODE A+ 18. PERMANENT ADDRESS PUROK 3 9. BLOOD TYPE House/Block/Lot No. LINAO N/A 10. GSIS ID NO. 121339223261 INOPACAN LEYTE 11. PAG-IBIG ID NO. City/Munici N/A 6522 12. PHILHEALTH NO. ZIP CODE 13. SSS NO. 06-4793142-2 19. TELEPHONE NO. N/A 14. TIN NO. 654-314-384-00000 20. MOBILE NO. 09855875451 15. AGENCY EMPLOYEE NO. 21. E-MAIL ADDRESS (if any) shaylene0622@gmail.com II. FAMILY BACKGROUND 22. SPOUSE'S SURNAME N/A 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) FIRST NAME N/A N/A N/A MIDDLE NAME OCCUPATION N/A EMPLOYER/BUSINESS NAME N/A BUSINESS ADDRESS N/A TELEPHONE NO. N/A 24. FATHER'S SURNAME MANAPSAL NAME EXTENSION (JR., SR) FIRST NAME CIELITO BISNAR MIDDLE NAME 25. MOTHER'S MAIDEN NAME SURNAME BALLICUD JOSEFINA FIRST NAME

| MIDDLE NAME                               | DDLE NAME EVA                                   |                    |     |                      | (Continue on separate sheet if necessary) |                                |                   |                                    |  |  |
|---|---|--------------------|-----|----------------------|---|--------------------------------|-------------------|------------------------------------|--|--|
| III. EDUCATIONAL BACKGROUND               |   |                    |     |                      |   |                                |                   |                                    |  |  |
| 26. LEVEL                                 | NAME OF SCHOOL<br>(Write in full)               |                    |     | PERIOD OF ATTENDANCE |   | HIGHEST LEVEL/<br>UNITS EARNED | YEAR<br>GRADUATED | SCHOLARSHIP/<br>ACADEMIC<br>HONORS |  |  |
|   | , ,   |                    |     | From                 | To  | (if not graduated)             |                   | RECEIVED                           |  |  |
| ELEMENTARY                                | ARY INOPACAN CENTRAL SCHOOL ELEMENTARY          |                    | 1   | 2008                 | 2013                                      | N/A                            | 2013              | 8TH HONOR                          |  |  |
|   | TINAGO NATIONAL HIGH SCHOOL                     | JUNIOR HIGH SCHOOL |     | 2013                 | 2017                                      | GRADE 10                       | 2017              | WITH<br>HONOR                      |  |  |
| SECONDART                                 | VISAYAS STATE UNIVERSITY INTEGRATED HIGH SCHOOL | SENIOR HIGH SCHOOL |     | 2017                 | 2019                                      | N/A                            | 2019              | N/A                                |  |  |
| VOCATIONAL /<br>TRADE COURSE              | N/A   | N/A                | N/A |                      | N/A                                       | N/A                            | N/A               | N/A                                |  |  |
| COLLEGE                                   | BACHELOR OF ELE EDUCATION                       |                    |     | 2019                 | 2023                                      | N/A                            | 2023              | N/A                                |  |  |
| GRADUATE STUDIES                          | STUDIES N/A N/A                                 |                    |     | N/A                  | N/A                                       | N/A                            | N/A               | N/A                                |  |  |
| (Continue on separate sheet if necessary) |   |                    |     |                      |   |                                |                   |                                    |  |  |

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DATE

| IV. CIVIL SE          | ERVICE ELIGI                 | BILITY   |                    |                           |                         |                         |                               |                          |                     |
|-----------------------|------------------------------|--|--------------------|---------------------------|-------------------------|-------------------------|-------------------------------|--------------------------|---------------------|
| <sup>27.</sup> CAREER |                              |  | RATING             | DATE OF<br>EXAMINATION /  | PLACE OF EXAMINA        | LICENSE (if applicable) |                               |                          |                     |
|                       |                              |  | (If Applicable)    | CONFERMENT                |                         |                         |                               | NUMBER                   | Date of<br>Validity |
|                       | LICENSURE E                  | XAMINATION FOR TEACHERS                          | 82.8               | 03/17/2024                | TACLOBAN CITY           |                         |                               | 2200006                  | 06/22/2027          |
|                       |                              |  |                    |                           |                         |                         |                               |                          |                     |
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| V. WORK E             | XPERIENCE                    |  | (Continue on se    | eparate sheet if necessar | y)                      |                         |                               |                          |                     |
|                       | rate employme<br>JSIVE DATES | nt. Start from your recent work) Description     | n of duties should | be indicated in the       | attached Work Experienc | e sheet.                | SALARY/ JOB/ PAY              |                          | ı                   |
|                       | im/dd/yyyy)                  | POSITION TITLE (Write in full/Do not abbreviate) |                    |                           | ENCY / OFFICE / COMPANY | MONTHLY<br>SALARY       | GRADE (if applicable)& STEP   | STATUS OF<br>APPOINTMENT | GOV'T<br>SERVICE    |
| From                  | То                           |  |                    | ·                         |                         |                         | (Format "00-0")/<br>INCREMENT | Contract of              | (Y/N)               |
| 08/19/2024            | 12/27/2024                   | Project-based Research Sta                       | aff                | Southern Ley              | yte State University    | P595.00/day             | N/A                           | Service                  | Y                   |
|                       |                              |  |                    |                           |                         |                         |                               |                          |                     |
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| SIGNA                 | ATURE                        |  |                    |                           | DATE                    |                         |                               |                          |                     |

| VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / N                                  | NON-GOVERNMENT / PEOPLE /                     | VOLUNTARY                       | ORGANIZATI                    | ION/S           |   |  |
|---|---|---------------------------------|-------------------------------|-----------------|---|--|
| 29.   |   | INCLUSIVE DATES<br>(mm/dd/yyyy) |                               |                 |   |  |
| NAME & ADDRESS OF ORGANIZATION  | (Write in full)                               | From                            | То                            | NUMBER OF HOURS |   | POSITION / NATURE OF WORK                                  |
| N/A   |   |                                 |                               | NVA             |   | N/A  |
| IVA   |   |                                 | N/A                           | N/A             |   | NA   |
|   |   |                                 |                               |                 |   |  |
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| VII. LEARNING AND DEVELOPMENT (L&D) INTERVEN                                    | TIONS/TRAINING PROGRAMS A                     |                                 | separate sheet if n           | ecessary)       |   |  |
| VIII. EEARAMIO AND DEVELOT MERT (EGD) INTERVEN                                  | TIONS, TIGHINING PROGRAMO P                   | 1                               | DATES OF                      |                 |   |  |
| 30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS.                            | OTTO A INJUNIO DEDOCE ANAC (IAIsida in 6-III) | ATTEN                           | IDANCE                        | NUMBER OF HOURS | Type of LD<br>( Managerial/<br>Supervisory/<br>Technical/etc) | CONDUCTED/ SPONSORED BY (Write in full)                    |
| THEE OF ELANING AND DEVELOPMENT INTERVENTIONS                                   | TITALINIO FROGRAMO (WILLE III IIII)           |                                 | d/yyyy)                       |                 |   | CONDUCTED/ SPONSORED BY (Write in full)                    |
|   |   | From                            | То                            |                 | · ·   | SOUTHERN LEYTE STATE                                       |
| WRITESHOP ON PEER REVIEWING JOURNAL PAPERS                                      |   | 12/11/2024                      | 12/11/2024                    | 8 hours         | Technical   | UNIVERSITY   |
| POLISHING OF RESEARCH AND NON-METHOD PAPERS FO                                  | OR PUBLICATION                                | 11/25/2024                      | 11/26/2024                    | 16 hours        | Technical   | SOUTHERN LEYTE STATE UNIVERSITY                            |
| EARLY CHILDHOOD DEVELOPMENT TEACHER SKILLS                                      |   | 11/15/2024                      | 11/24/2024                    | 80 hours        | Supervisory   | CONTINUING PROFESSIONAL DEVELOPMENT FOR TEACHERS           |
| DEVELOPMENT TRAINING  COMPUTER SKILLS DEVELOPMENT TRAINING:                     |   |                                 |                               |                 |   |  |
| IMPROVING CLASSROOM LEARNING THRU ICT   |   | 11/01/2024                      | 11/10/2024                    | 80 hours        | Technical   | CONTINUING PROFESSIONAL DEVELOPMENT FOR TEACHERS           |
| CRITIQUING PAPERS OF BIBLIOMETRIC AND COMMENTARY PA                             | PERS  | 10/28/2024                      | 10/29/2024                    | 16 hours        | Technical   | SOUTHERN LEYTE STATE UNIVERSITY                            |
| WORKSHOP ON BILIOMETRIC ANALYSIS AND VISUALIZATION U                            | JSING VOSVIEWER                               | 10/24/2024                      | 10/24/2024                    | 8 hours         | Technical   | SOUTHERN LEYTE STATE UNIVERSITY                            |
| UPSKILLING AND RESKILLING TEACHING AND  |   | 10/15/2024                      | 10/24/2024                    | 80 hours        | Supervisory   | CONTINUING PROFESSIONAL DEVELOPMENT FOR TEACHERS           |
| SUPERVISION SKILLS TRAINING WRITESHOP ON PUBLISHABLE ESSAY: ENGAGING TOP STUDEI | NT WRITERS                                    | 10/24/2024                      | 10/25/2024                    | 16 hours        | Supervisory   | SOUTHERN LEYTE STATE                                       |
| INTENSIVE WORKSHOP FOR JOURNAL PUBLICATION                                      |   | 10/23/2024                      | 10/23/2024                    | 8 hours         | Technical   | UNIVERSITY SOUTHERN LEYTE STATE                            |
|   | 0.110.17.01.1                                 |                                 |                               |                 |   | UNIVERSITY SOUTHERN LEYTE STATE                            |
| OPTIMIZING BIBLIOMETRIC RESEARCH AND SCOPUS DATA ACC                            | QUISITION                                     | 09/03/2024                      | 09/03/2024                    | 8 hours         | Technical   | UNIVERSITY   |
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|   |   | (Continue on                    | separate sheet if n           | ecessary)       |   |  |
| VIII. OTHER INFORMATION   |   |                                 |                               |                 |   |  |
| 31. SPECIAL SKILLS and HOBBIES  | 32. NON-                                      | ACADEMIC DISTIN-<br>(Writ       | NCTIONS / RECOG<br>e in full) | GNITION         |   | 33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full) |
| ABLE TO COMMUNICATE EFFECTIVELY WITH OTHERS                                     | N/A   |                                 |                               |                 |   | PHILIPPINES ASSOCIATION FOR TEACHERS AND EDUCATORS         |
| INDEPENDENT AND SELF-RELIANT  |   |                                 |                               |                 |   |  |
| FLEXIBLE MINDSET FOR FLEXIBLE WORK  |   |                                 |                               |                 |   |  |
| ENVIRONMENT   |   |                                 |                               |                 |   |  |
| COMPUTER LITERATE   |   |                                 |                               | <u></u>         |   |  |
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| 34.   | Are you related by consanguinity or affinity to the appointing chief of bureau or office or to the person who has immediate Bureau or Department where you will be apppointed, a. within the third degree?  b. within the fourth degree (for Local Government Unit - Care | supervision over you in the Office, | ☐ YES☐ YES If YES, give detai   | ☑ NO<br>☑ NO<br>ls:                              |  |  |  |  |
|---|---|-------------------------------------|---|--|--|--|--|--|
| 35.   | a. Have you ever been found guilty of any administrative offer  | ense?                               | ☐ YES If YES, give detai  | ☑ NO<br>ls:                                      |  |  |  |  |
|   | b. Have you been criminally charged before any court?   |                                     | ☐ YES ☑ NO If YES, give details:     Date Filed: Status of Case/s:                        |  |  |  |  |  |
|   | Have you ever been convicted of any crime or violation of ar any court or tribunal?   |                                     | ☐ YES If YES, give detai  | ☑ NO<br>iils:                                    |  |  |  |  |
| 37.   | Have you ever been separated from the service in any of the dropped from the rolls, dismissal, termination, end of term, fi in the public or private sector?  |                                     | YES If YES, give detai  | ☑ NO ails: ☑ NO                                  |  |  |  |  |
| 38.   | b. Have you resigned from the government service during the election to promote/actively campaign for a national or local   |                                     | ☐ YES If YES, give deta ☐ YES If YES, give deta   |  |  |  |  |  |
| 39.   | Have you acquired the status of an immigrant or permanent   |                                     | ☐ YES If YES, give detai  | ☑ NO   |  |  |  |  |
| 40.<br>a.<br>b.   | Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), Are you a member of any indigenous group?  Are you a person with disability?  Are you a solo parent?   |                                     | ☐ YES If YES, please specii ☐ YES If YES, please specii ☐ YES ☐ YES If YES. please specii | ☑ NO fy ID No: ☑ NO                              |  |  |  |  |
| 41.   | REFERENCES (Person not related by consanguinity or affinity to applican   | nt /appointee)                      | •   |  |  |  |  |  |
|   | NAME  | ADDRESS                             | TEL. NO.  |  |  |  |  |  |
|   | ROSARIO P. ABELA  | VISCA, BAYBAY CITY LEYTE            | 9183641159  |  |  |  |  |  |
|   | BAYRON S. BARREDO   | VISCA, BAYBAY CITY LEYTE            | 9515112133  |  |  |  |  |  |
|   | GENRAN L. LABRA   | LILOAN, SOUTHERN LEYTE              | 9484423978  |  |  |  |  |  |
| 42. I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I authorize the agency head/authorized representative to verify/validate the contents stated herein.  agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me. |   |                                     |   |  |  |  |  |  |
| Ρ   | overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)  LEASE INDICATE ID Number and Date of Issuance  overnment Issued ID: PRC   |                                     |   |  |  |  |  |  |
| H   | //License/Passport No.: 2200006 ate/Place of Issuance: June 25, 2024/ Ormoc City  | Signature (Sign inside the b        | pox)  | Right Thumbmark                                  |  |  |  |  |
|   |   |                                     |   |  |  |  |  |  |
|   | SUBSCRIBED AND SWORN to before me thi   | is , a Person Administering Oal     | ·   | validly issued government ID as indicated above. |  |  |  |  |