VISAYAS STATE UNIVERSITY PERSONAL DATA SHEET

For Job Order Workers



Print legibly. Mark approp	oriate boxes with	n"☑ "and use sep	oarate	sheet if necess	ary.					
1. SURNAME	G U A T L	0								
FIRST NAME	J U C E L M A R I E									
MIDDLE NAME		V		1 1 1 1			2. NAME E	XTENSION (e.g. Jr., S	r.)	
3. DATE OF BIRTH (mm/dd/yyyy)	<u> </u>	05/27/1996		11. PRESENT ADDRE	ESS					
4. PLACE OF BIRTH	PASIG CITY	<u> </u>		•		119 RIZAL STREET, BRGY. DISTRICT 21, ORMOC CITY, LEYTE				CITY, LEYTE
5. SEX	☐ Male ☐ Fema	ale		-						
6. CIVIL STATUS	owed		12. ZIP CODE		6541					
	☐ Married ☐ Sep	arated		13. TEL. NO./CEL. N	0.	0975-159-0979				
	☐ Annulled ☐ Oth	ers, specify	_	14. PHILHEALTH NO	D. 13-252796		796554-7			
7. CITIZENSHIP	FILIPINO	9. WEIGHT (kg)	48	15. TIN	715-049-74		I-744			
8. HEIGHT (m)	1.56	10. BLOOD TYPE	A+	16. PAG-IBIG ID NO.		121216074792				
17. SPOUSE'S SURNAME			•		18. NAME OF CHIL	F CHILD (Write full name and list all) DATE OF BIRTI			BIRTH (mm/dd/yyyy)	
FIRST NAME										
MIDDLE NAME										
19. HIGHEST EDUCATIONAL A	TTAINMENT	[] Elementary (Grade	/ G	raduated)						
(Please check and under	rline the specific)	[] High School (1st, 2nd,	3rd, 4th,	Graduated)						
		∬ College (1st, 2nd, 3rd, 4th, Graduated) Degree: BS IN AGRICULTURAL ENGINEERING								
20. CAREER SERVICE ELIGIBIL	LITY	□ Professional □ Sub-Professional □ Others, Specify:								
21. WORK EXP INCLUSIVE DATE	POSITION TITLE (Write in full)			DEPARTMENT / AGENCY / OFFICE / COMPANY /PROJECT (Write in full) SALARY (Daily or Monthly)			STATUS OF APPOINTMENT (Perm/Temp/ Job Order)	GOV'T SERVICE (Yes / No)		
From	То								1	
11/08/2017	06/30/2018	ENGINEER I				VSU ~20,000			JOB ORDER	YES
1 1	1 1									
1 1	1 1									
22. SPECIAL	SKILLS	Proficiency			(Please check)					
(i.e. computer skills, typing, welding, plumbing, carpentry, auto mechanic, driving, et. al.)		Highly Skilled Aver		age		Fair		REMARKS		
COMPUTER S	SKILLS	1								
GRAPHIC DE	SIGN	1								
23. RELEVANT TRAININGS SEMINAR/WORKSHOP ATTENDED (Write in full)		INCLUSIVE DATES OF ATTEND. (mm/dd/yyyy)			NUMBER OF	HOURS	CONDUCTED/ SPONSORED BY			ED BY
		From		То				(Write in full)		
Webinar on Cacao Pod Briquetting Process		05/31/2021	05/31/2021 05/31/2021		4		DA-Philippine Center for Postharvest Development and Mech			ment and Mechanization
Techno-talakayan on Agricultural Mechanization and Postharvest Loss Prevention		05/24/2021	05/24/2021 05/25/2021		8		DA-Philippine Center for Postharvest Development and Mechanization			
70th PSABE Annual National Convetion		04/26/2021 04/26/2021		04/26/2021	24		Philippine Society of Agricultural and Biosystems Engineers (PSABE), Inc.			
I hereby declare that this F pertinent laws, rules and re				by me, and is a	true, correct	and comp	lete sta	itement pursua	int to the pr	ovisions of
24. COMMUNITY TAX CERTIFICATE NO	CCI 2019 - 16475	5978 ISSUED AT:	ORMO	OC CITY	SSUED ON (mm/dd/y	04/29/2 y):	1			
SIGNATURE:	, 	DATE ACCOMPLISHED: (mm	/dd/yyyy)	07/23/2	2021					Pevised 2019

IV. CIVIL SERVICE ELIGIBI	LITY								
29. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE/ TESDA/NCC RATING			DATE OF	DI AGE OF EVANDATI	ON / OONEEDNENT	LICENSE (if	LICENSE (if applicable)		
			EXAMINATION / CONFERMENT	PLACE OF EXAMINATION	ON / CONFERMENT	NUMBER	DATE OF RELEASE		
RA 1080 (AGRICULTURAL ENGINEERING) 78.30%			08/23-24/2017	PRC MA	ANILA	0008803	09/07/2017		
		(C	Continue on separate	sheet if necessary)			L		
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VI. SPECIAL SKILLS								
31. SPECIAL SKILLS		Proficiency						
(i.e. computer skills, typing, welding, plumbing, carpentry, auto mechanic, driving, et. al.)	Highly Skilled Average		Fair					
	on separate sheet if	necessary)						
VII. TRAINING PROGRAMS (Start from the most recent train	ning.)							
32. TITLE OF SEMINAR/CONFERENCE/WORKSHOP/SHORT COURSES (Write in full)		NCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy) NUMBER OF HOURS		CONDUCTED/ SPONSORED BY (Write in full)				
	From	То						
	1 1	1 1						
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(Continue on separate sheet if necessary)								
 36. Are you related by consanguinity or affinity to any of the following: a. Within the third degree with the appointing authority, recommending authority, chief of office/bureau/department or person who has immediate supervision over you in the Office, Bureau or Department where you will be appointed? 	If YES, give details:							
(Continue on separate sheet if necessary)								
Technical Control of the Control of	,	,,		CS FORM 212 (Revised 2005), Page 3 of 4				

VI.	SPECIAL SKILLS								
22.	SPECIAL SKI		Proficien	cy (Please che	check)				
22.		(i.e. computer skills, typing, welding, plumbing, carpentry, auto mechanic, driving, et. al.)			Average	Fair	REMARKS		
VII	. TRAINING PROGRAMS (Start from	m the most recent trainin	ng.)						
23. TITLE OF SEMINAR/CONFERENCE/WORKSHOP/SHORT COURSES (Write in full)		INCLUSIVE DATES O (mm/dd/y		NUMBER OF HOURS	CONDUCTED/ SPONSORE) BY (Write in full)			
	(Witte III toll)		From	То					
			1 1	1 1					
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of the following: a. Within the third degree with the appointing authority, recommending authority, chief of office/bureau/ department or person who has immediate supervision over you in the Office, Department/Project where you will be appointed?			YES / NO If YES, give details:						
25.	REFERENCES (Person not related by consan	guinity or affinity to applicant / app	pointee)						
	NAME	ADDRESS	TEL. NO.						
	JED ASAPH D. CORTES	VSU	N/A						
26.	I declare under oath that this Persand is a true, correct and complet laws, rules and regulations of the I also authorize the agency head contents stated herein. I trust that	the provisions nes.	of pertinent	PHOTO					
	Contonio Stated Hololli. Titudi tila	at ano imonification shall f	CHAIT COMINGEN	iidi.		FNUIU			
	CCI 2019 - 16475978 COMMUNITY TAX CERTIFICATE NO. ORMOC CITY ISSUED AT 04/29/2021	SIGNATURE (Sign inside the box) 07/23/2021							
	ISSUED ON (mm/dd/yyyy)	ISSUED ON (mm/dd/yyyy) DATE ACCOMPLISHED				RIGHT THUMBMARK (REQUIRED)			