## DEDCONAL DATA QUEET

| PERSONAL INFORMA   |   | sheet if necessary. Indic | ate N/A if not applicable. DO I         | IOT ABBREVIA   | ITE.   | 1. CS ID No  |                                 | (Do not fill up.                     | For CSC use on                 |
|--|---|---------------------------|---|--|--|--|---------------------------------|--------------------------------------|--------------------------------|
| 2. SURNAME   | CUEVAS  |                           |   |  |  |  |                                 |                                      |                                |
| FIRST NAME   | HAIDE   |                           |   |  |  |  | NAME EXTENSION (J               | R., SR)                              | NA                             |
| MIDDLE NAME  | BAGARINAO   |                           |   |  |  |  |                                 |                                      |                                |
| 3. DATE OF BIRTH   | 7/10  | /1983                     | 16. CITIZENSHIP                         |  |  |  | 7                               |                                      |                                |
| (mm/dd/yyyy)   |   |                           |   |  | ✓ Filip  | pino   | Dual Citizenship by birth       | by natura                            | lization                       |
| 4. PLACE OF BIRTH  | BAYBA   | Y, LEYTE                  | If holder of dual citiz                 | tenship,   |  |  | Pls. indicate                   |                                      |                                |
| 5. SEX   | ☐ Male  | ☑ Female                  | please indicate the                     | details.   |  |  |                                 |                                      |                                |
| 6 CIVIL STATUS   | Single  | Married                   | 17. RESIDENTIAL ADDRESS                 |  |  |  |                                 |                                      |                                |
|  | ☐ Widowed ☐ Other/s:  | ✓ Separated               |   | PU   | ouse/Block/Lot I<br>IROK ORCHI   | IDS  |                                 | Street<br>MARCOS                     |                                |
| 7. HEIGHT (m)  | 1.59  |                           |   | -  | SAYBAY CIT   | The same of the sa |                                 | Barangay<br>LEYTE                    |                                |
| 8. WEIGHT (kg)   | 58  | 12 1130                   | ZIP CODE                                |  | City/Municipality  | /  | 6521                            | Province                             |                                |
| 9. BLOOD TYPE  | 0+  | 4 4 4                     | 18. PERMANENT ADDRESS                   |  |  | articular en   | 0021                            | -                                    | and the second                 |
| The second control of the second   |   |                           |   |  | puse/Block/Lot N   | A SECURIO DE LA CONTRACTOR DE LA CONTRAC |                                 | Street                               |                                |
| 0. GSIS ID NO.   | NA  |                           | I Facility Paris                        | S  | ROK ORCHI<br>ubdivision/Villag   | ge   |                                 | MARCOS<br>Barangay                   |                                |
| 1. PAG-IBIG ID NO.   | 1212-0219-5153  |                           |   |  | BAYBAY CIT<br>City/Municipality  |  | 7.1                             | LEYTE Province                       | . Heritina                     |
| 2 PHILHEALTH NO.   | 13-025278101-4  |                           | ZIP CODE                                |  |  |  | 6521                            |                                      | Landing I                      |
| 3. SSS NO.   | 33-7921508-6  | B CONTRACT                | 19. TELEPHONE NO.                       | NA   |  |  |                                 |                                      |                                |
| 4. TIN NO.   | 482-445-147   |                           | 20. MOBILE NO.                          | 091615767  | 58   |  |                                 |                                      |                                |
| 5. AGENCY EMPLOYEE NO.   | NA  |                           | 21. E-MAIL ADDRESS (if any)             | haide.cue  | evas@vsu   | .edu.ph  |                                 |                                      |                                |
| I. FAMILY BACKGROUI  | VD.   | •                         |   |  |  |  |                                 |                                      |                                |
| 2. SPOUSE'S SURNAME  | CUEVAS  |                           |   | 23. NAME of Ch   | HILDREN (Write   | e full name and  | d list all)                     | DATE OF BIR                          | TH (mm/dd/yyyy)                |
| FIRST NAME   | MELCENCIO   |                           | NAME EXTENSION (JR., SR) JR.            |  | MELECENT   | JUI B. CUE   | VAS                             | 6/25                                 | 5/2013                         |
| MIDDLE NAME  | ORENDAIN  |                           |   |  |  |  |                                 |                                      |                                |
| OCCUPATION   |   | NA NA                     |   |  |  |  |                                 |                                      |                                |
| EMPLOYER/BUSINESS NAME   |   | NA                        |   |  |  |  |                                 |                                      |                                |
| BUSINESS ADDRESS   |   | NA                        |   |  |  |  |                                 |                                      |                                |
| TELEPHONE NO.  |   | NA                        |   |  |  |  |                                 |                                      |                                |
| 4. FATHER'S SURNAME  | BAGARINAO   |                           | NAME EXTENSION (JR., SR)                |  |  |  |                                 |                                      |                                |
| FIRST NAME   | CARLOS  |                           | TOTAL CATERSION (St., St.)              |  |  |  |                                 |                                      |                                |
| MIDDLE NAME  | SORIA   |                           |   |  |  |  |                                 |                                      |                                |
| 5. MOTHER'S MAIDEN NAME  | WI 1 074  |                           |   |  |  |  |                                 |                                      |                                |
| SURNAME  | MILLOZA   |                           |   |  |  | maconium or parameter of the   |                                 |                                      |                                |
| FIRST NAME   | MARGARITA   |                           |   |  |  |  |                                 |                                      |                                |
| MIDDLE NAME  I. EDUCATIONAL BACK   |   |                           |   |  | (0   | ontinue on se  | parate sheet if neces           | sary)                                |                                |
| 6.   |   |                           |   |  |  |  | HIGHEST LEVEL                   |                                      | SCHOLARSHIPI                   |
| LEVEL  | NAME OF<br>(Write   |                           | BASIC EDUCATION/DEGF<br>(Write in full) | EE/COURSE  | From   | To   | UNITS EARNED (if not graduated) | YEAR<br>GRADUATED                    | ACADEMIC<br>HONORS<br>RECEIVED |
| ELEMENTARY   | SAN AGUSTIN ELEI  | MENTARY SCHOOL            | ELEMENTAR                               | Y  | 1991   | 1996   | GRADUATE                        | 1996                                 | 5th Honor                      |
| SECONDARY  | BUNGA NATIONA   | AL HIGHSCHOOL             | SECONDAR                                | Y  | 1996   | 2000   | GRADUATE                        | 2000                                 | NA                             |
| VOCATIONAL /<br>TRADE COURSE   | N N   | A                         | NA NA                                   |  | NA   | NA   | NA                              | NA                                   | NA .                           |
| COLLEGE  | VISAYAS STAT  | E UNIVERSITY              | BACHELOR IN ANIMAL                      | SCIENCE  | 2009   | 2012   | GRADUATE                        | Oct-12                               | NA                             |
| The state of the s | DESCRIPTION OF THE PERSON NAMED IN COLUMN 2 IN COLUMN |                           |   | The second secon | The same of the sa | -  |                                 | THE RESIDENCE AND PERSONS ASSESSMENT | -                              |

| 7. CARE   |                            | R SERVICE/ RA 1080 (BOARD/ BAR) UNDER RATING DATE OF SPECIAL LAWS/ CES/ CSEE RATING EXAMINATION / PLACE OF EXAMINATION / CONFERMENT  |                     |   |  |                   | LICENSE (if applicable        |                                 |             |
|---|----------------------------|--|---------------------|---|--|-------------------|-------------------------------|---------------------------------|-------------|
| BARANGAY ELIGIBILITY / DRIVER'S LICENSE (If Applicable) |                            |  | CONFERMENT          |   |  | NUMBER            | Date Validi                   |                                 |             |
| CIVIL SE  | RVICE EXAM                 | SUBPROFESSIONAL  | to gold advantage   | 3/13/2022                                   | LNU, TAC   | LOBAN CITY        | eds at elsein i               |                                 | R Any       |
|   |                            |  | HIVE THE PES FO     | ENTEGOOA BROAS                              | CONTRACTOR CASTA   |                   |                               | or sewe gan<br>Tourist survices | KITTA S     |
|   |                            |  |                     |   |  |                   |                               | A Section                       |             |
|   |                            |  |                     | N. SELVE THE THE PERSON                     |  |                   | 2713                          |                                 |             |
| <u> </u>  |                            | Euroself   |                     |   |  |                   |                               |                                 | 3554)       |
|   |                            |  |                     |   |  |                   | NGARINAO                      |                                 | 24400       |
|   |                            |  |                     |   | mater of   | Seatherny.        |                               |                                 | 375 Mg 4    |
| noliosiistu   | nsa ya 🔲 🗀                 |  |                     |   |  |                   |                               | -                               |             |
|   |                            |  | (Co                 | ntinue on separate sheet                    | THE RESIDENCE OF THE PARTY OF T | NELL YASYA        |                               |                                 |             |
|   | XPERIENCE                  |  |                     |   |  |                   |                               |                                 |             |
|   | ate employme<br>SIVE DATES | ent. Start from your recei   | it work) Descriptio | n of duties should b                        | e indicated in the attach  | ned Work Exp      | SALARYI JOBI PAY              |                                 |             |
|   | m/dd/yyyy)                 | POSITION I<br>(Write in full/Do not  |                     |   | ENCY / OFFICE / COMPANY //Do not abbreviate)   | MONTHLY<br>SALARY | GRADE (if applicable)& STEP   | STATUS OF<br>APPOINTMENT        | GOV<br>SERV |
| From  | То                         |  |                     |   |  |                   | (Format "00-0")/<br>INCREMENT |                                 | (Y/N        |
| 1/1/2021  | Present                    | Deprtment Clerk/dDRC   |                     | ENGIN                                       | NT OF GEODETIC<br>EERING-VSU   | 12, 174.80        | NA                            | JO                              | Y           |
| 1/1/2020  | 12/31/2020                 | Deprtment Clerk/dDRC   |                     | ENGIN                                       | NT OF GEODETIC<br>EERING-VSU   | 9,961.20          | NA                            | JO                              | Y           |
| 1/1/2019  | 12/31/2019                 | Deprtment Clerk/dDRC   | COO ACAUS           |   | NT OF GEODETIC<br>EERING-VSU   | 9,659.35          | NA                            | JO                              | Y           |
| 2/2/2015  | 12/31/2018                 | Deprtment Clerk  | 0.102.6x2           | DEPARTME                                    | NT OF GEODETIC<br>EERING-VSU   | 6,600.00          | NA                            | JO                              | Y           |
| 11/3/2014   | 12/31/2014                 | Encoder  |                     | DEPARTME                                    | NT OF BUSINESS   | 5,720.00          | NA                            | JO                              | Y           |
| 9/3/2014  | 10/31/2014                 | Encoder  |                     | MANAGEMENT-VSU  DEPARTMENT OF ECONOMICS-VSU |  | 6,160.00          | NA                            | JO                              | Y           |
|   |                            |  |                     |   |  |                   |                               | - 00                            |             |
|   |                            |  | 0.00000000          |   |  |                   | TELEBRIO                      |                                 |             |
|   |                            | 200.00   |                     |   |  |                   |                               |                                 |             |
|   |                            |  | J                   |   |  |                   |                               |                                 |             |
| d an (17)   | restant                    | denotes angress of   |                     |   |  |                   | * BAV                         | 38                              | H9D8.83     |
| 2105/201  |                            | BAVBUT 6 KUTI  | ROJEW               | ALCS AURE                                   | EDELTA AND   |                   | СТОНЯВЬЕ                      |                                 | ENDAN       |
|   |                            |  |                     |   |  |                   | Mack the                      |                                 | 0.5550.0    |
|   |                            |  |                     | 4   |  |                   |                               | -                               |             |
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| -   |                            |  |                     |   |  |                   |                               |                                 |             |
|   |                            |  |                     |   | All  |                   | OAMBIAG                       | la vari                         | GA 330      |
|   |                            |  |                     | (E. 1) (E. 1) (SE                           | NATION SHEAT   |                   | 20.17                         |                                 |             |
|   |                            |  |                     |   |  |                   | ABI                           |                                 |             |
|   |                            |  |                     |   |  |                   |                               | A Division                      |             |
|   |                            |  |                     |   |  |                   |                               |                                 |             |
|   |                            |  |                     |   |  |                   | RCARITA                       |                                 | -00         |
|   | Site of                    | o Nicolana, attingan, o and automotive   |                     |   |  |                   | ACHUY                         | 5                               | 9844        |
|   |                            |  |                     |   |  |                   |                               |                                 |             |
| SAUGNOUS<br>SOACK                                       | BADY VIDA                  | STATES OF SOME STATES  | o dolace same       | poedaceovo i scus                           | DEAS   | TO SEE            | 91                            |                                 |             |
| 0.38  | CA CANADA                  | District the second sec | Tool.               | (90) 200 (20)                               |  |                   |                               |                                 |             |
| oli niti  | 1998                       | TESS GRADUATE  | 1991                | YAATVAMAJA                                  | 300938   | RATIONALIS        | TRUDA HAR                     |                                 | - Xefai     |
|   |                            |  |                     | SECONDARY                                   | JOOKSE   | TONAL HIGH        | AM ADMUS                      |                                 | 550         |
| ASI   | 2000                       | STAUGARO OSIS 1  | 3031                |   | 332,7076   |                   |                               |                                 | Like        |
| du  | AM                         | AM AM  | AM                  | All   |  | All .             |                               |                                 | area un     |
|   | 21-00                      |  | - Delign   1/2      | PICO JAWKA 2130 PM                          | 263 3585   | AUGRIJ STATS      | AVERN                         |                                 |             |
| AVA   | AH                         | AN AN  |                     |   |  |                   |                               |                                 |             |
|   |                            |  |                     |   | 1  |                   | -3                            | 1                               |             |
|   |                            |  | (LON                | tinue on separate sheet i                   | DATE   |                   | May 20                        | 30                              | UC PE       |

| CS Form No. 212<br>Revised 2017      | THE MESTAL                | PERSO                      | NAL DAT                                | 'A SH  | IEE                          | radzu ja<br><b>T</b> azasto        | e service yourse                | OCAUTAD ARBI<br>ACOSTO<br>OLIF YASHAANI |  |
|--------------------------------------|---------------------------|----------------------------|--|--|------------------------------|------------------------------------|---------------------------------|---|--|
| WARNING: Any misrepresen concerned.  | ntation made in the Perso | onal Data Sheet and th     | e Work Experience Sheet s              | hall cause the t   | filing of ad                 | ministrative                       | e/criminal case/s               | against the p                           | erson  |
| READ THE ATTACHED GUID               | E TO FILLING OUT THE      | PERSONAL DATA SHE          | EET (PDS) BEFORE ACCON                 | IPLISHING THE  | PDS FOR                      |                                    |                                 |   |  |
| Print legibly. Tick appropriate bo   |                           | sheet if necessary. Indica | ate N/A if not applicable. DO N        | IOT ABBREVIAT  | re.                          | 1. CS ID N                         | 2                               | (Do not fill up                         | o. For CSC use or                                  |
| 2. SURNAME                           | CUEVAS                    |                            |  |  |                              |                                    |                                 |   |  |
| FIRST NAME                           | HAIDE                     |                            |  |  |                              |                                    | NAME EXTENSION (                | JR., SR)                                | NA   |
| MIDDLE NAME                          | BAGARINAO                 |                            |  |  |                              |                                    |                                 |   |  |
| DATE OF BIRTH (mm/dd/yyyy)           | 7/1                       | 0/1983                     | 16. CITIZENSHIP                        |  |                              |                                    |                                 |   |  |
| (mindaggggg                          |                           |                            |  |  | ☑ Fil                        | ipino (                            | Dual Citizenshi                 | by natur                                | alization  |
| 4. PLACE OF BIRTH                    | BAYBA                     | IY, LEYTE                  | If holder of dual citizenship,         |  |                              |                                    | Pls. indicate                   | country:                                |  |
| 5. SEX                               | ☐ Male                    | ☑ Female                   | please indicate the                    | details.   |                              |                                    |                                 |   | •  |
| 6 CIVIL STATUS                       | Single                    | ☐ Married                  | 17. RESIDENTIAL ADDRESS                |  |                              |                                    |                                 | *************************************** |  |
|                                      | ☐ Widowed ☐ Other/s:      | ✓ Separated                | and the second of the second           | PUF  | ISE/Block/Lot<br>ROK ORCH    | IIDS                               |                                 | Street                                  | TO STORE ASSESSMENT OF THE STORE ASSESSMENT OF THE |
| 7. HEIGHT (m)                        | 1.59                      |                            |  | Season and the season of the s | bdivision/Villa<br>AYBAY CIT | SECURITION PROPERTY AND ADDRESS.   |                                 | Barangay<br>LEYTE                       |  |
| 8. WEIGHT (kg)                       | 58                        | Tariff Dirack              | ZIP CODE                               | 0  | ity/Municipalit              | У                                  | 6521                            | Province                                |  |
| 9. BLOOD TYPE                        | O+                        |                            | 18. PERMANENT ADDRESS                  |  |                              | 3/100/4/4                          | 0021                            | 100000                                  | -  |
| 10. GSIS ID NO.                      | NA All                    | N Na sin                   |  | - Personal Contract of the Con | se/Block/Lot<br>POK ORCH     | THE RESERVE OF THE PERSON NAMED IN |                                 | Street                                  |  |
|                                      |                           |                            |  | Su   | bdivision/Villa              | ge                                 |                                 | Barangay                                | 770000   |
| 11. PAG-IBIG ID NO.                  | 1212-0219-5153            |                            |  |  | ty/Municipalit               |                                    |                                 | LEYTE<br>Province                       |  |
| 12. PHILHEALTH NO.                   | 13-025278101-4            |                            | ZIP CODE                               |  |                              |                                    | 6521                            |   | Labring  |
| 13. SSS NO.                          | 33-7921508-6              |                            | 19. TELEPHONE NO.                      | NA   |                              |                                    |                                 |   |  |
| 14. TIN NO.                          | 482-445-147               |                            | 20. MOBILE NO.                         | 0916157675   | 8                            |                                    |                                 |   |  |
| 15. AGENCY EMPLOYEE NO.              | NA                        |                            | 21. E-MAIL ADDRESS (if any)            | haide.cue  | /as@vsi                      | u.edu.ph                           |                                 |   |  |
| II. FAMILY BACKGROUM                 |                           | 4                          |  |  |                              |                                    |                                 |   |  |
| 22. SPOUSE'S SURNAME                 | CUEVAS                    |                            |  | 23. NAME of CH   | ILDREN (Wri                  | te full name an                    | d list all)                     | DATE OF BIF                             | RTH (mm/dd/yyyy)                                   |
| FIRST NAME                           | MELCENCIO                 |                            | NAME EXTENSION (JR., SR) JR.           |  | MELECENT                     | r Jui B. Cui                       | EVAS                            | 6/2                                     | 5/2013   |
| MIDDLE NAME                          | ORENDAIN                  |                            |  |  |                              |                                    |                                 |   |  |
| OCCUPATION                           |                           | NA                         |  |  |                              |                                    |                                 |   |  |
| EMPLOYER/BUSINESS NAME               |                           | NA                         |  |  |                              |                                    |                                 |   |  |
| BUSINESS ADDRESS                     |                           | NA NA                      |  |  |                              | THE RELIGION CO.                   |                                 |   |  |
| TELEPHONE NO.                        |                           | NA                         |  |  |                              |                                    | and the second                  |   |  |
| 4. FATHER'S SURNAME                  | BAGARINAO                 |                            | NAME EXTENSION (JR., SR)               |  |                              |                                    |                                 |   |  |
| FIRST NAME                           | CARLOS                    |                            | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ |  |                              |                                    |                                 |   |  |
| MIDDLE NAME  5. MOTHER'S MAIDEN NAME | SORIA                     |                            |  |  |                              |                                    |                                 |   |  |
| SURNAME                              | MILLOZA                   |                            |  |  |                              |                                    |                                 |   |  |
| FIRST NAME                           | MARGARITA                 |                            |  |  |                              |                                    |                                 |   |  |
| MIDDLE NAME                          | CAYUNDA                   |                            |  |  | 10                           | Continue on s                      | eparate sheet if neces          | econd                                   |  |
| II. EDUCATIONAL BACK                 |                           |                            |  |  | (C                           | - Mariue Uli Si                    | purate aneer it riede.          |   |  |
| 16.                                  |                           | SCHOOL                     | BASIC EDUCATION/DEGRI                  | EE/COLIBSE   | PERIOD OF                    | ATTENDANCE                         | HIGHEST LEVEL/                  | VEST                                    | SCHOLARSHIP!                                       |
| LEVEL                                |                           | o in full)                 | (Write in full)                        | Josephol   | From                         | То                                 | UNITS EARNED (if not graduated) | YEAR<br>GRADUATED                       | ACADEMIC<br>HONORS<br>RECEIVED                     |
| ELEMENTARY                           | SAN AGUSTIN ELE           |                            | ELEMENTAR'                             |  | 1991                         | 1996                               | GRADUATE                        | 1996                                    | 5th Honor  |

SECONDARY **BUNGA NATIONAL HIGHSCHOOL** SECONDARY 1996 2000 GRADUATE 2000 NA VOCATIONAL / TRADE COURSE NA NA NA NA NA COLLEGE VISAYAS STATE UNIVERSITY BACHELOR IN ANIMAL SCIENCE 2009 2012 GRADUATE Oct-12 NA GRADUATE STUDIES NA NA NA NA NA NA NA SIGNATURE DATE May 20, 2022

CS FORM 212 (Revised 2017), Page 1 of 4

| 7. CARE   |              | 1080 (BOARD/ BAR) UNDER              | RATING                      | DATE OF                   |  |   |  | LICENSE (if a            | ipplicable)              |
|---|--------------|--------------------------------------|-----------------------------|---------------------------|--|---|--|--------------------------|--------------------------|
| BARANGAY ELIGIBILITY / DRIVER'S LICENSE (If Applicable)  CIVIL SERVICE EXAM SUBPROFESSIONAL |              |                                      | EXAMINATION /<br>CONFERMENT | PLACE OF EXAMIN           | ATION / CONFER   | (MENI                                   | NUMBER   | Date of<br>Validity      |                          |
|   |              |                                      | 3/13/2022                   | LNU, TAC                  | LOBAN CITY   | odi al obeta t                          | olad rayan gensk                                       | end to                   |                          |
|   |              | 125                                  | HER FOR FOR                 | LIPMOGGA BROAS            | RELEASE FROM LAND  |   |  | or souce case            | KTTA SK                  |
|   |              |                                      |                             |                           |  |   |  |                          |                          |
|   |              |                                      |                             |                           | Auto Andrews Townson   |   | BAY SU   |                          |                          |
| 8-2   | 180,000,0    |                                      |                             |                           |  | *************************************** | 301  |                          | Stillet                  |
|   |              |                                      |                             |                           |  |   | AGARINAO   |                          | QMAIRS.                  |
|   |              |                                      |                             | 900                       | support  | Prorises                                |  |                          | SUFEE SE                 |
| netrosilis  | men ya 🗍 🕠   | mia și 🖾 💮 💮                         |                             |                           |  |   |  |                          |                          |
|   |              |                                      | (Co                         | ntinue on separate sheet  | if necessary)  | velkysy:                                |  |                          |                          |
|   | EXPERIENCE   | :<br>ant. Start from your recen      |                             |                           |  |   |  |                          |                          |
|   | JSIVE DATES  |                                      |                             |                           |  | ea Work Exp                             | SALARY/ JOB/ PAY                                       |                          |                          |
| From From   | m/dd/yyyy)   | POSITION TI<br>(Write in full/Do not |                             |                           | ENCY / OFFICE / COMPANY I/Do not abbreviate)   | MONTHLY<br>SALARY                       | GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT | STATUS OF<br>APPOINTMENT | GOVT<br>SERVICE<br>(Y/N) |
| 1/1/2021  | Present      | Deprtment Clerk/dDRC                 |                             |                           | NT OF GEODETIC   | 12, 174.80                              | NA   | JO                       | Υ                        |
| 1/1/2020  | 12/31/2020   | Deprtment Clerk/dDRC                 |                             | DEPARTME                  | EERING-VSU<br>NT OF GEODETIC   | 9,961.20                                | NA NA  | JO                       | Y                        |
| 1/1/2019  | 12/31/2019   | Deprtment Clerk/dDRC                 |                             | DEPARTME                  | EERING-VSU<br>NT OF GEODETIC   | 9,659.35                                | NA NA  | JO                       | Y                        |
| 2/2/2015  | 12/31/2018   | Deprtment Clerk                      | DAO XORUS<br>Augusta        |                           | EERING-VSU<br>NT OF GEODETIC   |   |  |                          |                          |
|   | - SIV-       |                                      | 3 Y 18 Y 28 1               |                           | EERING-VSU<br>NT OF BUSINESS   | 6,600.00                                | NA   | JO                       | Υ                        |
| 11/3/2014   | 12/31/2014   | Encoder                              |                             | MANAC                     | SEMENT-VSU   | 5,720.00                                | NA   | JO                       | Υ                        |
| 9/3/2014  | 10/31/2014   | Encoder                              |                             | DEPARTMENT                | OF ECONOMICS-VSU   | 6,160.00                                | NA   | JO                       | Υ                        |
|   |              |                                      | 20735343                    |                           |  |   | 121,751.0  |                          |                          |
|   |              |                                      |                             |                           |  |   |  |                          |                          |
|   |              |                                      | J.                          |                           |  |   |  | de terre                 |                          |
|   | eand i       | de las consensarios de esta          |                             |                           |  |   | € 8AVÅ   |                          | 19518.3534               |
| 2792922   |              | BAVBUD 8 MUTV                        | 00.113M                     | 1 - ALCE N.1908           | safa (100%)  |   | ОГРИВОЛ  | 9                        | Sasan T                  |
|   |              |                                      |                             |                           | TO CONTROL OF THE CON |   | ИАЛЕ   |                          | 1500ya 21                |
|   |              |                                      |                             |                           | 7,8  |   |  |                          |                          |
|   |              |                                      |                             |                           |  |   |  |                          |                          |
|   |              |                                      |                             |                           |  |   |  | 20                       | HOGA OVE                 |
|   |              |                                      |                             |                           | Add .  |   |  |                          | Con station              |
|   |              |                                      |                             |                           | ucha exal  |   | OAMMAO   | 310                      | tikur 800                |
|   |              |                                      |                             |                           | ROSE L   |   | 20.87  |                          | 31/8                     |
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|  | ESS OF ORGANIZATION Write in full)   |  | SIVE DATES<br>n/dd/yyyy)   | NUMBER OF HOURS  | erennen auf f                           | POSITION / NATURE OF WORK                             |  |
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| I. LEARNING AND DEVELOPMENT  | (L&D) INTERVENTIONS/TRAINING   | PROGRAMS A                                       | TTENDED  |  |   |   |  |
| nt from the most recent L&D/training program   | and include only the relevant L&D training taker   | THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER. | The same of the sa | hief/Executive/Mana  | gerial positions)                       |   |  |
| D. TITLE OF LEARNING AND DEVELOPM<br>(W  | ATTE   | INCLUSIVE DATES OF<br>ATTENDANCE<br>(mm/dd/yyyy) |  | Type of LD<br>(Managerial/<br>Supervisory/<br>Technical/etc) | CONDUCTED/ SPONSORED BY (Write in full) |   |  |
|  | ои Ы — — — — — — —   | From   | To   |  | r sormacon etc)                         |   |  |
| 9001:2015 Awareness/Re-awareness Webinar<br>letation Webinar on Employees' Duties and Respon | nsibilities and Good Customer Service for Clerks,  | 09/13/2021                                       | 09/13/2021   | 4  |   | OP-VSU  |  |
| Os and Utility Workers   | orcs Control Procedure Manual (PM) and Guideline   | 09/23/2021                                       | 09/23/2021   | 4 2500   | CAVION SI JATE                          | OP-VSU  |  |
|  | Department Enrolment Focal Persons and College   | 09/20/2021                                       | 09/20/2021   | 3,50   |   | ODQA-VSU  |  |
| ne Agents  | - Process and Market State Could be a second and could be  | 07/29/2021                                       | 07/29/2021   | 2  |   | OVPAA-VSU   |  |
| 9001:2015 Awareness/Re-awareness Webinar   | 11/27/2020   | 11/27/2020                                       | 8  |  | VSU                                     |   |  |
| inar presentation on "Document Tracking System"  |  | 11/13/2020                                       | 11/13/2020   | 3  | S1000000                                | VSU   |  |
| ntation Workshop among JO clerks & Laboratory  | / Technicians  | 01/15/2019                                       | 01/15/2019   | 4  | fullan                                  | VSU TELEVENA  |  |
| Documentation Training   | If YES, please specify:  | 01/16/2019                                       | 01/17/2019   | 12   |   | VSU VSU   |  |
| ntation on the PRIME-HRM of the Civil Service C  | Commission   | 07/12/2018                                       | 07/12/2018   | 8  |   | ODAHRD-VSU  |  |
| 9001:2015 Orientation  | ow [] av [av [av [av [av [av [av [av [av [av   | 05/03/2018                                       | 05/03/2018   | 8  |   | VSU   |  |
| erence Among Department Based HRMPs on P   | ersonnel related Policies/Documents/Requiremen   | 11/11/2017                                       | 11/11/2017   | 8  | or should be some                       | ODAHRD-VSU  |  |
| ntation Seminar of Basic Customer Service and V  | Nork values  | 11/05/2017                                       | 11/05/2017   | 8  |   | ODAHRD-VSU  |  |
| ntation on Preparation of Documents for the Inter  | nal Audit  | 07/26/2017                                       | 07/26/2017   | 8  | 30                                      | DV 98 O TERMA VSU                                     |  |
| rds Management Training  | 10000 (220)   V201 (220)   | 07/06/2017                                       | 07/07/2017   | 16   | AL, 83.7                                | AGM A CANASA VSU AGAS                                 |  |
| wareness Training Course ISO 9001:2015   | (Can) (Can)  | 01/26/2017                                       | 01/27/2017   | 16   | ARK                                     | YOU DESTRUCTED VSU                                    |  |
| OTHER INFORMATION  | (Co  | ntinue on separate s                             | heet if necessary)   |  |   |   |  |
| SPECIAL SKILLS and HOBBIES   | 32 NO  | N-ACADEMIC DISTIN<br>(Write                      |  | IITION   |   | MEMBERSHIP IN ASSOCIATION/ORGANIZATIO (Write in full) |  |
| puter Skills (Microsoft)   | The second secon | NA   |  |  |   | NA NA   |  |
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| ing  |  | MAN  |  |  |   | seen ment respect to Phil/collin                      |  |
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|  | 444  | S. 48 - 18 - 10                                  |  |  |   | arear ace or issuance — saybay City                   |  |
| SIGNATURE  | (Co)   | ntinue on separate si                            | heel if necessary)   | DATI   |   | May 20, 2022  |  |

| 0.4        |  |   |  | A TANK OF SHARE THE PARTY OF SHARE STORY   |  |  |
|------------|--|---|--|--|--|--|
| 34.        | Are you related by consanguinity or affinity to the appointing chief of bureau or office or to the person who has immediately Bureau or Department where you will be apppointed, a. within the third degree?   | ng or recommending authority, or to the te supervision over you in the Office,  | YES VO   | GARBAN   |  |  |
|            | b. within the fourth degree (for Local Government Unit - Ca  | reer Employees)?  | YES NO   | The second secon |  |  |
| 35.        | a. Have you ever been found guilty of any administrative of  | ☐ YES ☑ NO If YES, give details:  |  |  |  |  |
|            | b. Have you been criminally charged before any court?  |   | ☐ YES ☑ NO If YES, give details: Date Filed: Status of Case/s:   |  |  |  |
| 36,        | Have you ever been convicted of any crime or violation of a by any court or tribunal?  |   |  |  |  |  |
| 37.        | Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, erout (abolition) in the public or private sector?   | e following modes: resignation,<br>nd of term, finished contract or phased  | ✓ YES □ NO If YES, give details: End of term in Manila   | CONTROL OF CHARACTERS AND A SALE   |  |  |
| 38.        | a. Have you ever been a candidate in a national or local ele<br>Barangay election)?  | ☐ YES ☑ NO If YES, give details:  | enbell zens akt allzierkinkk (100 h)   |  |  |  |
|            | <ul> <li>b. Have you resigned from the government service during the last election to promote/actively campaign for a national or l</li> </ul>   | YES NO If YES, give details:  |  |  |  |  |
| 39.        | Have you acquired the status of an immigrant or permanent  | ☐ YES ☑ NO If YES, give details (country):  |  |  |  |  |
| a.<br>b.   | Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag<br>7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972),<br>Are you a member of any indigenous group?  Are you a person with disability?  Are you a solo parent?  | ina Carta for Disabled Persons (RA please answer the following items:   | ☐ YES ☑ NO If YES, please specify: ☐ YES ☑ NO If YES, please specify ID No: ☑ YES ☐ NO If YES, please specify ID No: | nonde i Blenet: Ok prima dalah si salah sa |  |  |
| 41.        | REFERENCES (Person not related by consanguinity or affinity to applicant /   | appointee)  | The latest the second  |  |  |  |
|            | NAME   | ADDRESS   | TEL, NO.   | Arrigine on Company  |  |  |
|            | DR. JANNET C. BENCURE  | VSU-CET   | (053) 565-0600   | engel ab au  |  |  |
|            | PROF. FLORENTINO F. MORALES, JR.   | VSU-DGE   | local 1084<br>(053) 565-0600   | ( a )  |  |  |
|            | ENGR. GLADYS G. DOYDORA  | VSU-DCE   | local 1027<br>(053) 565-0600   | tiell caret  |  |  |
| (<br> <br> | declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertiner Philippines. I authorize the agency head/authorized represagree that any misrepresentation made in this document administrative/criminal case/s against me. | his Personal Data Sheet which is a tr<br>t laws, rules and regulations of the l<br>entative to verify/validate the contents | Republic of the  |  |  |  |
| Gov<br>PLE | ernment Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)  ASE INDICATE ID Number and Date of Issuance   | _1 .  |  |  |  |  |
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| ID/Li      | cense/Passport No.: 13-025278101-4   | Signature (Sign inside the bo   | ix)  | prize  |  |  |
| Date       | /Place of Issuance: Baybay City  | May 25, 26) Date Accomplished   |  | jh⊱ i Hamomark   |  |  |
|            | SUBSCRIBED AND SWORN to before me this   | , affiant exhib   | iting his/her validly issued government ID   | as indicated above.  |  |  |
|            | gan 25 füt ba-kidin 515 (ERON RO   | 0   | 10   |  |  |  |
|            | 30.7   | Person Administering Oath   |  |  |  |  |