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. 1. CS ID No. Print legibly. Tick appropriate boxes 🔲) and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. (Do not fill up. For CSC use only I. PERSONAL INFORMATION 2. SURNAME VERIL NAME EXTENSION (JR., SR) FIRST NAME RANNIE MIDDLE NAME **BERONDO** 3. DATE OF BIRTH 02/11/995 16. CITIZENSHIP (mm/dd/yyyy) ☑ Filipino ☐ Dual Citizenship ☐ by birth □ by naturalization 4. PLACE OF BIRTH **BAYBAY LEYTE** If holder of dual citizenship, Pls. indicate country: please indicate the details. 5. SEX ☐ Male ✓ Female ☐ Single 17. RESIDENTIAL ADDRESS ☐ Married 6 CIVIL STATUS House/Block/Lot No. ☑ Widowed ☐ Separated **PANGASUGAN** ☐ Other/s: Subdivision/Village **BAYBAY CITY LEYTE** 7. HEIGHT (m) 1.63 m 8. WEIGHT (kg) 56 kg ZIP CODE 6521 18. PERMANENT ADDRESS 9. BLOOD TYPE House/Block/Lot No. Street **PANGASUGAN** 10. GSIS ID NO. N/A Subdivision/Village Barangay **BAYBAY CITY LEYTE** 11 PAG-IBIG ID NO 121201370391 City/Municipality Province 12. PHILHEALTH NO. 13-050190531-4 ZIP CODE 6521 N/A 13. SSS NO. N/A 19. TELEPHONE NO. 14. TIN NO. 09466752935 473-318-551-000 20. MOBILE NO. 15. AGENCY EMPLOYEE NO. VJO00856 21. E-MAIL ADDRESS (if any) rannieaningveril2018@gmail.com FAMILY BACKGROUND N/A 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) 22. SPOUSE'S SURNAME NAME EXTENSION (JR., SR) N/A FIRST NAME N/A N/A N/A N/A MIDDLE NAME N/A N/A N/A N/A OCCUPATION N/A N/A N/A EMPLOYER/BUSINESS NAME **BUSINESS ADDRESS** N/A N/A N/A TELEPHONE NO. N/A N/A N/A VFRII N/A N/A 24. FATHER'S SURNAME NAME EXTENSION (JR., SR) FIRST NAME **RONALD** LIBREA MIDDLE NAME 25. MOTHER'S MAIDEN NAME SURNAME **BERONDO** FIRST NAME **LYDIA**

MIDDLE NAME	BESTUDIO			(Continue on separate sheet if necessary)					
III. EDUCATIONAL BACKGROUND									
26. LEVEL	6. NAME OF SCHOOL BASIC EDUCATIO (Write in full) (Write		E/COURSE PERIOD OF ATTENDANCE		HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED			
				From	To	(**************************************		RECEIVED	
ELEMENTARY	MENTARY PANGASUGAN ELEMENTARY SCHOOL			2000	2006		2006	WITH HONOR	
SECONDARY	VISAYAS STATE LABORATORY HIGH SCHOOL			2006	2011		2011	WITH HONOR	
VOCATIONAL / TRADE COURSE									
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIE AGRIBUSINES	-	2011	2015		2015		
GRADUATE STUDIES									
(Continue on separate sheet if necessary)									

SIGNATURE

DATE

IV CIVIL SI	EDVICE ELIC	NOU ITV				_	_		_
	ERVICE ELIG			DATE OF				LICENSE (if ap	oplicable)
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE RATING (If Applicable)			EXAMINATION / CONFERMENT	TION / CONFER	TION / CONFERMENT		Date of		
	CSE DET SUPPROFESSIONAL LEVEL 92.0 2/26/2023 NEW ORMOC CITY NATIONAL HIGH SCHOOL,				NUMBER	Validity			
- CSL-F	FT SUBFROIT	ESSIONAL LEVEL	03.0	3/20/2023	ORMO	C CITY			
V WORK F	XPERIENCE		(Cor	ntinue on separate sheet	if necessary)				
			t work) Description	n of duties should b	e indicated in the attache	ed Work Exp	erience sheet		
	SIVE DATES n/dd/yyyy)	POSITION T	TLE	DEPARTMENT / AG	ENCY / OFFICE / COMPANY	MONTHLY	SALARY/ JOB/ PAY GRADE (if	STATUS OF	GOV'T
From	То	(Write in full/Do not			II/Do not abbreviate)	SALARY	applicable)& STEP (Format "00-0")/ INCREMENT	APPOINTMENT	SERVICE (Y/N)
7/16/2022	PRESENT	DEPUTY DOCUMENTS			ND LABORATORY EQUIPMENT	603.40/DAY		JOB ORDER	Y
3/1/2017	12/31/2021	CONTROLLER ADMINISTRATIV		ACCOUNTING D	S STATE UNIVERSITY EPARTMENT/VISAYAS	553.40/DAY		JOB ORDER	Ү
6/1/2015		PART-TIME INST		STATE DEPARTMEN	UNIVERSITY T OF BUSINESS AND				
6/1/2015	6/1/2016	PART-TIME INS	IRUCIUR	MANAGEMENT/VIS	AYAS STATE UNIVERSITY	120/HOUR		JOB ORDER	Y
			/*	tinuo en acceptado	if nagagari				
SIGNA	ATURE		(Coi	ntinue on separate sheet	DATE				
GIGIAF					DAIL		CS	FORM 212 (Revised 20	17) Page 2 of 4

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S							
29. NAME & ADDRESS OF ORGANIZATION (Write in full)			'E DATES d/yyyy) To	NUMBER OF HOURS		POSITION / NATURE OF WORK	
N/A			N/A	N/A		N/A	
N/A			N/A	N/A		N/A	
N/A			N/A	N/A		N/A	
N/A			N/A	N/A		N/A	
N/A		N/A	N/A	N/A		N/A	
N/A		N/A	N/A	N/A		N/A	
N/A			N/A	N/A	N/A		
VII. LEARNING AND DEVELOPMENT (L&D)		tinue on separate s ROGRAMS AT					
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)			DATES OF DANCE d/yyyy)	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
ISO 9001:2015 AWARENESS/RE-AW	/ARENESS WEBINAR	From 8/29/2023	8/29/2023	4.0		VISAYAS STATE UNIVERSITY	
WEBINAR 11313 SAFE SF	PACES ACT	12/10/2020	12/10/2020	3.0		VISAYAS STATE UNIVERSITY	
ISO 9001:2015 AWARENESS/RE-AW	/ARENESS WEBINAR	11/27/2020	11/27/2020	4.0		VISAYAS STATE UNIVERSITY	
WEBINAR DOCUMENT TRAC		11/13/2020	11/13/2020	3.0		VISAYAS STATE UNIVERSITY	
WORKSHOP ON BOOKKEEPING & BASIC ACCOUNTANT	•	9/28/2019	9/28/2019	8.0		HACKS4GROWTH TRAINING & DEVELOPMENT	
ORIENTATION WORKSHOP AMONG JO C TECHNICIANS		1/15/2019	1/15/2019	8.0		VISAYAS STATE UNIVERSITY	
TARGET SETTING WOI		8/20/2018	8/20/2018	16.0		VISAYAS STATE UNIVERSITY	
ISO 9001:2015 ORIENTATION & WRITESHOP A	MONG CLERK & SECRETARIES	1/15/2018	1/15/2018	8.0		VISAYAS STATE UNIVERSITY	
	(Con	tinue on separate s	sheet if necessary				
VIII. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)					33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
COMPUTER SKILLS	N/A					N/A	
ADMINISTRATIVE SKILLS					N/A		
BOOKKEEPING SKILLS					N/A		
INTERPERSONAL SKILLS		N/A			N/A		
	(Continue on separate sheet if necessary)						
SIGNATURE				DA	ATE	CS FORM 212 (Revised 2017), Page 3 of 4	

34.	Are you related by consanguinity or affinity to the appointin 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?	☐ YES	☑ NO				
	b. within the fourth degree (for Local Government Unit - Ca	☐ YES If YES, give detail	☑ NO ls:				
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 If YES, give detail Date Filed: Status of Case/s:	NO is:				
36.	Have you ever been convicted of any crime or violation of a by any court or tribunal?	☐ YES ☑ NO If YES, give details:					
	Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, export (abolition) in the public or private sector?	☐ YES ☑ NO If YES, give details: ————————————————————————————————————					
38.	a. Have you ever been a candidate in a national or local ele Barangay election)?	☐ YES ☑ NO If YES, give details:					
	b. Have you resigned from the government service during t election to promote/actively campaign for a national or local	☐ YES ☑ NO If YES, give details:					
39.	Have you acquired the status of an immigrant or permanen	☐ YES ☑ NO If YES, give details (country): ————————————————————————————————————					
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972)	•					
a.	Are you a member of any indigenous group?		☐ YES If YES, please specif	y:			
b.	Are you a person with disability?		☐ YES ☑ NO If YES, please specify ID No:				
C.	Are you a solo parent?	☐ YES ☑ NO If YES, please specify ID No:					
41.	REFERENCES (Person not related by consanguinity or affinity to applicant	nt /appointee)					
	NAME	ADDRESS	TEL. NO.				
	ENGR. MARLON G. BURLAS	VISAYAS STATE UNIVERSITY	09176341520				
	ENGR. JOHN ALLAN A. GULLES	VISAYAS STATE UNIVERSITY	09125873306				
40	ENGR. PHLOEM D. GALUPO	VISAYAS STATE UNIVERSITY	09264463556				
42.	I declare under oath that I have personally accomplishe complete statement pursuant to the provisions of pertir Philippines. I authorize the agency head/authorized represe agree that any misrepresentation made in this doct administrative/criminal case/s against me.	nent laws, rules and regulations of the entative to verify/validate the contents state	Republic of the ed herein.	E By E & & &			
PI	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) LEASE INDICATE ID Number and Date of Issuance overnment Issued ID: Driver's License						
ID	/License/Passport No.: H12-23-003395	Signature (Sign inside the b	ox)				
Da	ate/Place of Issuance: 09/13/2022/LTO BAYBAY CITY	,	Right Thumbmark				
	SUBSCRIBED AND SWORN to before me this, affiant exhibit			d government ID as indicated above.			
Person Administe			th				