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 CHING TO FILLING OUT THE PERSONAL DATA SHEET (PDS) REFORE ACCOMPLISHING THE PDS FORM

READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM. Print legibly. Tick appropriate boxes () and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. 1. CS ID No. (Do not fill up. For CSC use only)									
I. PERSONAL INFORMATIC		ate N/A ii not applicable. DO	NOT ABBREVI	AIE.	I. CS ID NO.		(Do not illi up. F	or CSC use only)	
2. SURNAME	Timkang								
FIRST NAME	Andy NAME EXTENSION (JR., SR) N/A								
MIDDLE NAME	Lopez								
3. DATE OF BIRTH (mm/dd/yyyy)	04/02/1994	✓ Filipino ☐ Dual Citizenship ☐ by birth ☐ by naturalization							
4. PLACE OF BIRTH	Ormoc City	If holder of dual citize		Pls. indicate country:					
5. SEX	✓ Male ☐ Female	please indicate the d	please indicate the details.		Philippines				
6. CIVIL STATUS	✓ Single	17. RESIDENTIAL ADDRESS		zone 6 use/Block/Lot No. Gi ubdivision/Village			Street Guadalupe (Utod) Barangay		
7. HEIGHT (m)	3.00		C	BAYBAY ty/Municipality			LEYTE Province		
8. WEIGHT (kg)	64.00	ZIP CODE			6521				
9. BLOOD TYPE	B+	18. PERMANENT ADDRESS	Hou	se/Block/Lot N	lo		Street		
10. GSIS ID NO.	N/A								
11. PAG-IBIG ID NO.	N/A			Subdivision/Village City/Municipality			Barangay Province		
12. PHILHEALTH NO.	N/A	ZIP CODE		полисе полите					
13. SSS NO.	N/A	19. TELEPHONE NO.		N/A					
14. TIN NO.	N/A	20. MOBILE NO.		951-799-8179					
15. AGENCY EMPLOYEE NO.	15. AGENCY EMPLOYEE NO. VJO01303 21. E-MAIL ADDRESS (if any) andy.lopez@vsu.edu.ph								
II. FAMILY BACKGROUND									
22. SPOUSE\'S SURNAME	N/A	hans extension (ID, OD)	23. NAME of CHILDREN (Write full name and list all)		id list all)	DATE OF BIRTH (mm/dd/yyyy)			
FIRST NAME	N/A	NAME EXTENSION (JR., SR) N/A	Adrian Al Franco Caintic T		-		3/2020		
MIDDLE NAME	N/A		Axl Dain Theodore Caintic Timkang			Timkang	12/15/2021		
OCCUPATION	N/A								
EMPLOYER/BUSINESS NAME	N/A								
BUSINESS ADDRESS	N/A								
TELEPHONE NO.	NE NO. N/A								
24. FATHER\'S SURNAME	HER\S SURNAME Timkang								
FIRST NAME	Teodorico	eodorico NAME EXTENSION (JR., SR) Sr.							
MIDDLE NAME	Sibi								
25. MOTHER\'S MAIDEN NAME	Josifina Durano Lopez								
SURNAME	Timkang								
FIRST NAME	Josifina								
MIDDLE NAME				(Continue on separate sheet if necessary)					
III. EDUCATIONAL BACKG	ROUND					HIGHEST		SCHOLARSHIP/	
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGR (Write in full)	EE/COURSE	PERIOD OF A	To	LEVEL/UNITS EARNED (if not graduated)	YEAR GRADUATED	ACADEMIC HONORS RECEIVED	
ELEMENTARY	San Jose Elementary School	Elementary		2000	2006		2006	N/A	
SECONDARY	Genaro B. Lureñana National High School	High School		2006	2010		2010	N/A	
VOCATIONAL/ TRADE COURSE	N/A								
COLLEGE	Visayas State University	Bachelor of Science in Agr	ibusiness	2010	2016		2016	N/A	
GRADUATE STUDIES N/A									
SIGNATURE	(0	Continue on separate sheet if nece	essary)		ATE		01/21/2025		
SIGNATURE				J DF	1/L	I	0 1/2 1/2020		

IV. CIVIL S	SERVICE I	ELIGIBILITY							
27 CADEED SEDVICE/ DA 1000 /DOADD/ DADVINDED DATE				DATE OF		LICENSE (if applicable)			
SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE RATING (If Applicable)			EXAMINATION / CONFERMENT	PLACE OF EXAMIN	ATION / CONFER	RMENT	NUMBER	Date of Validity	
Care	Career Service Sub-Professional Eligibility		08/11/2024	Maa	sin City		N/A	N/A	
V WODY	EVDEDIE	NCE		(Continue on separate she	eet if necessary)				
	EXPERIEI rate employm	NCE ent. Start from your recent	t work) Descripti	ion of duties should k	oe indicated in the attache	d Work Exper	ience sheet.		
	8. INCLUSIVE DATES (mm/dd/yyyy) POSITION TITLE (Write in full/Do not abbreviate)			DEPARTMENT / AG (Write in ful	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format"00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/N)	
10/07/2019	03/13/2020	Card Seller		Ormoo	c Fiesta Bingo	12,000.00	-	Contractual	N
11/09/2018	06/20/2019	Sales Agen	i	Danica Ba	10,000.00	-	Contractual	N	
				(Continue on separate she	eet if necessary)				
SIGNA	ATURE				DATE		01/21/ cs	2025 FORM 212 (Revised 20	017), Page 2 of 4

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S							
29. NAME & ADDRESS OF OR (Write in full)	GANIZATION		/E DATES d/yyyy) To	NUMBER OF HOURS	POSITION / NATURE OF WORK		
N/A		N/A	N/A	N/A		N/A	
VII. LEARNING AND DEVELOPMENT (L&D,			te sheet if necessary) IS ATTENDEL				
(Start from the most recent L&D/training program and include		r the last five (5) ye	ears for Division C		agerial positions)		
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)			INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy) From To		Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
HRIS Software Onboardi	ng	12/06/2023	12/06/2023	8	Technical	VSU HRMO	
The 5S Revolution for Clerk &	Heads	11/29/2023	11/29/2023	8	Technical	Visayas State University	
GPPB Basic Course Training On the RA 9184 and its Revised In 2016 for Visayas State Univ	nplementing Rules and Regulations Act of ersity	08/22/2023	08/24/2023	24	Technical	HRMO	
VIII. OTHER INFORMATION	(Continue on separat	te sheet if necessary)				
31. SPECIAL SKILLS and HOBBIES	32. NO		TINCTIONS / RECO	OGNITION	_	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
N/A	V/A (Write in full)					Philippine Guardian brotherhood incorporated	
			Beta Phi Upsilon / lambda Phi Delta				
CIONATURE		Continue on separat	te sheet if necessary)		TE	04/04/0005	
SIGNATURE				DA	\TE	01/21/2025	

34.	Are you related by consanguinity or affinity to the apportune the chief of bureau or office or to the person who has in Office, Bureau or Department where you will be appportune a. within the third degree? b. within the fourth degree (for Local Government Unit		ZNO ZNO			
35.	a. Have you ever been found guilty of any administrati	YES YES, give details:	ZNO			
	b. Have you been criminally charged before any court	YES VES, give details: Date Filed: Status of Case/s:	Z NO			
36.	Have you ever been convicted of any crime or violation regulation by any court or tribunal?	☐YES ☐YES, give details:	NO			
37.	Have you ever been separated from the service in any retirement, dropped from the rolls, dismissal, terminati phased out (abolition) in the public or private sector?	✓YES NO If YES, give details: stop because of the pandemic				
38.	a. Have you ever been a candidate in a national or loc (except Barangay election)?	☐YES ✓NO If YES, give details:				
	b. Have you resigned from the government service du last election to promote/actively campaign for a nation	☐YES ☑NO If YES, give details:				
39.	Have you acquired the status of an immigrant or perm	☐YES ✓NO If YES, give details (country):				
a. b.	Pursuant to: (a) Indigenous People\'s Act (RA 8371); (7277); and (c) Solo Parents Welfare Act of 2000 (RA 8 Are you a member of any indigenous group? Are you a person with disability? Are you a solo parent?	☐YES If YES, please specify: ☐YES If YES, please specify II	NO			
41.	REFERENCES (Person not related by consanguinity or affinity to a	pplicant /appointee)				
	NAME	ADDRESS	TEL. NO.	ID picture taken within the last 6 months		
				3.5 cm x 4.5 cm (passport size)		
				With full and handwritten name tag and signature over		
42.	I declare under oath that I have personally accomplise complete statement pursuant to the provisions of per Philippines. I authorize the agency head/authorized reagree that any misrepresentation made in this deadministrative/criminal case/s against me.	Republic of the stated herein. I	printed name Computer generated or photocopied picture is not acceptable PHOTO			
et G	Sovernment Issued ID (i.e.Passport, GSIS, SSS, PRC, Drivert's License, c.) PLEASE INDICATE ID Number and Date of Issuance overnment Issued ID: UMID O/License/Passport No.: 011307770197	Signature (Sign inside the 01/21/2025	box)			
	ate/Place of Issuance: 11/30/-0001 / ormoc city		Right Thumbmark			
	SUBSCRIBED AND SWORN to before me this	nibiting his/her validly issued	d government ID as indicated above.			
		Person Administering Oa				
		ath				