CS Form No. 212 Revised 2017	PERSOI	NAL DAT	A SH	IEE1	r				
WARNING: Any misrepresentat	ion made in the Personal Data Sheet and the	Work Experience Sheet sha	all cause the f	iling of adm	inistrative/	criminal case/s a	gainst the pe	rson	
concerned. READ THE ATTACHED GUIDE 1	TO FILLING OUT THE PERSONAL DATA SHEE	T (PDS) BEFORE ACCOMPL	ISHING THE I	PDS FORM.			-		
Print legibly. Tick appropriate boxes	(and use separate sheet if necessary. Indicate N/	. ,			1. CS ID No.		(Do not fill up. I	For CSC use only	
I. PERSONAL INFORMATION									
2. SURNAME	UNAJAN					T	NI /A		
FIRST NAME	RODERICK					NAME EXTENSION (JF	R., SR) N /A		
MIDDLE NAME	MAR								
DATE OF BIRTH (mm/dd/yyyy)	11/01/1981	16. CITIZENSHIP	✓ Filipino ☐ Dual Citizenship ☐ by birth ☐			☐ by naturalization			
4. PLACE OF BIRTH	CARMEN, BOHOL	If holder of dual citizer	nship, Pls. indicate c			country:			
5. SEX	✓ Male ☐ Female	please indicate the de	details. Philippines			•			
6 CIVIL STATUS	☐ Single ☐ Married ☐ Widowed ☐ Separated ☐ Other/s:	17. RESIDENTIAL ADDRESS	S	House/Block/Lot No. SITIO NANGKA Subdivision/Village			Street KILIM Barangay		
7. HEIGHT (m)	1.70 m		BAYBAY City/Municipality			LEYTE Province			
8. WEIGHT (kg)	78 kg	ZIP CODE		пулииныранц		6521	TTOVINCE		
9. BLOOD TYPE	A+	18. PERMANENT ADDRESS							
10. GSIS ID NO.	2006294529		Hou	ise/Block/Lot N FATIMA	0.	E	Street BUENAVISTA		
10. GSIS ID NO.	2000294529		Sul	bdivision/Villag		Barangay			
11. PAG-IBIG ID NO.	1210-1248-5081		CARMEN City/Municipality				BOHOL Province		
12. PHILHEALTH NO.	19-026616915-2	ZIP CODE		6319					
13. SSS NO.	0627502541	19. TELEPHONE NO.		(053)-563-1318					
14. TIN NO.	254960426	20. MOBILE NO.		+639171304169					
15. AGENCY EMPLOYEE NO.	V02091	21. E-MAIL ADDRESS (if any)	ro	roderick.unajan@vsu.edu.ph / rodarkqatar			ar@yahoo.com		
II. FAMILY BACKGROUND									
22. SPOUSE'S SURNAME	UNAJAN		23. NAME of CH	of CHILDREN (Write full name and list all)			DATE OF BIRTH (mm/dd/yyyy)		
FIRST NAME	MAGDALENE	NAME EXTENSION (JR., SR) N/A		N/A		N/A		N/A	
MIDDLE NAME	CESAR	N/A			N/A				
OCCUPATION	INSTRUCTOR	N/A				N/A			
EMPLOYER/BUSINESS NAME	VISAYA STATE UNIVERSITY	N/A				N/A			
BUSINESS ADDRESS	VISCA, BAYBAY, LEYTE	N/A				N/A			
TELEPHONE NO.	+63-563-7068	N/A				N/A			
24. FATHER'S SURNAME	UNAJAN	N/A			N/A				
FIRST NAME	ANDRES	NAME EXTENSION (JR., SR) N/A	N/A			N/A			
MIDDLE NAME	AUGUIS		N/A			N/A			
25. MOTHER'S MAIDEN NAME	UNAJAN			N/A			N/A		
SURNAME	MAR			N/A				N/A	
FIRST NAME	DIOSCORA				N/A	N/A			
MIDDLE NAME	BONGALON		(Continue on separate sheet if no			parate sheet if neces	cessary)		
III. EDUCATIONAL BACKG	ROUND								
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGRE (Write in full)	E/COURSE	PERIOD OF A	ATTENDANCE To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED	
ELEMENTARY	Carmen Central Elementary School	Primary Educati	on	1988	1994	N/A	1994	N/A	
SECONDARY	St. Anthony's Academy	Secondary		1994	1998	N/A	1998	N/A	
VOCATIONAL / TRADE COURSE	AMA Computer Learning Center - Tagbilaran	Computer Programming and System Design		2002	2004	N/A	2005	N/A	
COLLEGE	Visayas State University	BS in Computer Science		2017	2019	N/A	2019	N/A	
GRADUATE STUDIES	N/A	N/A		N/A	N/A	N/A	N/A	N/A	
		ontinue on separate sheet if nece	essary)						
SIGNATURE				DA	\TE	Fel	bruary 05, 202	5	

February 05, 2025

DATE

27. CARE	FR SERVICE/ RA 1	080 (BOARD/ BAR) LINDER		DATE OF				LICENSE (if a	oplicable)
SPECIAL LAWS/ CES/ CSEE			RATING (If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT			NUMBER	Date of Validity
Civil Service Eligibility (Professional) Passer			80.87	27/03/2019	Ormoc City			328739	N/A
Driver's License			N/A	N/A	City of Baybay			J09-06-019694	01/11/2023
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
V WORKE	XPERIENCE		(Co	ontinue on separate sheet	if necessary)				
		nt. Start from your recen	t work) Description	on of duties should b	e indicated in the attache	ed Work Exp	erience shee	et.	
	JSIVE DATES m/dd/yyyy) To	POSITION T (Write in full/Do not		DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)		MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)
03/06/2023	Present	Clerk/Document	Controller	Institute of Human Kinetics (IHK), Visayas			3	Regular	Y
07/07/2022	03/05/2023	Clerk/Document		State College of Arts and	534/day	N/A	Job Order	Ү	
08/01/2019	08/01/2021	Clerk/Document	Controller	State Dep't. of Agronomy	9,656.36	N/A	Job Order	Y	
25/06/2015	27/10/2016	Document Co	ntroller	L & T Company, R	N/A	N/A	Contractual	N	
27/11/2011	29/06/2014	Document Co	ntroller	KUKJE, Abu Dhal	N/A	N/A	Contractual	N	
07/12/2010	15/05/2011	Document Co	ntroller	GS-E and C, Abu Dhabi, United Arab Emirates		N/A	N/A	Contractual	N
11/07/2009	09/03/2010	Document Co	ntroller	CCC, Alkhor, State of Qatar		N/A	N/A	Contractual	N
06/07/2008	10/07/2009	Document Co	ntroller	QCS Project, Alkhor, State of Qatar		N/A	N/A	Contractual	N
05/09/2007	02/12/2007	Census Enur	nerator	NSO, Tagbilaran City		N/A	N/A	Contractual	Υ
11/05/2006	20/05/2007	Layout Ar	tist	The Guardian Balita News Paper		N/A	N/A	Contractual	N
02/09/2005	15/01/2006	Data Enco	oder	DPWH,	DPWH, Pagadian City		N/A	Contractual	Y
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	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		N/A	N/A	N/A	N/A
N/A	N/A	N/A			N/A	N/A	N/A	N/A	

DATE

SIGNATURE

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29. NAME & ADDRESS OF ORGANIZATION (Write in full) INCLUSIVE DATES (mm/dd/yyyy) NUMBER OF HOURS	SITION / NATURE OF WORK Facilitator							
	Facilitator							
N/A N/A N/A N/A	N/A							
N/A N/A N/A N/A	N/A							
(Continue on separate sheet if necessary)								
VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED (Start from the most recent L&D/training program and include only the relevant L&D/training taken for the last five (5) years for Division Chief/Executive/Managerial positions)								
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full) INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy) Number of Hours Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)							
From To								
Enhancing Digital Communication: VOIP Phone Mastery and Output Messenger Transition Nov-20-2024 Nov-20-2024 Technical VISAY/	AS STATE UNIVERSITY							
	AS STATE UNIVERSITY							
To nours Seminar workshop on basic records and Archives Management (BRAM) Jul-30-2024 Jul-31-2024 To nours Technical Univers	al Archive of the Philippines & Visayas State sity at Convention Center							
	nel Officers Assocation of the Philippines), Costa Palawan Resort Puerto Princesa							
	AS STATE UNIVERSITY							
Unlocking Excellence: The 5s Revolution for Clerks and Heads at Visayas State University Sep-29-2023 Sep-29-2023 Technical VISAYA	AS STATE UNIVERSITY							
10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	AS STATE UNIVERSITY							
Cascading of Documents and Records Control Procedure Manuals and Guidelines	AS STATE UNIVERSITY							
Orientation/Re-orientation of Duties and Responsibilities of dDRCs and AdDRCs, and Cascading of Documents and Records Control Procedure Manuals and Guidelines Sep-07-2022 Sep-07-2022 Technical VISAY/	AS STATE UNIVERSITY							
VSU ISO 9001:2015 Awareness/Re-Awareness Seminar Aug-30-2022 Aug-31-2022 Technical VISAY/	AS STATE UNIVERSITY							
Webinar Presentation on "Document Tracking System" Nov-13-2020 Nov-13-2020 3 hours Technical VISAY	AS STATE UNIVERSITY							
Orientation Workshop Among JO Clerks & Laboratory Technicians Jan-15-2019 Jan-15-2019 Technical VISAY	AS STATE UNIVERSITY							
International Society of Safety Practitioners Feb-06-2009 Mar-06-2009 40 hours Technical FILCO	A Compound, Doha, State of Qatar							
VIII. OTHER INFORMATION								
31. SPECIAL SKILLS and HOBBIES 32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full) 33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)							
N/A National Voluntary Blood Services Program - Blood Donor 27th day of August 2022, Baybay City	N/A							
N/A N/A	N/A							
N/A N/A	N/A							
(Continue on separate sheet if necessary)								
SIGNATURE DATE	February 05, 2025							

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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?	☐ YES ☑ N					
b. within the fourth degree (for Local Government Unit - Care	☐ YES ☑ N If YES, give details:					
35. a. Have you ever been found guilty of any administrative offer	☐ 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 ar any court or tribunal?	☐ YES ☑ NO If YES, give details:					
37. Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, en (abolition) in the public or private sector?	☑ YES □ NO If YES, give details: Finished contract, and Resignation (Private)					
38. a. Have you ever been a candidate in a national or local electron Barangay election)?	☐ YES ☑ NO If YES, give details:					
b. Have you resigned from the government service during the election to promote/actively campaign for a national or local	If YES, give details:					
39. Have you acquired the status of an immigrant or permanent	☐ YES ☑ NO If YES, give details (country): ————————————————————————————————————					
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972),						
a. Are you a member of any indigenous group?	☐ YES ☑ NO If YES, please specify:					
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 /	appointee)					
NAME	ADDRESS	TEL. NO.				
Dr. ANDREW A. MAZO	, Institute of Human Kinetics, Visayas State	09485105847	55			
JOSELLE R. CAYETANO	Baybay, Leyte	639176734281	6. 1			
FLORIFE A. GATCHALIAN	Director, Sports Development, VSU	+639175501289				
42. I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertine Philippines. I authorize the agency head/authorized represe agree that any misrepresentation made in this docu administrative/criminal case/s against me.	ent laws, rules and regulations of the ntative to verify/validate the contents state	Republic of the ed herein.	РНОТО			
Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: Passport						
ID/License/Passport No.: P7669537A	Signature (Sign inside the b					
Date/Place of Issuance: Tacloban, Leyte	OX)	Right Thumbmark				
SUBSCRIBED AND SWORN to before me this, affiant exhibiting his/her validly issued government ID as indicated above.						
Person Administering Oath CS FORM 313 (Paying d 3017). Re-						