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 cases against the person concerned.*

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 INFORMATION

2. SURNAME	MUERTIGUE
FIRST NAME	JESIBEL
NAME EXTENSION (JR., SR)	N/A
MIDDLE NAME	LUFRANGCO
3. DATE OF BIRTH (mm/dd/yyyy)	03/10/1992
4. PLACE OF BIRTH	MAPGAP, BAYBAY CITY, LEYTE
5. SEX	☐ Male ☑ Female
6. CIVIL STATUS	☐ Single ☑ Married ☐ Widowed ☐ Separated ☐ Other/s:
7. HEIGHT (m)	1.49 m
8. WEIGHT (kg)	42 kg
9. BLOOD TYPE	A+
10. GSIS ID NO.	N/A
11. PAG-IBIG ID NO.	1211-2604-8041
12. PHILHEALTH NO.	12-051363940-1
13. SSS NO.	06-3226809-0
14. TIN NO.	324766935-0000
15. AGENCY EMPLOYEE NO.	N/A

16. CITIZENSHIP	☑ Filipino ☐ Dual Citizenship ☐ by birth ☐ by naturalization
If holder of dual citizenship, please indicate the details.	Pls. indicate country: Peru
17. RESIDENTIAL ADDRESS	30 DE DECIEMBRE ST. (House/Block/Lot No. / Street); ZONE 23 (Subdivision/Village / Barangay); BAYBAY CITY (City/Municipality); LEYTE (Province)
ZIP CODE	
18. PERMANENT ADDRESS	30 DE DECIEMBRE ST. (House/Block/Lot No. / Street); ZONE 23 (Subdivision/Village / Barangay); BAYBAY CITY (City/Municipality); LEYTE (Province)
ZIP CODE	6521
19. TELEPHONE NO.	N/A
20. MOBILE NO.	09169108769
21. E-MAIL ADDRESS (If any)	lufrangco79@gmail.com

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	MUERTIGUE	23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	RODNEY (NAME EXTENSION (JR., SR): N/A)	YZABELLA LYANNA L. MUERTIGUE	11/28/2022
MIDDLE NAME	ARIOSA		
OCCUPATION	PHARMACIST		
EMPLOYER/BUSINESS NAME	WESTERN LEYTE PROVINCIAL HOSPITAL		
BUSINESS ADDRESS	PAN-PHILIPPINE HIGHWAY, BAYBAY CITY, LEYTE		
TELEPHONE NO.	N/A		
24. FATHER'S SURNAME	LUFRANGCO		
FIRST NAME	PABLO (NAME EXTENSION (JR., SR): Sr.)		
MIDDLE NAME	NIEPEZ		
25. MOTHER'S MAIDEN NAME			
SURNAME	GUTAS		
FIRST NAME	ELENA		
MIDDLE NAME	MANLA	*(Continue on separate sheet if necessary)*	

III. EDUCATIONAL BACKGROUND

26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE From	PERIOD OF ATTENDANCE To	HIGHEST LEVEL/ UNITS EARNED (If not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
ELEMENTARY	PAJO ELEMENTARY SCHOOL	PRIMARY EDUCATION	1999	2005	N/A	2005	N/A
SECONDARY	BABAG NATIONAL HIGH SCHOOL	HIGH SCHOOL	2005	2009	N/A	2009	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	UNIVERSITY OF CEBU-LAPULAPU & MANDAUE	BS NURSING	2009	2011 & 2016	103	N/A	N/A
	UNIVERSITY OF THE PHILIPPINES-OPEN UNIVERSITY, LOS BAÑOS, LAGUNA	ASSOCIATE IN ARTS	2021	2023		2023	N/A
	UNIVERSITY OF THE PHILIPPINES-OPEN UNIVERSITY, LOS BAÑOS, LAGUNA	BS EDUCATION STUDIES	2023	present	48 units	N/A	N/A
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	11/09/2023

IV. CIVIL SERVICE ELIGIBILITY

27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
				NUMBER	Date of Validity
CAREER SERVICE - SUBPROFFESIONAL	80.63%	04/08/2019	Maasin City	760875	03/10/2019

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.

28. INCLUSIVE DATES (mm/dd/yyyy)		POSITION TITLE (Write in full/Do not abbreviate)	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)
From	To						
3/16/2023	present	CLERK I	COLLEGE OF FORESTRY AND ENVIRONMENTAL SCIENCE	14695	00	PERMANENT	YES
4/16/2021	3/15/2023	CLERK I	COLLEGE OF FORESTRY AND ENVIRONMENTAL SCIENCE	642.05	N/A	CASUAL	YES
2/13/2018	15/04/2021	CLERK	COLLEGE OF FORESTRY AND ENVIRONMENTAL SCIENCE &	553.40 DAILY	N/A	JOB ORDER	YES
11/16/2015	15/04/2016	CASHIER	VICSAL DEVELOPMENT CORPORATION	10,478/month	N/A	CONTRACTUAL	NO
9/10/2014	10/04/2015	CASHIER	CASHIERING DEPARTMENT-GAISANO GRAND GROUP OF COMPANIES	8,840/month	N/A	CONTRACTUAL	NO

(Continue on separate sheet if necessary)

SIGNATURE		DATE	11/08/2023

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

29. NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
	From	To		
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	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
	From	To			
RISK ASSESSMENT WORKSHOP	09/11/2023	09/12/2023	16	TECHINICAL	PLANNING OFFICE, VSU
Orientation/Re-orientation of Rules and Responsibilities of AdDRCs and dDRCs, September 7, 2023, at VSU, CCE 1st Floor	09/07/2023	09/07/2023	4	TECHINICAL	QAC, VSU
ISO 9001:2015 Awareness & Re-awareness Seminar	8/30/2023	8/31/2023	8	TECHINICAL	QAC, VSU
WORKING TOWARS PERSONAL EFFECTIVENESS	08/22/2023	08/25/2023	32	TECHINICAL	PERSONEL OFFICERS ASSOCIATION OF THE PHILIPPINES
ISO 9001:2015 Awareness & Re-awareness Seminar	8/29/2023	8/29/2023	4	TECHINICAL	QAC, VSU
CFES STATEGIC PLANNING WORKSHOP 2023	11/23/2022	11/23/2022	8	TECHINICAL	CFES, VSU
MANDATORY ORIENTATION AND RE-ORIENTATION OF ACADEMIC ADVISERS, DEPARTMENT ENROLLMENT FOCAL PERSONS, AND COLLEGE HOTLINE	08/25/2022	08/25/2022	8	TECHINICAL	OVPAA, VSU
VIRTUAL AWARENESS SEMINAR on RA No. 11032 (Ease of Doing Business)	06/08/2022	06/08/2022	8	TECHINICAL	LEGAL OFFICE, VSU
TRAINING ON EDATS	04/28/2022	04/28/2022	4	TECHINICAL	RSPPRO AND MIS OFFICE, VSU
GENDER, CLIMATE, AND DISASTER RESILIENCE: CHALLENGES OF EQUITY AND SUSTAINABILITY	01/03/2021	01/03/2021	4	TECHINICAL	CCARPH-NRC
ISO RE-AWARENESS SEMINAR	11/27/2020	11/27/2020	4hrs	TECHINICAL	OFFICE OF THE PRESIDENT
STRATEGIC PLAN MONITORING	11/25/2020	11/26/2020	16hrs	TECHINICAL	OFFICE OF THE VICE PRESIDENT OF ACADEMIC AFFAIRS, VSU
SEMINAR-WORKSHOP ON RECORDS MANAGEMENT & NAP FORM	12/13/2019	12/13/2019	8hrs.	TECHINICAL	OFFICE OF HUMAN RESOURCE MANAGEMENT, VSU
HRMIS CYBER SECURITY TRAINING	12/18/2019	12/19/2019	16hrs	TECHINICAL	OFFICE OF HUMAN RESOURCE MANAGEMENT, VSU
PDS TRAINING	11/26/2019	11/26/2019	4hrs	TECHINICAL	OFFICE OF HUMAN RESOURCE MANAGEMENT, VSU
ORIENTATION WORKSHOP ON NEWLY HIRED JOB ORDER EMPLOYEE IN VSU	01/14/2019	01/14/2019	8hrs.	TECHINICAL	OFFICE OF HUMAN RESOURCE MANAGEMENT, VSU
HANDS-ON TRAINING ON HRMIS	09/06/2018	09/06/2018	8hrs.	TECHINICAL	OFFICE OF HUMAN RESOURCE MANAGEMENT, VSU

(Continue on separate 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: POWERPOINT, WORD, AND EXCEL	N/A	N/A
DESIGN LAYOUT, VIDEO EDITING		
DRESS MAKING		
BAKING		
FIRST AID		

(Continue on separate sheet if necessary)

SIGNATURE		DATE	11/30/2023

34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to the chief of bureau or office or to the person who has immediate supervision over you in the Office, Bureau or Department where you will be apppointed, a. within the third degree? b. within the fourth degree (for Local Government Unit - Career Employees)?	☐ YES ☑ NO ☐ YES ☑ NO If YES, give details: _____
35. a. Have you ever been found guilty of any administrative offense?	☐ 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 any law, decree, ordinance or regulation by any court or tribunal?	☐ YES ☑ NO If YES, give details: _____
37. Have you ever been separated from the service in any of the following modes: resignation, retirement, dropped from the rolls, dismissal, termination, end of term, finished contract or phased out (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 election held within the last year (except Barangay election)?	☐ YES ☑ NO If YES, give details: _____
b. Have you resigned from the government service during the three (3)-month period before the last election to promote/actively campaign for a national or local candidate?	☐ YES ☑ NO If YES, give details: _____
39. Have you acquired the status of an immigrant or permanent resident of another country?	☐ YES ☑ NO If YES, give details (country): _____
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), please answer the following items: a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent?	☐ YES ☑ NO If YES, please specify: _____ ☐ YES ☑ NO If YES, please specify ID No: _____ ☐ YES ☑ NO If YES, please specify ID No: _____

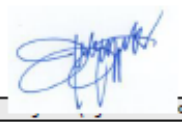
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)

NAME	ADDRESS	TEL. NO.
DENNIS P. PEQUE	CFES, VSU, BAYBAY CITY, LEYTE	563-7552
ANGELICA P. BALDOS	DFS, VSU, BAYBAY CITY, LEYTE	563-7552
TEOFANES A. PATINDOL	DFS, VSU, BAYBAY CITY, LEYTE	563-7552

PHOTO

42. I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I authorize the agency head/authorized representative to verify/validate the contents stated herein. I agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me.

Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance	
Government Issued ID:	VSU ID
ID/License/Passport No.:	V01247
Date/Place of Issuance:	5/12/2021-VSU



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11/30/2023

Date Accomplished

Right Thumbmark

SUBSCRIBED AND SWORN to before me this _____ , affiant exhibiting his/her validly issued government ID as indicated above.

Person Administering Oath