CS Form No. 212 Revised 2017		PERSOI	NAL DAT	A SH	IFF1	<u> </u>			
WARNING: Any misrepresenta							ninal case/s agair	nst the person	concerned.
READ THE ATTACHED GUIDE									
Print legibly. Tick appropriate boxes					-D3 FORM.	1. CS ID No.		(Do not fill up.	For CSC use onl
I. PERSONAL INFORMATION	ON								
2. SURNAME	TINAJA								
FIRST NAME	JENNIFER						NAME EXTENSION (JR	R., SR) <b>N/A</b>	
MIDDLE NAME	GENDRANO								
3. DATE OF BIRTH (mm/dd/yyyy)	01/28/1993		16. CITIZENSHIP		☑ Filipino	) <u></u>	Dual Citizenship	Why paturaliz	ation
4. PLACE OF BIRTH	METRO MANILA		If holder of dual citizen	zenship,			☐ by birth ☑ by naturalization  Pls. indicate country:		
5. SEX	☐ Male	✓ Female	please indicate the de	tails.					
	✓ Single	☐ Married	17. RESIDENTIAL ADDRESS	ı					
6 CIVIL STATUS	☐ Widowed	☐ Separated	17. RESIDENTIAL ADDRESS	Нои	ise/Block/Lot No	).		Street	
	☐ Other/s:			Su	bdivision/Village	)	F	PANGASUGAN Barangay	
7. HEIGHT (m)	1.46				BAYBAY			LEYTE	
8. WEIGHT (kg)	42		ZIP CODE	C	ity/Municipality		6521-A	Province	
9. BLOOD TYPE	B+		18. PERMANENT ADDRESS						
10. GSIS ID NO.	02005850492				ise/Block/Lot No		ı	Street PANGASUGAN	
11. PAG-IBIG ID NO.	12-1-0225-2024				bdivision/Village BAYBAY	)		Barangay LEYTE	
12. PHILHEALTH NO.	13-025234872-6		ZIP CODE	С	ity/Municipality 6521-A			Province	
13. SSS NO.	N/A		19. TELEPHONE NO.		002174		N/A		
14. TIN NO.	457-370-274		20. MOBILE NO.				9107617575		
15. AGENCY EMPLOYEE NO.	V01227		21. E-MAIL ADDRESS (if any)	jennifer,tinaja@vsu.edu.ph					
			21. E-IVIAIE ADDICESS (II ally)			jennilen	unaja@vsu.euu.pn		
II. FAMILY BACKGROUND 22. SPOUSE'S SURNAME	,	N/A		23. NAME of CHI	II DDENI /Writo	full name and	liet all\	DATE OF BIR	TH (mm/dd/yyyy)
		N/A	NAME EXTENSION (JR., SR)	23. IVANIL OF OTT		N/A	iist dii)	DATE OF BIR	111 (IIIII) dd/yyyy)
FIRST NAME									
MIDDLE NAME									
OCCUPATION									
EMPLOYER/BUSINESS NAME									
BUSINESS ADDRESS									
TELEPHONE NO.									
24. FATHER'S SURNAME	TINAJA								
FIRST NAME	CRISTITUTO		NAME EXTENSION (JR., SR) N/A						
MIDDLE NAME	MONDAL								
25. MOTHER'S MAIDEN NAME	•								
SURNAME	GENDRANO								
FIRST NAME	VENUS								
MIDDLE NAME	ANDANAR				(C	ontinue on se	parate sheet if neces	ssary)	
III. EDUCATIONAL BACKO	GROUND								
26. LEVEL	NAME OF		BASIC EDUCATION/DEGRE (Write in full)	EE/COURSE PERIOD OF ATTENDANCE		ATTENDANCE	HIGHEST LEVEL/ UNITS EARNED	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS
	(	,	(////// ///////////////////////////////		From	То	(if not graduated)		RECEIVED
ELEMENTARY	HIPUSNGO ELEMENTAR	RY SCHOOL	PRIMARY EDUCATION		1999	2005	N/A	2005	1st Hon.

## SECONDARY BAYBAY NATIONAL HIGH SCHOOL SECONDARY EDUCATION 2005 2009 N/A 2009 N/A VOCATIONAL / TRADE COURSE N/A N/A N/A N/A N/A N/A BS IN AGRIBUSINESS COLLEGE VISAYAS STATE UNIVERSITY 2010 2014 N/A 2014 N/A GRADUATE STUDIES VISAYAS STATE UNIVERSITY MASTERS OF MANAGEMENT 2016 2018 40 UNITS N/A N/A SIGNATURE DATE 02/10/2024 CS FORM 212 (Revised 2017), Page 1 of 4

IV CIVIL S	EDVICE ELIG	IRII ITV							
IV. CIVIL SERVICE ELIGIBILITY  27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER				DATE OF				LICENSE (if a	oplicable)
SPECIAL LAWS/ CES/ CSEE  BARANGAY ELIGIBILITY / DRIVER'S LICENSE		RATING (If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT			NUMBER	Date of Validity	
Civil Service Eligible			81.6	Aug.4,2019	Maasin City			N/a	N/A
V WORK F	XPERIENCE		(C	ontinue on separate shee	et if necessary)				
		nt. Start from your recen	t work) Description	on of duties should	be indicated in the attach	ed Work Exp	erience sheet		
	28. INCLUSIVE DATES (mm/dd/yyyy) POSITION TI (Write in full/Do not a			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)
04/03/23	To Present	Administrative Aid	e III (dDRC)	Accounting Offi	ce, VSU, Baybay Leyte	16125.00	SG 3	REGULAR	Y
1/16/23	04/02/23	Administrative			/SU, Baybay Leyte	16125.00	SG 3	REGULAR	Y
29/05/22	1/13/23	Administrative		Accounting Offi	16125.00	SG 3	CASUAL	Υ	
01/01/21	28/05/22	Administrative	Aide III	Cash Office,	13572.00	SG 3	CASUAL	Υ	
2019'	2020'	Alternate di	ORC	PhilRootcrops	N/A	N/A	N/A	N/A	
2018'	2019'	Teaching Performance Evaluation by Student Facilitator		PhilRootcrops	N/A	N/A	N/A	N/A	
25/06/14	30/12/20	Administrative Aide		PhilRootcrops	7000.00	N/A	JO	Υ	
			(0	ontinue on separate shee	at if nacassanul				
SICAL	ATURE		inala	опшие оп зерагате ѕпев	DATE		000	10/24	
SIGNA	ATUKE		(2)		DATE			<b>10/24</b> S FORM 212 (Revised 2	017) Page 2 of a
							C	o i-orivi ∠i∠ (Kevised 2	итт, rage 2 of 4

VI. VOLUNTARY WORK OR INVOLVEMENT	IN CIVIC / NON-G	OVERNMENT	/ PEOPLE / V	OLUNTARY O	RGANIZATION	/S	
29. NAME & ADDRESS OF ORGANIZATION (Write in full)		INCLUSIVE DATES (mm/dd/yyyy)  From To		NUMBER OF HOURS		POSITION / NATURE OF WORK	
N/A							
VIII I FARMING AND DEVEL ORMENT // 0.5	NATERVENTIONS		separate sheet if n	•			
VII. LEARNING AND DEVELOPMENT (L&D (Start from the most recent L&D/training program and inclu	•				Executive/Manageria	I positions)	
, J, J	•		E DATES OF		Type of LD		
30. TITLE OF LEARNING AND DEVELOPMENT INTE PROGRAMS (W	RVENTIONS/TRAINING rite in full)	ATTEN	NDANCE dd/yyyy)	NUMBER OF HOURS	( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
VSUCC BASIC COOPRETAIVE COURSE SEMIN	AR	06/10/2017		8.0	Technical	National Confederation of Cooperatives (NATCCO)	
Frontliner and Excellent Customer Service		11/08/2022	11/10/2022	24.0	Technical	Personnel Officers of the Philippines (POAP)	
BookKeeping with QuickBooks Online		07/24/2023	07/28/2023	15.0	Technical	Virtual Assistant Training Philippines	
ISO 9001-2015 Awareness/Re-awareness Semir	nar	08/30/22	08/31/22	16.0	Technical	VISAYAS STATE UNIVERSITY	
ACCOUNTING FOR NON-ACCOUNTANT		10/23/23	10/26/23	4 DAYS	Technical	COMMISSION ON AUDIT REGION 8	
ISO 9001-2015 Awareness/Re-awareness Semir	nar	08/29/23	08/29/23	8.0	Technical	VISAYAS STATE UNIVERSITY	
		(Continue on	separate sheet if n	ecessarv)			
VIII. OTHER INFORMATION		(50000000000000000000000000000000000000		,,			
31. SPECIAL SKILLS and HOBBIES	32.	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)				33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
Computer Literate	2014 Endeavor Awardee of Department of Business and Management					Metamorphoo Campus Ministry (Adviser)	
Writing					VSU Alumni		
Driving skills					VSUCC Member		
					AdPA Member		
		(Cantings)	nonovote ek 4 **	200000rd			
SIGNATURE		Continue on	separate sheet if n		ATE	02/10/2024	

34. Are you related by consanguinity or affinity to the appointing of 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 - Care	☐ YES ☑ NO If YES, give details:				
35. a. Have you ever been found guilty of any administrative offe	☐ 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 an any court or tribunal?	☐ YES ☑ NO If YES, give details:				
37. Have you ever been separated from the service in any of the dropped from the rolls, dismissal, termination, end of term, fin in the public or private sector?	☐ YES ☑ NO If YES, give details:				
a. Have you ever been a candidate in a national or local election Barangay election)?	☐ YES ☑ NO If YES, give details: ☐ YES ☑ NO				
election to promote/actively campaign for a national or local of	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?				
39. Have you acquired the status of an immigrant or permanent r	☐ YES ☑ NO If YES, give details (country):				
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magr 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), p					
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 /a	appointee)				
NAME	ADDRESS	TEL. NO. <b>053-565-0600-</b>			
MARIA ELSA M. UMPAD	President Office, VSU	1000 053-565-0600-	6		
QUEEN-EVER Y. ATUPAN	CASH OFFICE, VSU	1011 053-565-0600-	<b>4</b>		
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 represer agree that any misrepresentation made in this docum administrative/criminal case/s against me.	ent laws, rules and regulations of the l 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: VSU ID					
ID/License/Passport No.: V01227	ox)				
Date/Place of Issuance: 03-03-2021		Right Thumbmark			
SUBSCRIBED AND SWORN to before me this	, affiant exhibitii	ng his/her validly issued government	ID as indicated above.		
	h	CS FORM 212 (Revised 2017), Page 4 of 4			