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

oncerned. READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM.								
rint legibly. Tick appropriate boxes (	nd use separate sheet if necessary. I	ndicate N/A if not applicable. DO No	OT ABBRE\	/IATE. 1.	CS ID No.		(Do not fill up	o. For CSC use only)
PERSONAL INFORMATION								
2. SURNAME	JACOBE							
FIRST NAME	LUCIANO				JR			
MIDDLE NAME	RODRIGUEZ							
3. DATE OF BIRTH	2/1/1978	16. CITIZENSHIP		Z Eilinina		Dual Citizonchin		
(mm/dd/yyyy)			✓ Filipino ☐ Dual Citizenship ✓ by birth ☐ by naturaliza				y naturalizatio	n
4. PLACE OF BIRTH	BRGY. ANAKAN, GINGOOG CITY, MISAMIS ORIENTAL	If holder of dual citizenship,	_ , ,					
5. SEX	☑ Male ☐ Female	please indicate the details.	i. Philippines				•	
6 CIVIL STATUS	☐ Single ☑ Married	17. RESIDENTIAL ADDRESS	Zone 6  House/Block/Lot No.  GUADALUPE		Zone 6	Zone 6		
	☐ Widowed ☐ Separated	-			UADALUPE			
	Other/s:	-		<i>ivision/Villag</i> BAYBAY	е		ARANGAY LEYTE	
7. HEIGHT (m)	1.80	-				Province		
8. WEIGHT (kg)	75	ZIP CODE		6521		70115.0		
9. BLOOD TYPE	'O"	18. PERMANENT ADDRESS	House			ZONE 6 Street		
0. GSIS ID NO.	NONE	_	Subd			UADALUPE ARANGAY		
1. PAG-IBIG ID NO.	1212-974-3827	-	BAYBAY  City/Municipality		LEYTE Province			
2. PHILHEALTH NO.	13-025228136-4	ZIP CODE	Oity	6521			Tiovince	
3. SSS NO.	NONE	19. TELEPHONE NO.		(053)-563-8627				
4. TIN NO.	607-840-913	20. MOBILE NO.		09533502893				
5. AGENCY EMPLOYEE NO.	NONE	21. E-MAIL ADDRESS (if any)	junjacobe02@gmail.com					
. FAMILY BACKGROUND								
2. SPOUSE'S SURNAME	JACOB	E	23. NAME	of CHILDRE	N (Write	full name and list all)	DATE OF BIF	RTH (mm/dd/yyyy)
FIRST NAME	JOVELYN			BRETT YV	ONNE G.	JACOBE	4/6	6/2011
MIDDLE NAME	GOFREI	00						
OCCUPATION	SCIENCE RESEARC	H ASSISTANT						
EMPLOYER/BUSINESS NAME	VSU							
BUSINESS ADDRESS	BARANGAY PANGASUGAN,	BAYBAY CITY, LEYTE						
TELEPHONE NO.	95335028	393						
4. FATHER'S SURNAME	JACOBE							
	JACOB	E						
FIRST NAME	JACOB LUCIANO	SR.						
FIRST NAME MIDDLE NAME		SR.						
MIDDLE NAME	LUCIANO	SR.						
	LUCIANO TULAYT.	SR. AY						
MIDDLE NAME  5. MOTHER'S MAIDEN NAME	LUCIANO TULAYT. RODRIGU	SR. AY JEZ						
MIDDLE NAME  5. MOTHER'S MAIDEN NAME  SURNAME  FIRST NAME  MIDDLE NAME	LUCIANO TULAYT. RODRIGU JACOB	SR.  AY  JEZ  E		(Co	ontinue (	on separate sheet if n	ecessary)	
MIDDLE NAME  5. MOTHER'S MAIDEN NAME  SURNAME  FIRST NAME	LUCIANO TULAYT. RODRIGU JACOB	SR.  AY  JEZ  E						
MIDDLE NAME  5. MOTHER'S MAIDEN NAME  SURNAME  FIRST NAME  MIDDLE NAME	LUCIANO TULAYT. RODRIGU JACOB	SR.  AY  JEZ  E		PERIOD ATTENDAI	OF	on separate sheet if no HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
MIDDLE NAME  5. MOTHER'S MAIDEN NAME  SURNAME  FIRST NAME  MIDDLE NAME  1. EDUCATIONAL BACKGROUND	LUCIANO TULAYT. RODRIGU JACOB SARAH TUTO	SR.  AY  JEZ  E  H  BASIC EDUCATION/DEGREE/CC		PERIOD (	OF NCE	HIGHEST LEVEL/ UNITS EARNED	YEAR GRADUAT	ACADEMIC HONORS
MIDDLE NAME  5. MOTHER'S MAIDEN NAME  SURNAME  FIRST NAME  MIDDLE NAME  1. EDUCATIONAL BACKGROUND  6. LEVEL	LUCIANO TULAYT. RODRIGU JACOB SARAH TUTO  NAME OF SCHOOL (Write in full)	SR.  AY  JEZ  E  H  BASIC EDUCATION/DEGREE/CC (Write in full)		PERIOD ( ATTENDAT	OF NCE To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUAT ED	ACADEMIC HONORS RECEIVED
MIDDLE NAME  5. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME  1. EDUCATIONAL BACKGROUND  6. LEVEL  ELEMENTARY  SECONDARY VOCATIONAL /	LUCIANO TULAYT. RODRIGU JACOB SARAH TUTO  NAME OF SCHOOL (Write in full)  ANAKAN ELEMENTARY SCHOOL	SR.  AY  JEZ  E  H  BASIC EDUCATION/DEGREE/CC (Write in full)  Primary Education		PERIOD ATTENDAL	OF NCE To 1992	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUAT ED 1992	ACADEMIC HONORS RECEIVED N/A
MIDDLE NAME  5. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME  1. EDUCATIONAL BACKGROUND  6. LEVEL  ELEMENTARY  SECONDARY	LUCIANO  TULAYT.  RODRIGU  JACOB  SARAH  TUTO  NAME OF SCHOOL  (Write in full)  ANAKAN ELEMENTARY SCHOOL  MALIBUD NATINAL HIGH SCHOOL	SR.  AY  JEZ  E  H  BASIC EDUCATION/DEGREE/CC (Write in full)  Primary Education  High School  N/A  BACHELOR OF SCIENCE II	N	PERIOD ATTENDAR From 1986 1992 N/A	OF NCE To 1992	HIGHEST LEVEL/ UNITS EARNED (if not graduated)  Certificate  Diploma	YEAR GRADUAT ED 1992 1996	ACADEMIC HONORS RECEIVED N/A N/A
MIDDLE NAME  5. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME  6. LEVEL  ELEMENTARY  SECONDARY  VOCATIONAL / TRADE COURSE	LUCIANO  TULAYT.  RODRIGU  JACOB  SARAH  TUTO  NAME OF SCHOOL  (Write in full)  ANAKAN ELEMENTARY SCHOOL  MALIBUD NATINAL HIGH SCHOOL  N/A	SR.  AY  JEZ  E  H  BASIC EDUCATION/DEGREE/CC (Write in full)  Primary Education  High School  N/A	N	PERIOD ATTENDAR From 1986 1992 N/A	OF NCE To 1992 1996 N/A	HIGHEST LEVEL/ UNITS EARNED (if not graduated)  Certificate  Diploma  N/A	YEAR GRADUAT ED 1992 1996 N/A	ACADEMIC HONORS RECEIVED  N/A  N/A  N/A

IV. CIVIL	L SERVICE I	ELIGIBILITY							
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE		RATING	DATE OF				LICENSE (if a	NSE (if applicable)	
		L LAWS/ CES/ CSEE LITY / DRIVER'S LICENSE	(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINA	PLACE OF EXAMINATION / CONFERMENT		NUMBER	Date of Validity
BAR	ANGAY OFFI	CIAL ELIGIBILITY		7/25/2014				220110140254	
				(0. "					
V. WOR	K EXPERIEI	VCE		(Continue on separate si	neet it necessary)				
			ur recent work)	Description of dutie	s should be indicated i	n the attache	ed Work Ex	perience sheet.	
	USIVE DATES nm/dd/yyyy)	POSITION T (Write in full/Do not			CY / OFFICE / COMPANY MONTHLY GRADE (if applicable		SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/N)
9/1/2023	Present	Utility		VSU	Hospital	506/day		Job Order	Yes
11/1/2021	8/31/2023	Watchm			Hospital	506/day		Job Order	Yes
10/1/2020	12/31/2020	Emergency	Labor		RC-VSU	500/day		Job Order	Yes
5/1/2007	5/31/2010	Brgy. Cour	ncilor	Brgy. Tagpako, Gir	ngoog City, Misamis Or.	10,000/mo.		Elected	Yes
3/1/2005	12/31/2006	Laboratory	Aide	Secura Plant Gene	etics Corp. Misamis Or. 8,000/n			Contractual	No
CICA	IATURE			(Continue on separate si	heet if necessary) DATE		l, d.	2, 2024	
2101	MIUKE	qu-			DATE	Ī	July	/ <b>∠</b> , ∠∪∠ <del>4</del>	

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S							
29. NAME & ADDRESS OF ORGANIZATION	INCLUSIV	/E DATES					
(Write in full)	(mm/d	d/yyyy) To	NUMBER OF HOURS		POSITION / NATURE OF WORK		
NONE							
VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTION		separate sheet if n					
VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTION (Start from the most recent L&D/training program and include only the relevant L&.					agerial positions)		
g p - g		DATES OF		Type of LD	agonal positionsy		
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	ATTEN	DANCE d/yyyy)	NUMBER OF HOURS	( Managerial/ Supervisory/	CONDUCTED/ SPONSORED BY (Write in full)		
PROGRAMO (write at full)	From	To		Technical/etc)	(WIRE II IOII)		
Hands-Only Cardiopulmonary Resuscitation	7/21/2022	7/23/2022	16.0	Technical	Visayas State University, Visca, Baybay Leyte		
Landscape Training	6/14/2023	6/14/20203	8.0	Technical	2nd Floor, CCE Building VSU, Baybay City, Leyte		
Basic Life Support Provider's Course - Healthcare Provider	7/12/2023	7/13/2023	16.0	Technical	Pavillion Glass Room, VSU, Baybay City, Leyte		
Standard First Aid Training - Healthcare Provider	7/13/2023	7/14/2023	16.0	Technical	Pavillion Glass Room, VSU, Baybay City, Leyte		
ISO 9001:2015 Awareness & Re-awareness Webinar	8/29/2023	8/29/2023	8.0	Technical	Visayas State University, Visca, Baybay Leyte		
Orientation on Customer Service and Work Values in the Workplace	9/12/2023	9/13/2023	16.0	Technical	Visayas State University, Visca, Baybay Leyte		
"Reclaiming Personal effectiveness: A Journal to Self-Empowerment"	5/28/2024	5/30/2024	24.0	Technical	VSU Beach Garden, Visayas State University, Baybay City Leyte		
	<u> </u>				, ,,,		
	1						
AND OTHER INFORMATION	(Continue on	separate sheet if n	ecessary)	_			
VIII. OTHER INFORMATION	NON-ACADEMIC DIS	STINCTIONS / REC	COGNITION		22 MEMBERSHIP IN ASSOCIATION/ORGANIZATION		
31. SPECIAL SKILLS and HOBBIES 32.		Write in full)			33. (Write in full)		
	NI NI	ONE			None		
Driving	IN						
Driving  Computer Literate	IN.						
-	IN.						
		separate sheet if n	ecessary)				
-		separate sheet if n		DATE	July 2, 2024		

34.	Are you related by consanguinity or affinity to the app chief of bureau or office or to the person who has imn Bureau or Department where you will be apppointed,						
	a. within the third degree?		☐ YES ☑ NO				
	b. within the fourth degree (for Local Government Uni	t - Career Employees)?		NO			
	<b>5</b> (	, , ,	If YES, give details:	_			
35.	a. Have you ever been found guilty of any administrat	ive offense?	☐ YES	☑ NO			
		If YES, give details:					
	b. Have you been criminally charged before any cour	+2	☐ YES ☑ NO				
	5. Have you been difficulty charged belove any eod	<b>.</b> .	If YES, give details:				
			Date Filed:				
			Status of Case/s:				
36.	Have you ever been convicted of any crime or violation	on of any law, decree,	☐ YES ☑ NO				
	ordinance or regulation by any court or tribunal?		If YES, give details:				
37.	Have you ever been separated from the service in an		YES	▼ NO			
	resignation, retirement, dropped from the rolls, dismis finished contract or phased out (abolition) in the publi		If YES, give details:				
38	Have you ever been a candidate in a national or local	•	□ VEC	III NO			
50.	year (except Barangay election)?	our diodectr field within the last	☐ YES  If YES, give deta	☑ NO ails:			
	b. Have you resigned from the government service do	uring the three (3)-month period	YES	✓ NO			
	before the last election to promote/actively campaign		If YES, give details:				
39	Have you acquired the status of an immigrant or	permanent resident of another		✓ NO			
00.	country?		If YES, give details (country):				
				·			
40.							
	Persons (RA 7277); and (c) Solo Parents Welfare Act	t of 2000 (RA 8972), please					
a.	Are you a member of any indigenous group?		☐ YES If YES, please specify:	✓ NO			
b.	Are you a person with disability?		YES				
			If YES, please specify ID No:	<u> </u>			
C.	Are you a solo parent?		YES	▼ NO			
_			If YES, please specify ID No:				
41.	REFERENCES (Person not related by consanguinity or affinity to ap	oplicant /appointee)	T				
	NAME	ADDRESS	TEL. NO.				
	ELWIN JAY YU	VSU, HOSPITAL					
	LUZ O. MORENO	NARC, VSU	9164239381				
	ALLEN LAMBERT	OP, VSU					
42.	i docidio dilidoi oddi didici ilavo porocilanji docompno						
	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 may			РНОТО			
	filing of administrative/criminal case/s against me.			111010			
	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, please INDICATE ID Number and Date						
etc of	Issuance	HOW:	5				
Go	overnment Issued ID: DRIVER'S LICENSE						
ID	/License/Passport No.: H-12-18-000809	n inside the box)					
Da	ate/Place of Issuance: BAYBAY CITY, LEYTE		2, 2024 ccomplished Right Thumbmark				
H		- Date Not		. ugus			
	SUBSCRIBED AND SWORN to before me this , affiant exhibiting his/her validly issued government ID as indicated above.						
	Г						
		Person Admin	istering Oath				