CS Form No. 212 Revised 2017	PERSOI	NAL DATA	A SH	IEE1	Γ					
	ion made in the Personal Data Sheet and the	Work Experience Sheet shall	cause the fil	ling of adm	inistrative/c	riminal case/s ag	ainst the per	son		
concerned. READ THE ATTACHED GUIDE	TO FILLING OUT THE PERSONAL DATA SHE	EET (PDS) BEFORE ACCOMP	LISHING THE	E PDS FORI	И.					
	() d use separate sheet if necessary. Indicate N	N/A if not applicable. DO NOT A	BBREVIATE.		1. CS ID No.		(Do not fill up.	For CSC use only		
I. PERSONAL INFORMATION										
2. SURNAME	GOGO					NAME EXTENSION (J	D CD/			
FIRST NAME	GIRLINA					NAME EXTENSION (K., OK)			
MIDDLE NAME	PASCUAL									
DATE OF BIRTH (mm/dd/yyyy)	04/03/1974	16. CITIZENSHIP		☑ Filipir	10 🗆	Dual Citizenship				
				□ by birth □ by naturalization				ation		
4. PLACE OF BIRTH	BAYBAY CITY, LEYTE	If holder of dual citizens	ship,			Pls. indicate	country:			
5. SEX	☐ Male ☑ Female	please indicate the deta	ails.					•		
6 CIVIL STATUS	☐ Single ☑ Married	17. RESIDENTIAL ADDRESS								
o divisionino	☐ Widowed ☐ Separated		Hous	se/Block/Lot N	0.	BRI	Street GY. GUADALUP	F		
	☐ Other/s:			division/Village	9	DIV	Barangay	_		
7. HEIGHT (m)	1.7			BAYBAY CITY ty/Municipality			Province Province	LEYTE Province		
8. WEIGHT (kg)	65	ZIP CODE				6521				
9. BLOOD TYPE	"0"	18. PERMANENT ADDRESS								
10. CCIC ID NO	2005452247	-	Hous	se/Block/Lot N	0.	BRO	Street GY. GUADALUPI	E		
10. GSIS ID NO.	2005452247	-		division/Village			Barangay			
11. PAG-IBIG ID NO.	121208741742			YBAY CIT ty/Municipality	Y		Province			
12. PHILHEALTH NO.	13-000125963-7	ZIP CODE		6521						
13. SSS NO.	N/A	19. TELEPHONE NO.	053 563 7345							
14. TIN NO.	936-201-794	20. MOBILE NO.	0919 0830387							
15. AGENCY EMPLOYEE NO.	V01079	21. E-MAIL ADDRESS (if any)		girlina.gogo@vsu.edu.ph						
II. FAMILY BACKGROUND	701010	21. E WATE ABBITECO (II dily)			giriiria.go	gota, vou.cau.	<u>prii</u>			
22. SPOUSE'S SURNAME	GOGO		23 NAME of CHI	I DREN (Write	full name and	l list all)	DATE OF BIR	TH (mm/dd/yyyy)		
FIRST NAME	ROBERTO	NAME EXTENSION (JR., SR)	23. NAME of CHILDREN (Write full name and list all) GERALD GOGO				05/17/1994			
	ROBERTO						10/05/1997			
MIDDLE NAME	OUANO									
OCCUPATION	RETIRED SHANELLE GOGO 07/18/199					8/1999				
EMPLOYER/BUSINESS NAME	·	N/A								
BUSINESS ADDRESS	N/A									
TELEPHONE NO.	053 563 7345									
24. FATHER'S SURNAME	PASCUAL									
FIRST NAME	NERELITO	SR								
MIDDLE NAME	PLEÑOS									
25. MOTHER'S MAIDEN NAME										
SURNAME	MESURADO									
FIRST NAME	CATALINA									
MIDDLE NAME	ALESNA	GNA				(Continue on separate sheet if necessary)				
III. EDUCATIONAL BACKGE	ROUND									
26. LEVEL	NAME OF SCHOOL	BASIC EDUCATION/DEGREE	/COURSE	PERIOD OF A	ATTENDANCE	HIGHEST LEVEL/ UNITS EARNED	YEAR	SCHOLARSHIP/ ACADEMIC		
CLVL	(Write in full)	(Write in full)	(Write in full)		From To (if not			HONORS RECEIVED		
ELEMENTARY	VISCA FOUNDATION ELEMENTARY SCHOOL	BASIC EDUCATION		1981	1987	N/A	1987	FIRST HONORS, BES' IN MATH		
SECONDARY	VISCA EXPERIMENTAL RURAL HIGH SCHOOL	SECONDARY EDUCATION		1987	1991	N/A	1991	SECOND HONORS		
VOCATIONAL / TRADE COURSE	N/A	N/A		N/A	N/A	N/A	N/A	N/A		
COLLEGE	UNIVERSITY OF SAN CARLOS	BACHELOR OF SCIENCE IN (ENGINEERING	CHEMICAL	1991	1996	N/A	1996	N/A		
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY	MASTER OF EDUCATION M CHEMISTRY		2016	2019	N/A	2019	N/A		
A1	(C	ontinue on separate sheet if neces	sary)	_						
SIGNATURE				DA	TE	·	August 2, 2022			

IV. CIVIL SERVICE ELIGIBILITY									
			RATING	DATE OF EXAMINATION /	PLACE OF EXAMINATION / CONFERMENT			LICENSE (if applicable)	
BARANGAY ELIGIBILITY / DRIVER'S LICENSE			(If Applicable)	CONFERMENT				NUMBER	Date of Validity
NON-PF	NON-PROFESSIONAL DRIVER'S LICENSE				ORMOC CITY			H03-01-036519	03/04/2024
PRC LICENSE IN CHEMICAL ENGINEERING			1996	CEBL		0021076	03/04/2024		
			(Co)	ntinue on separate sheet	if nacassary)				
	EXPERIENCE								
	vate employme. USIVE DATES	nt. Start from your recen	t work) Description	n of duties should b	e indicated in the attache	ed Work Exp	SALARY/ JOB/ PAY		
	nm/dd/yyyy)	POSITION T (Write in full/Do not			ENCY / OFFICE / COMPANY I/Do not abbreviate)	MONTHLY SALARY	GRADE (if applicable)& STEP (Format "00-0")/	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/N)
From	То						INCREMENT		
09/01/2021	01/31/2022	INSTRUCT			TATE UNIVERSITY	P207.70/HR		PART-TIME	Y
08/01/2018	07/31/2021	INSTRUCT			TATE UNIVERSITY	26052.00	12-1	SUBSTITUTE	Y
07/31/2017	06/07/2018	INSTRUCT			TATE UNIVERSITY	P120/HR		PART-TIME	Y
06/13/2016	04/11/2017	INSTRUCT		VISAYAS ST	P120/HR		PART-TIME	Y	
06/ /2011	03/ /2015	INSTRUCT	TOR		ORMOC CITY INSTITUTE OF TECHNOLOGY			PART-TIME	N
06/ /2008	10/ /2009	INSTRUCT	TOR	SYNTACS CO	P7000.00		CONTRACTUAL	N	
SIGN	ATURE		(Co	ntinue on separate sheet	if necessary) DATE	17E August 2, 2022		2	
SIGN	UNL				DAIL			S FORM 212 (Revised 2)	017) Boso 2 of 4

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S							
29. NAME & ADDRESS OF OF (Write in full)			/E DATES ld/yyyy) To	NUMBER OF HOURS	POSITION / NATURE OF WORK		
N/A							
VII. LEARNING AND DEVELOPMENT (L&D)		tinue on separate : PROGRAMS A					
(Start from the most recent L&D/training program and include				f/Executive/Manage	erial 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)	
WHY SAFETY? NEW PERSPECTIVES		07/20/2020	07/21/2020	8.0	TECHNICAL	PHILIPPINE INSTITUTE OF CHEMICAL ENGINEERS ACADEMY	
ONLINE TRAINING ON DEVELOPING A MOODLE ONLI	INE CLASSROOM	06/15/2020	06/17/2020	24.0	TECHNICAL	VISAYAS STATE UNIVERSITY	
WEBINAR ON ENHANCING RESILIENCE IN THE WOR	K PLACE	06/08/2020	06/08/2020	2.0	TECHNICAL	ROTARACT CLUB OF CEBU FUENTE	
VIRTUAL TRAINING ON GOOGLE CLASSROOM AS A	LEARNING MANAGEMENT SYSTEM	05/19/2020	05/21/2020	24.0	TECHNICAL	VISAYAS STATE UNIVERSITY	
GOOGLE CLASSROOM WORKSHOP SERIES		12/12/2019	12/13/2019	12.0	TECHNICAL	VISAYAS STATE UNIVERSITY	
INTERNATIONAL SEMINAR WORKSHOP ON SCIENCE	TECHNOLOGY AND MATHEMATICS	04/12/2019	04/14/2019	20.0	TECHNICAL	CENTER FOR HUMAN RESEARCH AND DEVELOPMENT FOUNDATION, INC.	
WRITESHOP ON OUTCOME-BASED EDUCATION COURSE SYLLABUS			07/26/2018	8.0	TECHNICAL	VISAYAS STATE UNIVERSITY	
	(Con	ntinue 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) PHILIPPINE INSTITUTE OF CHEMICAL		
TEACHING	N/A					ENGINEERS	
	(Con	ntinue on separate	sheet if necessary)				
SIGNATURE				Di	A <i>TE</i>	August 2, 2022	

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 ☑	1 NO				
b. within the fourth degree (for Local Government Unit - Care		1 NO				
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 dropped from the rolls, dismissal, termination, end of term, f the public or private sector?		☑ YES □ NO If YES, give details: END OF CONTRACT				
38. a. Have you ever been a candidate in a national or local election Barangay election)?	ction held within the last year (except	☐ YES If YES, give details	☑ NO s:			
election to promote/actively campaign for a national or local	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	☐ YES ☑ NO If YES, give details (country): ————————————————————————————————————					
 Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag and (c) Solo Parents Welfare Act of 2000 (RA 8972), please 						
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 applican	at /appointee)					
NAME	ADDRESS	TEL. NO.	ID picture taken within the last 6 months			
DR. SHALOM GRACE SUGANO	VSUIHS, VISCA, BAYBAY CITY, LEYTE	563 7027	4.5 cm. X 3.5 cm (passport size)			
DR. NANCY ABUNDA	VSUIHS, VISCA, BAYBAY CITY, LEYTE	563 7027	Computer generated or photocopied picture			
DR. ROSARIO ABELA	DTE, COLLEGE OF EDUCATION, VSU	0918 3641159	is not acceptable			
42. I declare under oath that I have personally accomplished this statement pursuant to the provisions of pertinent laws, reauthorize the agency head/authorized representative to verimiserpresentation made in this document and its attachmagainst me.	ules and regulations of the Republic of the fy/validate the contents stated herein.	ne Philippines. I I agree that any	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: DRIVER'S LICENSE ID/License/Passport No.: H03-01-036519	397					
Date/Place of Issuance: 04/03/2019 / BAYBAY CITY	ox)	2007				
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						