

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 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 FIRST NAME MIDDLE NAME	GUCELA		
	JUNARD		NAME EXTENSION (JR., SR) N/A
	CABAHIT		
3. DATE OF BIRTH (mm/dd/yyyy)	11/6/1988	16. CITIZENSHIP If holder of dual citizenship, please indicate the details.	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:
4. PLACE OF BIRTH	BAYBAY		
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		
6 CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS ZIP CODE	<div>House/Block/Lot No. Street</div> <div>San Agustin</div> <div>Subdivision/Village Barangay</div> <div>Baybay City Leyte</div> <div>City/Municipality Province</div>
7. HEIGHT (m)	1.6256		
8. WEIGHT (kg)	62		
9. BLOOD TYPE	AB+		
10. GSIS ID NO.	N/A		
11. PAG-IBIG ID NO.	1211-3638-4372	18. PERMANENT ADDRESS ZIP CODE	<div>House/Block/Lot No. Street</div> <div>San Agustin</div> <div>Subdivision/Village Barangay</div> <div>Baybay City Leyte</div> <div>City/Municipality Province</div>
12. PHILHEALTH NO.	13-025277752		
13. SSS NO.	0632098626		
14. TIN NO.	462-854-833-000		
15. AGENCY EMPLOYEE NO.	N/A		
19. TELEPHONE NO.		N/A	
20. MOBILE NO.		09355489799	
21. E-MAIL ADDRESS (if any)		jhenard.1105@gmail.com	

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME FIRST NAME MIDDLE NAME	N/A		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
	N/A	NAME EXTENSION (JR., SR)		
	N/A			
OCCUPATION	N/A		N/A	N/A
EMPLOYER/BUSINESS NAME	N/A		N/A	N/A
BUSINESS ADDRESS	N/A		N/A	N/A
TELEPHONE NO.	N/A		N/A	N/A
24. FATHER'S SURNAME FIRST NAME MIDDLE NAME	GUCELA		N/A	N/A
	RAUL	NAME EXTENSION (JR., SR)	N/A	N/A
	ROCA		N/A	N/A
25. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME			N/A	N/A
	CABAHIT		N/A	N/A
	ERLINDA		N/A	N/A
	MARTINEZ		(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		HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	SAN AGUSTIN ELEMENTARY SCHOOL	PRIMARY EDUCATION	1996	2001	GRADUATED	2001	N/A
SECONDARY	BUNGA NATIONAL HIGH SCHOOL	HIGH SCHOOL	2001	2005	GRADUATED	2005	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN FOOD TECHNOLOGY	2005	2011	GRADUATED	2011	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

April 7, 2021

BFP-QSF-HRMD-018 Rev. 00 (05.04.18)

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IV. CIVIL SERVICE ELIGIBILITY

[illegible]

(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.

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE		DATE	April 7, 2021
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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	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

(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			
	"Business Opportunity and products packaging for commercialization"	2/20/2009	2/20/2009	8.0	Managerial	Center for continuing education VSU, Baybay, Leyte
	"Photographic composition 101" , March 4, 2009	3/4/2009	3/4/2009	8.0	Managerial	Farm and Resource Management Institute AV Room, VSU, Baybay, Leyte
	"Leadership Seminar and team building", September 11, 2009	9/11/2009	9/11/2009	8.0	Supervisory	Department of Food Science and Technology, VSU, Visca, Baybay, Leyte
	"Emergency Response: Skills Training", March 14-18, 2016	3/14/2016	3/18/2016	40.0	Technical	VSU Garden Beach Resort.
	"Agri-Crop Production NCIII", June 5-10, 2017	6/5/2017	6/10/2017	40.0	Technical	University review Center
	ESGP-PA Symposium", December 3-4, 2017	12/3/2017	12/4/2017	18.0	Managerial	Convention Center.
	General Assembly for ESGP-PA Grantees Theme:"Values and Leadership Enhancement"	3/19/2018	3/20/2018	16.0	Supervisory	VSU Convention Center, Visca Baybay City, Leyte
	Seminar and General Assembly of the Philippines Association of Practitioners of student Affairs and Services, Inc. (PAPSAS) Region VIII Chapter on April 10, 2018	4/10/2018	4/10/2018	8.0	Managerial	Saint Paul School of Professional Studies
	"Radio for Development Workshop" held by the VSU Radio DYDC-FM 104.7 on 30th day of July, 2018	7/30/2018	7/30/2018	8.0	Supervisory	DYDC-FM by Christina A. Gabrillo, PhD, Station Manager

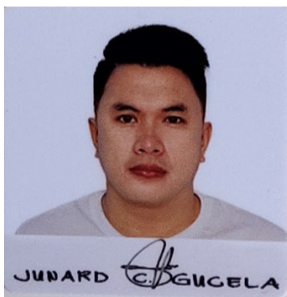
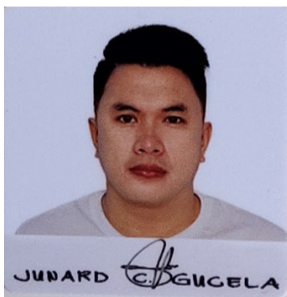
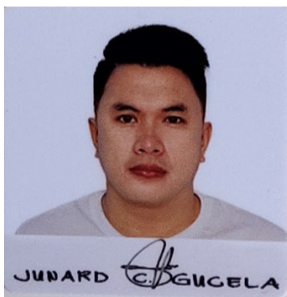
(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	DRIVING (PDL 1,2,3)		N/A		N/A
	COMPUTER				

(Continue on separate sheet if necessary)

SIGNATURE		DATE	April 7, 2021
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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 appointed, a. within the third degree? b. within the fourth degree (for Local Government Unit - Career Employees)?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
35. a. Have you ever been found guilty of any administrative offense? b. Have you been criminally charged before any court?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: Date Filed: _____ Status of Case/s: _____</div>												
36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
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?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)? 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?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
39. Have you acquired the status of an immigrant or permanent resident of another country?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details (country): _____</div>												
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?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div>												
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)													
<table><tr><td>NAME</td><td>ADDRESS</td><td>TEL. NO.</td></tr><tr><td>PROF. MANOLO B. LORETO, JR</td><td>VISCA BAYBAY CITY, LEYTE</td><td>09478798284</td></tr><tr><td>DR. ALELI A. VILLOCINO</td><td>VISCA BAYBAY CITY, LEYTE</td><td>09173108081</td></tr><tr><td>HON. MILA P. BALAN</td><td>SAN AGUSTIN BAYBAY CITY, LEYTE</td><td>09365342013</td></tr></table>		NAME	ADDRESS	TEL. NO.	PROF. MANOLO B. LORETO, JR	VISCA BAYBAY CITY, LEYTE	09478798284	DR. ALELI A. VILLOCINO	VISCA BAYBAY CITY, LEYTE	09173108081	HON. MILA P. BALAN	SAN AGUSTIN BAYBAY CITY, LEYTE	09365342013
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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.													
<table><tr><td>Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</td></tr><tr><td>Government Issued ID: DRIVER'S LISCENSE</td></tr><tr><td>ID/License/Passport No.: H12-13-002158</td></tr><tr><td>Date/Place of Issuance: 06-11-2019</td></tr></table>	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 LISCENSE	ID/License/Passport No.: H12-13-002158	Date/Place of Issuance: 06-11-2019	<table><tr><td><div><div></div><div>Signature (Sign inside the box)</div></div><div>Date Accomplished</div></td><td><div><div>JUNARD C. GUGELA</div></div><div></div><div>Right Thumbmark</div></td></tr></table>	<div><div></div><div>Signature (Sign inside the box)</div></div> <div>Date Accomplished</div>	<div><div>JUNARD C. GUGELA</div></div> <div></div> <div>Right Thumbmark</div>						
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SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.													
<div></div> <div>Person Administering Oath</div>													