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 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) PERSONAL INFORMATION BAHANDI 2. SURNAME NAME EXTENSION (JR., SR) JOHN FIRST NAME MIDDLE NAME SOYMAN 3. DATE OF BIRTH 1/8/1998 16. CITIZENSHIP ✓ Filipino Dual Citizenship (mm/dd/yyyy) ✓ by birth by naturalization 4. PLACE OF BIRTH Pls. indicate country: If holder of dual citizenship. please indicate the details. Female 5. SEX ✓ Male ✓ Single Married 17. RESIDENTIAL ADDRESS ZONE 4 6 CIVIL STATUS House/Block/Lot No. Street Widowed Separated GUADALUPE Other/s: Subdivision/Village Barangay **LEYTE BAYBAY** 7. HEIGHT (m) 1.55 City/Municipality Province 8. WEIGHT (kg) 51 ZIP CODE 6521 18. PERMANENT ADDRESS PUROK 7 9. BLOOD TYPE House/Block/Lot No. Street QUEZON 10. GSIS ID NO. Subdivision/Village Barangay **BATUAN BOHOL** 11. PAG-IBIG ID NO 121292273819 City/Municipality Province 12. PHILHEALTH NO 13-025577788-3 ZIP CODE 6318 13. SSS NO. 19. TELEPHONE NO. 14. TIN NO. 604-220-195-000 20. MOBILE NO. 09983372610 bahandijohn17@gmail.com 15. AGENCY EMPLOYEE NO. 21. E-MAIL ADDRESS (if any) II. FAMILY BACKGROUND 22. SPOUSE'S SURNAME N/A 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) N/A N/A N/A FIRST NAME MIDDLE NAME N/A N/A N/A OCCUPATION N/A **EMPLOYER/BUSINESS NAME BUSINESS ADDRESS** N/A N/A TELEPHONE NO 24. FATHER'S SURNAME NAME EXTENSION (JR., SR) FIRST NAME MIDDLE NAME **EPIFANIA SOYMAN BAHANDI** 25. MOTHER'S MAIDEN NAME SURNAME **BAHANDI EPIFANIA** FIRST NAME **SOYMAN** MIDDLE NAME (Continue on separate sheet if necessary) III. EDUCATIONAL BACKGROUND SCHOLARSHIP/ HIGHEST LEVEL/ BASIC EDUCATION/DEGREE/COURSE PERIOD OF ATTENDANCE NAME OF SCHOOL ACADEMIC YFAR LEVEL UNITS EARNED GRADUATED (Write in full) (Write in full) HONORS (if not graduated) RECEIVED From To **ELEMENTARY** CABACNITAN ELEM. SCHOOL 6/6/2005 5/3/2011 2011 HONORABLE MENTION

SECONDARY	QUEZON NATIONAL HIGHSCHOOL		6/6/2011	6/3/2015			HONORABL E MENTION
VOCATIONAL / TRADE COURSE	N/A						
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN AGRICULTUIRE (PLANT BREEDING)	5/6/2015	06/22/2020		2020	N/A
GRADUATE STUDIES	N/A						
(Continue on separate sheet if necessary)							
SIGNATURE	Jan				08/18/2022		

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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				LICENSE (if ap	oplicable)		
			EXAMINATION / CONFERMENT	PLACE OF EXAMINA	PLACE OF EXAMINATION / CONFERMENT			Date of Validity	
LICENSED AGRICULTURIST 82.0		NOVEMBER 9-11, 2021	TACL	LOBAN		0038452	1/8/2025		
			(Con	tinue on separate sheet	if necessary)				
	XPERIENCE ate employmer	nt. Start from your recent	work) Description	of duties should be	indicated in the attached	l Work Expe	rience sheet.		
28. INCLU	JSIVE DATES m/dd/yyyy)	POSITION T	ITLE	SALARY/JOB/P/ DEPARTMENT / AGENCY / OFFICE / COMPANY MONTHLY GRADE (#					GOV'T SERVICE
From	То	(Write in full/Do not	abbreviate)	(Write in full/Do not abbreviate)			applicable)& STEP (Format "00-0")/ INCREMENT	APPOINTMENT	(Y/N)
JAN, 2022	PRESENT	RESEARCH ASSISTANT GERMPLA	(SWEETPOTATO		PS RESEARCH AND ING CENTER	10400.00		JOB ORDER	0
		OLIVIII LIV	OIII)	110 1111	NO SENTEN				

(Continue on separate sheet if necessary)								
SIGNA	ATURE	91h			DATE	08/18/2022		

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29.	NAME & ADDRESS OF OF (Write in full)			VE DATES ld/yyyy)	NUMBER OF HOURS		POSITION / NATURE OF WORK	
	(write in fail)		From	To	Nombert of Floorie		1 OUTHOR HATORE OF WORK	
		(Cont	tinue on separate s	sheet if necessar	<u>/)</u>			
/II. LEARNIN	IG AND DEVELOPMENT (L&D)				,			
Start from the mos	st recent L&D/training program and includ	e only the relevant L&D/training taken for	the last five (5) ye	ars for Division C	hief/Executive/Man	agerial positions)		
30. TITLE	OF LEARNING AND DEVELOPMENT INTE	RVENTIONS/TRAINING PROGRAMS		E DATES OF IDANCE		Type of LD (Managerial/	CONDUCTED/ SPONSORED BY	
	(Write in full)		(mm/d	ld/yyyy)	NUMBER OF HOURS	Supervisory/ Technical/etc)	(Write in full)	
			From	То			DEPARTMENT OF PLANT BREEDING AND	
E- ECO SEMINA	AR: STATISTICAL TOOLS FOR PLAN	T BREEDING RESEARCH	10/8/2022	10/8/2022	8 HOURS	TECHNICAL	GENETICS	
				<u> </u>				
				<u> </u>	 			
				<u> </u>				
					<u> </u>			
III OTHER	NFORMATION	(Cont	tinue on separate :	Sileet it necessar	<i>(</i>)			
m. OTHER	THE OTHER PROPERTY.	No.	ACADEMIC DICT	JOTIONO / DEGO	CNITION		MEMPERCURULA ACCOCIATION CON AND AND AND AND AND AND AND AND AND AN	
31.	SPECIAL SKILLS and HOBBIES	32. NON-	ACADEMIC DISTIN- Write)	NCTIONS / RECO	NUTTIVIC		33. MEMBERSHIP IN ASSOCIATION/ORGANIZA (Write in full)	
STA	ATISTICAL ANALYSIS						ASSOCIATION OF PLANT BREEDING MA	
	NALYSIS AND DISCUSSION						COLLEGE OF AGRICULTURE AND FO	
	IT IN MS WORD, EXCEL, AND						SCIENCE	
. NOI IOIEN	POWERPOINT							
							1	
							 	
			tinue on separate :					

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 VO 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?	☐ 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 /appointee)					
	NAME ADDRESS	TEL. NO.				
		d To				
42.	I declare under oath that I have personally accomplished this Personal Data Sheet which is a trecomplete statement pursuant to the provisions of pertinent laws, rules and regulations of the Philippines. I authorize the agency head/authorized representative to verify/validate the contents I agree that any misrepresentation made in this document and its attachments shall cause administrative/criminal case/s against me.	Republic of the stated herein.				
	sovernment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)					
H	LEASE INDICATE ID Number and Date of Issuance	Mn				
⊦	overnment Issued ID: PRC					
۱ŀ	D/License/Passport No.: 0038452 Signature (Sign inside the b	08/18/2022				
D	ate/Place of Issuance: PRC ORMOC Date Accomplished	Right Thumbmark				
	SUBSCRIBED AND SWORN to before me this, affiant exhibit	ting his/her validly issued government ID as indicated above.				
	Person Administering Oat	th				
	. 5.55.7 tallimistering out					

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