SIGNATURE

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 READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM. (Do not fill up. For CSC use only) Print legibly. Tick appropriate boxes 🗌 ) and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. . PERSONAL INFORMATION 2. SURNAME FRANCISCO FIRST NAME RONNIE MIDDLE NAME ROMBOSO 9/5/1999 16. CITIZENSHIP ✓ Filipino Dual Citizenship (mm/dd/yyyy) ESPERANZA, AGUSAN DEL SUR 4. PLACE OF BIRTH Pls. indicate country: If holder of dual citizenship, please indicate the details 5. SEX ✓ Male ☐ Female ▾ ✓ Single ☐ Married 17. RESIDENTIAL ADDRESS P-2 6 CIVIL STATUS House/Block/Lot No ☐ Widowed Street Separated HAWILIAN Other/s: Subdivision/Village Barangay ESPERANZA AGUSAN DEL SUR 7. HEIGHT (m) 161 City/Municipality Province 8. WEIGHT (kg) 45 ZIP CODE 8513 18. PERMANENT ADDRESS SAME 9. BLOOD TYPE 0 House/Block/Lot No Street 10. GSIS ID NO. N/A Subdivision/Village Barangay 11. PAG-IBIG ID NO. N/A City/Municipalit Province 12. PHILHEALTH NO. 18-251336070-4 ZIP CODE 8513 13. SSS NO. N/A 19. TELEPHONE NO. N/A 14. TIN NO. 631-371-306-00000 20. MOBILE NO. 09665064503 / 09489119371 15. AGENCY EMPLOYEE NO. 21. E-MAIL ADDRESS (if any) franciscoron99@gmail.com II. FAMILY BACKGROUND 22. SPOUSE'S SURNAME N/A 23. NAME of CHILDREN (Write full name and list all) (mm/dd/yyyy) NAME EXTENSION (JR., SR FIRST NAME N/A N/A MIDDLE NAME N/A N/A OCCUPATION 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 24. FATHER'S SURNAME FRANCISCO N/A N/A FIRST NAME ROLANDO N/A MIDDLE NAME SALODOR N/A 25. MOTHER'S MAIDEN NAME SURNAME N/A **ROMBOSO** FIRST NAME ELMA N/A MIDDLE NAME VILLAREN (Continue on separate sheet if necessary) EDUCATIONAL BACKGROUND SCHOLARSH PERIOD OF HIGHEST LEVEL YEAR BASIC EDUCATION/DEGREE/COURSE NAME OF SCHOOL UNITS EARNED (if not graduated) ACADEMIC HONORS LEVEL ATTENDANCE GRADUATE D (Write in full) (Write in full) From То RECEIVED ELEMENTARY HAWILIAN ELEMENTARY SCHOOL ELEMENTARY 6/10/2007 3/15/2013 GRADUATED 2013 N/A VALEDICTO SECONDARY HAWILIAN NATIONAL HIGH SCHOOL HIGH SCHOOL 5/18/2013 4/12/2017 2017 GRADUATED RIAN WITH HIGH VOCATIONAL / HAWILIAN NATIONAL HIGH SCHOOL SENIOR HIGH SCHOOL 6/9/2017 4/15/2019 GRADUATED 2019 TRADE COURSE HONOR PGAS COLLEGE 6/15/2019 7/7/2023 GRADUATED 2023 BACHELOR OF SCIENCE IN AGUSAN DEL SUR STATE COLLEGE OF SCHOLAR AGRICULTURE MAJOR IN TECHNICAL AGRICULTURE AND TECHNOLOGY HORTICULTURE AWARD ON ORGANIC **AGRICULTU** RE GRADUATE STUDIES N/A N/A N/A N/A N/A

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IV. CIVIL SERVICE ELIGIBILITY									
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER RATING DATE OF							LICENSE (if a	pplicable)	
SDECIVI I VIVISI CESI CSEE			(If Applicable)	EXAMINATION / PLACE OF EXAMINATION / CONFERME CONFERMENT			RMENT	NUMBER	Date of Validity
									validity
LICENSED AGRICULTURIST				11/20-22/2023	BUTUA	IN CITY			
V WORK	EXPERIENC	-	(Contin	nue on separate shee	t if necessary)				
		⊏ nent. Start from your rec	ent work) Descrip	tion of duties sho	uld be indicated in the a	attached W	ork Experien	ce sheet.	
28. INCLU	SIVE DATES						SALARY/ JOB/ PAY GRADE (if		GOV'T
	(mm/dd/yyyy) POSITION T (Write in full/Do not			DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)		MONTHLY SALARY	applicable)& STEP (Format "00-0")/	STATUS OF APPOINTMENT	SERVICE (Y/N)
From	То						INCREMENT	_	
6/10/2018	8/13/2018	Store customer Re	-	_	ral merchandise	5000.00		Temporary	N
6/11/2018	7/13/2021	Administrative /	Assistant	Public Employr	ment Services Office	10000.00		Temporary	Y
6/12/2018	8/29/2022	Secretarial As	sistant	Public Employr	ment Services Office	10000.00		Temporary	Y
7/17/2023	12/13/2023	Service C	rew	Mabes Savory	Place / DOLE Caraga	7800.00		Contractual	Y
	<u> </u>		(Contin	nue on separate shee	t if necessary)	L	<u>I</u>	I.	
SIGNA	ATURE		m		DATE		12/29/2023		
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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)			/E DATES d/yyyy) To	NUMBER OF POSITION / NATURE OF HOURS		POSITION / NATURE OF WORK
SANGGUNIANG KABATAAN OF HAWILIAN	9/5/2008	PRESENT	N/A	MEMBER		
YOUNG FARMERS CLUB			4/12/2019	N/A	MEMBER	
		nue on separate				
VII. LEARNING AND DEVELOPMENT (L&	D) INTERVENTIONS/TRAINII		G PROGRAMS ATTENDED  NCLUSWE DATES OF			
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)			ATTENDANCE (mm/dd/yyyy) From To		Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
Jobstart Philippines 2023		12/13/2023	12/13/2023	8.0	Technical	Department of Labor and Employment Caraga
On-the-Job Training		4/14/2023	5/20/2023	240.0	Technical	VPO Agro-Industrial Development
Agiculture E-Extension Program		2/14/2022	3/20/2022	220.0	Technical	Department of Agriculture R13
Organic Agriculture Forum		11/20/2022	11/21/2022	24.0	Technical	DA-ATI Caraga Region
Quality Standard Related to Slaughter Animal		10/20/2022	10/20/2022	4.0	Technical	reau of Agriculture and Fishery Standards
Good Practices In Cattle and Buffalo Production		10/27/2022	10/27/2022	4.0	Technical	Bureau of Agriculture and Fishery Stand
Quality Standard Related to Slaughter Animal		10/20/2022	10/20/2022	4.0	Technical	reau of Agriculture and Fishery Standards
1st Southeast Asia Rubber-based Cropping Product	tion Forum	6/22/2021	6/23/2021	12.0	Technical	stralian Centre For International Research
	Contin	nue on separate	shoot if nacass	and		
VIII. OTHER INFORMATION	Contr	iue on Separate	Sheet ii hecessi	ш у)		
31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION 33. MEMBERSHIP IN  (Write in full) 33. ASSOCIATION/ORGANIZATION					
Writing	DA-ATI Kabataang Organic Agriculture 2nd placer					
Reading	Technical Awardee on Organic Agriculture					
Agricultural Field						
Microsoft word, PPT.						
People Skills						
Basic Computer literated						
(Continue on separate sheet if necessary)						V 400-7-
SIGNATURE	- Orm			D.	ATE	12/29/23
	- '					CS FORM 212 (Revised 2017), Page 3 of 4

34.	Are you related by consanguinity or affinity to the appointing 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?  b. within the fourth degree (for Local Government Unit - Ca	☐ YES ☑ NO ☐ YES ☑ NO If YES, give details:				
35.	a. Have you ever been found guilty of any administrative o	☐ YES ☑ NO If YES, give details:				
	b. Have you been criminally charged before any court?	YES V NO If YES, give details: Date Filed: Status of Case/s:				
36.	Have you ever been convicted of any crime or violation of regulation by any court or tribunal?	YES NO If YES, give details:				
37.	Have you ever been separated from the service in any of tretirement, dropped from the rolls, dismissal, termination, en 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 el Barangay election)?      b. Have you resigned from the government service during last election to promote/actively campaign for a national or local election.	☐ YES ☑ NO If YES, give details: ☐ YES ☑ NO If YES, give details:				
39.	Have you acquired the status of an immigrant or permanen	YES NO If YES, give details (country):				
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972)					
a b	Are you a member of any indigenous group?  Are you a person with disability?	✓ YES NO If YES, please specify:  ✓ YES NO				
С	Are you a solo parent?	If YES, please specify ID No:  YES NO  If YES, please specify ID No:				
41.	REFERENCES (Person not related by consanguinity or affinity to a					
	NAME	ADDRESS	TEL. NO.			
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.						
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number Government Issued ID: PHILIPPINE ID  ID/License/Passport No. 5974-2891-0796-3016  Date/Place of Issuance: HEADS/MARCH 10,2023  Date Accomplished			30X)	Right Thumbmark		
SUBSCRIBED AND SWORN to before me this, affiant exhibiting his/her validly issued government ID as indicated above.						
		Person Administering Oat	h	CSFORM 2.9 (Ravisad 2017) Page 4 of 4		