CS Form No. 212 Revised 2017	PERSO	NAL DAT	A SI	IEE.	Т				
concerned. READ THE ATTACHED GUIDE	tion made in the Personal Data Sheet and the	ET (PDS) BEFORE ACCOMP	LISHING THE			criminal case/s a			
Print legibly. Tick appropriate boxes I. PERSONAL INFORMATIO	and use separate sheet if necessary. Indicate N	/A if not applicable. DO NOT A	BBREVIATE.		1 CS ID No		(Do not fill up.	For CSC use only)	
	MANIGO								
2. SURNAME						NAME EXTENSION (J	R, SR)		
FIRST NAME	CELESTIAL							4 4 4	
MIDDLE NAME	AGATOL			_					
DATE OF BIRTH (mmiddlyyyyy)	11/111991	16. CITIZENSHIP	✓ Filipino			☐ Dual Citizenship ☐ by birth ☐ by naturalization			
4 PLACE OF BIRTH	SIKATUNA, BOHOL	If holder of dual citize	Pts. indicate country:						
5. SEX	☐ Male ☑ Female	please indicate the d	Setails.					-	
6 CIVIL STATUS				Juse/BlockLof No. Street PURCK 5 GABAS Edivision/Village Barangay					
7. HEIGHT (m)	1.6			BAYBAY CITY					
8. WEIGHT (kg)	60	ZIP CODE	6521	иумилиоран;			rioning		
9 BLOOD TYPE	0+	18. PERMANENT ADDRESS			201				
10. GSIS ID NO.	1 200	O GY MENN MADE TO SEE	Ho	PUROK 2	Vo.		Street POBLACION 1		
		-	St	bdivision/Villay SIKATUNA	20		Barangay BOHOL		
11. PAG-IBIG ID NO:	121109012477			Stron ronon Sity/Municipality	,		Province		
12. PHILHEALTH NO.	120253257658	ZIP CODE	6338						
13. SSS NO.		19. TELEPHONE NO.	-		-				
14. TIN NO.	446-387-259	20. MOBILE NO.	09283184742		- 1.5		100		
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)	celestial.r	nanigo@	vsu.edu.p	h			
II. FAMILY BACKGROUND									
22. SPOUSE'S SURNAME			23. NAME of CH	ILDREN (Writ	e full name and	list all)	DATE OF BIRT	TH (mm/dd/yyyy)	
FIRST NAME		NAME EXTENSION (JR., SR)							
MIDDLE NAME			1						
OCCUPATION			4						
EMPLOYER/BUSINESS NAME			Harris	- Appel to					
BUSINESS ADDRESS			4						
TELEPHONE NO.									
24 FATHER'S SURNAME	MANIGO								
FIRST NAME	JULIAN	NAME EXTENSION (JR., SR)			-		-	-	
MIDDLE NAME	OÑES		d return						
25 MOTHER'S MAIDEN NAME									
SURNAME	AGATOL								
FIRST NAME	FE								
MIDDLE NAME	YATO			(Continue on se	parate sheet if neces	sary)		
III. EDUCATIONAL BACKG	GROUND								
26 LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)		PERIOD OF	To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIPV ACADEMIC HONORS RECEIVED	
ELEMENTARY	SEKATUNA CENTRAL ELEMENTARY SCHOOL	ELEMENTARY		6/1/1998	3/30/2004	GRADUATE	2004		
SECONDARY	HOLY NAME UNIVERSTY	SECONDARY		6/1/2004	4/1/2008	GRADUATE	2008	- metaril	
VOCATIONAL / TRADE COURSE									
COLLEGE	VISAYAS STATE UNIVERSITY	BS GEODETIC ENGINEERING		6/1/2008	4/5/2013	GRADUATE	2013		
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY	MS LAND ADMIN AND MANAGEMENT 6/1/2017				15			
		Continue on separate sheet if neo	reasery)						
SIGNATURE	gunu			D	ATE	Jaly 9	,2024		
	J	Control of the State of the Sta	all of the			CI	FORM 212 (Floriso	d 2017). Page 1 of 4	

CAR	SERVICE ELIGI EER SERVICE/ RA 10	80 (BOARD/ BAR) UNDER	RATING	DATE OF	Land State of the land	65 1186	Manage Land	LICENSE (if a	pplicable)
	SPECIAL LAW	S/CES/CSEE Y/DRIVERS LICENSE	(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINA	TION / CONFE	RMENT	NUMBER	Date of Validity
LIC	CENSED GEODE	TIC ENGINEER		9/1/2013	MA	NILA		0009079	11/11/20
							4. 40.		
c			-21						
							ESSENS.		
						1. 1.10,71.14			
WORK	EXPERIENCE		(Co	ntinue on separate sheet if	necessary)				
		nt. Start from your recen	nt work) Descripti	on of duties should b	e indicated in the attac	hed Work E			
	LUSIVE DATES mm/dd/yyyy)	POSITION T	TLE	DEPARTMENT / AGE	NCY / OFFICE / COMPANY	MONTHLY	SALARYI JOBI PAY GRACE (II applicable)& STEP	STATUS OF	GOVT
From	To	(Write in full/Do not	abbreviate)	(Write in full)	o not abbreviate)	SALARY	(Formal *00-0*)/ INCREMENT	APPOINTMENT	(Y/N)
2/2015	6/30/2021	SCIENCE RESEAR	CH ANALYST	GISSU - VISAYAS	STATE UNIVERSITY			JO	Y
/1/2013	2/27/2015	GEODETIC ENGINEER		CERTEZA INFOS	SYS CORPORATION			PERMANENT	N
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NAME & ADDRESS OF C	NAME & ADDRESS OF ORGANIZATION		INCLUSIVE DATES				
20. (Write in fu		From	VOXI/yyyy) To	NUMBER OF HOURS		POSITION / NATURE OF WORK	
		-	-	-			
			-				
		-	-	-			
	To a Title of						
		-	-	-			
	1116						
	(C	ontinue on separat	e sheet if necessa	ny)			
TE LEARNING AND DEVELOPMENT (L&D)	INTERVENTIONS/TRAINING P	ROGRAMS AT	TENDED				
test from the most recent LSD training program and incl				Chief Executive Mans	gerial positions)		
			VE DATES OF		Type of LD		
 TITLE OF LEARNING AND DEVELOPMENT INT (Write in for 		ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Subarvasory	CONDUCTED/ SPONSCRED BY (Write in full)	
1.00		From	То	1 1 1 1 1 1 1	Technical/etc)		
EOHECRAS 1D&2D TRAINING		6/30/2021	6/30/2021	2.0	TECHNICAL	CIVILGEO ENGINEERING	
	PROCEEDS		-				
MALL SCALE IRRIGATION PRJECT TRAINING WO	PRISHOP	7/14/2019	7/16/2019	15.0	TECHNICAL	DA-BAR AND BSWM	
th Phil ESRI Education GIS Conference		5/28/2019	5/9/2019	16.0	TECHNICAL	GEODATA	
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VIII. OTHER INFORMATION	N. Carlotte	Continue on separat		-			
VIII. OTHER INFORMATION							
31 SPECIAL SKILLS and HOBBIES	32. N	ON-ACADEMIC DIS	TINCTIONS / RECO	CONTION		33 MEMBERSHIP IN ASSOCIATION/ORGANIZATIO (Write in full)	
4	The state of the s						
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		dollars on expens					
SIGNATURE	decuin)	to recent to transfer or	The same of	ATE	July 1,2021	

	Are you related by consanguinity or affinity to the appointing o chief of bureau or office or to the person who has immediate s	r recommending authority, or to the supervision over you in the Office,					
	Bureau or Department where you will be apppointed,						
	a. within the third degree?	☐ YES	☑ NO				
	 b. within the fourth degree (for Local Government Unit - Caree 	er Employees)?	YES	✓ NO			
			If YES, give detail	ils:			
35	a. Have you ever been found guilty of any administrative offen	ise?	YES	☑ NO			
			If YES, give detail				
	b. Have you been criminally charged before any court?		YES	☑ NO			
			If YES, give detail				
			Date Filed: Status of Case/s:				
5.	Have you ever been convicted of any crime or violation of any	law decree ordinance or regulation by					
	any court or tribunal?	☐ YES ☑ NO If YES, give details:					
7.	Have you ever been separated from the service in any of the	following modes: resignation.	☐ YES	□ NO			
	retirement, dropped from the rolls, dismissal, termination, end (abolition) in the public or private sector?						
8.	a. Have you ever been a candidate in a national or local elect	ion held within the last year (except	YES	✓ NO			
	Barangay election)?	ran ran	If YES, give deta	ails:			
	b. Have you resigned from the government service during the		YES	☑ NO			
	election to promote/actively campaign for a national or local or		If YES, give deta	_			
9.	Have you acquired the status of an immigrant or permanent r	YES NO If YES, give details (country):					
0.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magr	na Carta for Disabled Persons (RA					
	7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), p	please answer the following items:					
	Are you a member of any indigenous group?		YES If YES, please specif	I NO			
	Are you a person with disability?	YES NO					
			If YES, please specify ID No: ☐ YES ☑ NO				
	Are you a solo parent?	If YES, please specify ID No:					
11.	REFERENCES (Person not related by consenguinity or effinity to applicant le	ppointee)					
	NAME	ADDRESS	TEL NO.				
	DR. PASTOR P. GARCIA	VSU	563-8264	38			
	ENGR. EDGARDO OCHAVILLO	VSU-DEPT OF MECHANICAL ENGINEERING		16			
_	ENGR. OMAR P. JAYAG	CEBU	9176266942				
12	I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertine Philippines. I authorize the agency head/authorized represer agree that any misrepresentation made in this document administrative/criminal case/s against me.	nt laws, rules and regulations of the stative to verify/validate the contents state	Republic of the ed herein.	РНОТО			
	Sovernment Issued ID (i.e Passport, GSIS, SSS, PRC, Driver's License; etc.)	0					
ŀ	PLEASE INDICATE ID Number and Date of Issuance	1/ genium		400 Sept. 1			
ľ	Sovernment Issued ID: PRC	00					
	D/License/Passport No.: 0009079	cix)					
l	Date/Place of Issuance: PRC ORMOC CITY	July 7,202		Right Thumbmark			
_	SUBSCRIBED AND SWORN to before me this	, affiant exhibiting	his/her validly issued	government ID as indicated above.			
	and the second s	Power Administration Co.	lh.				
	and the same of th	Person Administering Oa	91	A STATE OF THE STA			