VISAYAS STATE UNIVERSITY PERSONAL DATA SHEET

For Job Order Workers

Print legibly. Mark appr	opriate boxes	vith " 🗹 " and u	se ser	parate sheet if	necessary.		٨		
1. SURNAME	LIDIRIEIT	DIII	1		Lil				111
FIRST NAME	ROEL		1		1 1 1		1 1 1 1	1 1 1	
MIDDLE NAME	SIAINICIH	121 1 1	1	1111	1 1 1	2. NAME	EXTENSION (e.g. Jr.	, Sr.)	4
3. DATE OF BIRTH (mm/dd/yyyy)		12/10/	980	11. PRESENT ADDR	RESS			•	×
4. PLACE OF BIRTH	BAYBAY	CITY, VEW	TE			Patan	haulas	. 1. 1	
5. SEX	Male Fema			Jajag	, bayba	y, ley-	e		
6. CIVIL STATUS	□ Single □ Wid	Weekler Committee of the Committee of th		12. ZIP CODE					
□Z Married □ Sep □ Annulled □ Oth		ara anacifu		13. TEL. NO./CEL. NO.		09203451829			
	14. PHILHEALTH NO.				A 44 mile State Anna Catalogue				
7. CITIZENSHIP	1 1 1 1 1 1	9. WEIGHT (kg)	56	15. TIN					
8. HEIGHT (m)	" 54" PA LDRAE1	10. BLOOD TYPE		16. PAG-IBIG ID NO).				
17. SPOUSE'S SURNAME	D			18. NAME OF CHILD (Write full name and list all)			DATE OF BIRTH (mm/dd/yyyy)		
FIRST NAME MICHE					Rochelle R. Loreto			719/2006	
MIDDLE NAME	MIDDLE NAME ROCA						Jecob R. Wrefi		
19. HIGHEST EDUCATIONA	[] Elementary (Grade / Graduated) [// High School (1st, 2nd, 3rd, 4th, Graduated)			Bryan R. Lorefo			614	12010	
(Please check and unde	erline the specific)	[] College (1st, 2nd, 3				and the second second second			
		Degree:	nu, 401,	, Graduated)					. 5
20. CAREER SERVICE ELIG	IBILITY	□ Professiona		Sub-Profession	onal	□ Others	, Specify:		177
21. WORK EXPERIENCE INCLUSIVE DATES (mm/dd/yyyy)		POSITION TITLE (Write in full)		DEPARTMENT / AGENCY / OFFICE / COMPANY /PROJECT (Write in full) SALARY (Daily or Monthly		SALARY (Daily or Monthly)	STATUS OF APPOINTMENT (Perm/Temp/ Job Order)	GOVT SERVICE (Yes / No)	
From	То							-	
03/01/2008	12 13112016				PP	Ó		5.0	
01/01/2017	12 13/17018	utility worker			TBI		5.0		
01/01/2019	present	utility worker			USSO		2.0		
SPECIAL SKILLS (i.e. computer skills, typing, welding, plumbing, carpentry, auto mechanic, driving, et. al.)		Proficiency			(Please check)				
		Highly Skilled		Ave	Average		Fair		REMARKS
Panifor Dr	iving	/							
-									
23. RELEVANT TRAININGS SEMINAR/WORKSHOP ATTENDED (Write in full)		INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF	HOURS	OURS CONDUCTED/ SPONSORED BY (Write in full)		D BY	
		From To							
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ISSUED ON (mm/dd/yy): _

ISSUED AT:

24. COMMUNITY TAX CERTIFICATE NO.

IV. CIVIL SERVICE ELIGIBILITY 29.				DATE OF			LICENSE (i	f applicable)
UNDER SI	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE/ TESDA/NCC			EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT		NUMBER	DATE OF RELEASE
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			(0	Continue on separate	sheet if necessary)			
2008	2016	PP0		Paint	er	5.0		
	2018	TBI BING				1.0		
2019	Present	USSO	·	Doen	main tenonce	7.0		
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