CS FOAT No. 212 Revised 2017		NAL DAT						
	ion made in the Personal Data Sheet and the Work E				nal case/s a	gainst the person o	oncerned.	
Print legibly, Tick appropriate boxes	TO FILLING OUT THE PERSONAL DATA SHEET (PL	OS) BEFORE ACCOMPLISHING applicable. DO NOT ABBRE	NG THE PDS FO VIATE.		1. CS ID No.		(Do not fill up.	For CSC use only)
I. PERSONAL INFORMATI	ON							
2. SURNAME	MERIOLES							
FIRST NAME	MANNYLEN					NAME EXTENSION (JR.,	SR)	
MIDDLENAME	ALDE							
3. DATE OF BIRTH (mm/dd/yyyy)	11/08/1990	16. CITIZENSHIP		₹ Filipin	no [Dual Citizenship	by natural	
4. PLACE OF BIRTH	BORONGAN EASTERN SAMAR	If holder of dual citiz	enship,			Pls. indicate cou		izacion
5. SEX	Male Female	please indicate the	details.	Philipp	ines			-
6 CIVIL STATUS	Single	17, RESIDENTIAL ADDRESS		Brgy. Marcos Baybay City, Leyte				
7. HEIGHT (m)	1.52 m			N				
8. WBGHT (kg)	30							
	55 kg	ZIP CODE 18. PERMANENT ADDRESS	6521	Brgy Marcos				
9. BLOOD TYPE	В	10. FERMANEINT ADDRESS						
10. GSIS ID NO.	N/A		E	Baybay City, Leyte				
11. PAGIBIGID NO.	N/A		7					
12. PHILHEALTH NO.	13-025160815-7	ZIP CODE	3	6521				
13. SSS NO.	N/A	19. TELEPHONE NO.						
14. TIN NO.	457-368-261	20. MOBILE NO.			09	9758791734		
15. AGENCY EMPLOYEE NO.	V00878	21. E-MAIL ADDRESS (if any)			len.alde	@vsu.edu.ph		1
II. FAMILY BACKGROUN	D							
22. SPOUSES SURNAME	MERIOLES		23. NAME of Ch	HILDREN (Write ful	I name and is	t all)	DATE OF BIR	TH (mm/dd/yyyy)
FIRST NAME	SANNTIAGO II		N/A					*
MIDDLENAME	CORPEZ							
OCCUPATION	Police corporal	_						
EMPLOYER/BUSINESS NAME	Philippine National Police	= -						
BUSINESS ADDRESS	Inopacan							
TELEPHONE NO.								
24. FATHER'S SURNAME	ALDE							
FIRST NAME	EMMANUEL SR.							
MIDDLE NAME	BALANO							
25. MOTHER'S MAIDEN NAME	Page							
SURNAME	COLES							
FIRST NAME	TERESITA				- 19			
MIDDLE NAME	ARMA			(Co	ntinue on se	parate sheet if necess	ary)	
III. EDUGATIONAL BACK	GROUND				Te-3-230			
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DECF (Write in full)		PERIOD OF AT	TTENDANCE To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
ELEMENTARY	EUGENIO S. DAZA PILOT ELEMENTARY SCHOOL	ELEMENTARY		1997	2003		2003	ACADEMIC AWARD
SECONDARY	EASTERN SAMAR NATIONAL COMPREHENSIVE HIGH SCHOOL	HIGH SCHOOL		2003	2007		2007	ACADEMIC AWARD
VOCATIONAL / TRADE COURSE								
COLLEGE	UNIVERSITY OF THE PHILIPPINES VISAYAS TACLOBAN COLLEGE	BACHELOR OF SCIENCE BIOLO	ЭGY	2007	2011		2011	
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY	MASTER OF SCIENCE In PLANT	PATHOLOGY	2011	2015		2015	
GRADUATE STUDIES	UINIVERSITY OF THE PHILIPPINES LOS BANOS	DOCTOR OF PHILOSOPHY In EN	TOMOLOGY	2016	2021		2021	Phi Sigma Honor

DATE

September 15, 2022

CS FORM 212 (Revised 2017), Page 1 of 4

SIGNATURE

CAREER SERVICE' RA 1080 (BOARDV BAR) UNDER SPECIAL LAWS' CES' CSEE		RATING DATE OF EXAMINATION /		DI ACE DE EVALUE	LICENSE (l'applicable)				
BARANGAY ELIGIBILITY / DRIVER'S LICENSE			(If Applicable)	CONFERMENT	PLACE OF EXAMI	IAHON/ CONFERMENT	NON / CONFERMENT		Date of Velidity
CML SERVICE BLIGIBILITY			81.1	10/17/2010	LEYTE NOR	MAL UNIVERSITY			
			the state of					- in the second	
				_					
			hultin.		<u> </u>	Juli Bu	In hard	Market St.	100
							-		
						E) V	TENT		
							I TAI	=1.7	
							_		
							-û.		
		- 1)	
100									
			*						
lon.		open pill, "I	+						
			(Continue on sec	orate sheet if necessary)					and Polymers
V WORK EXPE									
28,	nployment. Start from your recent w	verk), description of duties should	the indicated in the attached Wo	rk Experience sheet			SALARY/JOB/PAY		
	INCLUSIVE DATES (mm/dd/yyyr)		POSITION TITLE full/Do not abbreviate)		AGENCY / OFFICE / COMPANY full/Do not abbreviate)	MONTHEY SALARY	GRADE (Rappinsole)& STEP (Formal '0G-0")/	STATUS OF APPOINTMENT	CONT SERVICE (Y/ N)
From	To To					15880.80	NOREMENT		TIAN A SA
06/01/2014	5/30/2015	SCIENCE RESEARCH ASSI	STANT	DEPARTMENT OF PES	DEPARTMENT OF PEST MANAGEMENT			JOB ORDER	YES
06/09/2015	10/31/2015	INSTRUCTOR 1	,	DEPARTMENT OF PES	TMANAGEMENT	22110.00	12	Contractual	YES
11/01/2015	12/31/2015	INSTRUCTOR 1		DEPARTMENT OF PES	T MANAGEMENT			Temporary	YES
01/01/2016	09/30/2016	INSTRUCTOR 1		DEPARTMENT OF PES	T MANAGEMENT		ц	Temporary	YES
10/01/2016	12/31/2016	INSTRUCTOR 1		DEPARTMENT OF PES	T MANAGEMENT			Temporary	YES
01/01/2017	12/31/2017	INSTRUCTOR 1		DEPARTMENT OF PES	The state of the s	-		Permanent	YES
					at the same of the	_			
01/01/2018	06/30/2019	INSTRUCTOR 1		DEPARTMENT OF PES	T MANAGEMENT			Permanent	YES
07/01/2019	12/31/2019	INSTRUCTOR 2		DEPARTMENT OF PES	T MANAGEMENT	nie zwien		Permanent	YES
01/01/2020	Present	INSTRUCTOR 2	*	DEPARTMENT OF PES	T MANAGEMENT			Permanent	4
	1								
							- in-		
						_			
							Ь		
				1					
									<u> </u>
									
						+			-
									-
							<i>d</i>		
						1.45	la la		
						_			
									-
				_					
							N AL		
		1				+			
	77					- process	COSTR.		1100
THE E					All-W-1100-0-1100-0-1100-0-1100-0-1100-0-1100-0-1100-0-1100-0-1100-0-1100-0-1100-0-1100-0-1100-0-1100-0-1100-0				
P. P. L. L.									
V.			V						-
					31		li Ilo		
							-		
							4		-
		-							
		4					-		711
				Control of the Contro					

29. NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyy) From To				Control of the Contro
(THIC II IO)			NUMBER OF HOURS		POSITION / NATURE OF WORK
A					
LV (S) av ((Continue	on separate sheet if nece	essary)		
II. LEARNING AND DEVELOPMENT (L&D) INTERVENTION	ONS/TRAINING PI	ROGRAMS ATTEN	DED		
tart from the most recent LSD/training program and include only the relevant L	&D/training taken for the	e last five (5) years for Di	vislan Chief/Eveculiy	e Managarial and	Moret
30. Alexander	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD	Industrial Control
TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)				(Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
					(white in tull)
Basic Life Support, Fire Fighting and Rescue Training	From July 4	To	\$4.00 \$150.00 P		The Careers House Harden
ational Workshop on Invasive Pests and Diseases of Cassava	March 14	July 11, 2016 March 17, 2016	32	participant participant	Visayas State University/BFP Baybay Centro Internacional De Agricultura Tropical/Dept of Agricultur Bureau of Agricultural Research Philippine Root Crops Resea
rganochlorine pesticides and cadmium: Its Effects on Productivity and				participant	Institute of Crop Science, University of the Philippin
sues on Food Safety of the Duce-Egg Industry lectromagnetic Fields, Building Biology and General Health Protection	Nov 9, 2017		8		Los Baños
trategies	April 12, 2018		8	participant	Institute of Crop Science, University of the Philippin Los Baños
Industry 4.0: Agriculture Technologies Advancement	October 12, 2018	October 14, 2018	32	presenter	International Society for Southeast Asian Agricultur Sciences (ISSAAS)
niversity of the Philippines-Kyoto University International Conference		- T. 2010	92	perticipant	University of the Philippines/Kyoto University
	Jan 9, 2019				Graduate School Student Council University of the
eographic Information System Workshop	March 2, 2019	March 4,2019	16	participant	Philippines Los Baños
		maron 12010	.,,		
1 *					
				-	
7 5 5 7					
					
	115				
The second secon					
100					
do .		re-alliand =			
	2				
The state of the s	(Continue	on separate sheet if nece	essary)		
III. OTHER INFORMATION					
31. SPECIAL SKILLS and HOBBIES 32					33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION
				(Write in full)	
Driving and Reading					Organic Agricultural Society Inc
7	-1 - 40-4	-7 1 7			Philippine Phytopathological Society Internationa Society of Southeast Asian
					Agricultural Science

_	The state of the s	· · · · · · · · · · · · · · · · · · ·				
34.	Are you related by consanguinity or affinity to the appointing or chief of bureau or office or to the person who has immediate subureau or Department where you will be apppointed, a. within the third degree?	recommending authority, or to the upervision over you in the Office,	∏ YES □	71 NO		
	a. within the fourth degree (for Local Government Unit - Careel	YES NO YES NO If YES, give details:				
35.	a. Have you ever been found guilty of any administrative offens	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 any court or tribunal?	YES If YES, give details:	NO ADSIGNAMENSO DAG			
37.	Have you ever been separated from the service in any of the for dropped from the rolls, dismissal, termination, end of term, finite the public or private sector?	YES ITYES, give details:	NO shed contract as Research Assistant			
38.	a. Have you ever been a candidate in a national or local elect Barangay election)?	ion held within the last year (except	YES If YES, give details	NO NO		
	b. Have you resigned from the government service during the election to promote/actively campaign for a national or local ca	☐ YES ☑ NO If YES, give details:				
39.	Have you acquired the status of an immigrant or permanent re	YES NO If YES, give details (country):				
40. a. b.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magnand (c) Solo Parents Welfare Act of 2000 (RA 8972), please at Are you a member of any indigenous group? Are you a person with disability? Are you a solo parent?	If YES, please specify: YES V NO If YES, please specify ID No: YES V NO				
			If YES, please specify ID) No:		
41.	REFERENCES (Person not related by consanguinity or affinity to applicant /ap	ADDRESS	TEL, NO.			
	RUBEN M. GAPASIN	DPM, VSU, VISCA, BAYBAY CITY	, EE, NO.	47.2		
-	JESUSITO L. LIM	DPM, VSU, VISCA, BAYBAY CITY		6 6		
	JESUSITO L. LIM ELVIRA L. OCLARIT		=			
42.	I declare under oath that I have personally accomplished this statement pursuant to the provisions of pertinent laws, rul authorize the agency head/authorized representative to verif misrepresentation made in this document and its attachme against me.	les and regulations of the Republic of ly/validate the contents stated herein.	the Philippines. I I agree that any	MANNYLEN A. MERIOLES		
F	Covernment Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Revenuent Issued ID: VSU ID D/License/Passport No.: V00878	box)				
	rate/Place of Issuance: 2015/VSU, BAYBAY LEYTE		Right Thumbmark			
	SUBSCRIBED AND SWORN to before me this	, affiant exhibiti	ing his/her validly issued gov	remment ID as indicated above.		
		Person Administering O				
		ath				