## CS Form No. 212 Revised 2017 PERSONAL DATA SHEET WARNING: Any misinterpretation 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) I. PERSONAL INFORMATION 2. SURNAME **CATARMAN** NAME EXTENSION (JR., SR) FIRST NAME **RONALD** SALINAS MIDDLE NAME 3. DATE OF BIRTH 08/04/1993 16. CITIZENSHIP **▼** Filipino ☐ Dual Citizenship (mm/dd/yyyy) by birth by naturalization 4. PLACE OF BIRTH TACLOBAN CITY If holder of dual citizenship, Pls. indicate country: please indicate the details **✓** Male ☐ Female 5. SEX ☐ Single ✓ Married 17. RESIDENTIAL ADDRESS 6 CIVIL STATUS ☐ Widowed ☐ Separated Other/s: BRGY. 97, CABALAWAN 7. HEIGHT (m) 1.78 TACLOBAN CITY LEYTE 8. WEIGHT (kg) 85 ZIP CODE 18. PERMANENT ADDRESS 9. BLOOD TYPE 0+ 10 GSIS ID NO N/A BRGY.93, BAGACAY 11. PAG-IBIG ID NO 121178920218 TACLBAN CITY LEYTE 13-250954536-0 ZIP CODE 12. PHILHEALTH NO 6500 13. SSS NO. 06-3861235-2 9. TELEPHONE NO NONE 14. TIN NO. 331-079-748 20 MOBILE NO 09262154402 15. AGENCY EMPLOYEE NO. N/A 21. E-MAIL ADDRESS (if any) ee3bcatarmanronald@gmail.com FAMILY BACKGROUND 22. SPOUSE'S SURNAME **CATARMAN** 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) 12/09/2017 FIRST NAME **LESILDA** ZILD EZEKIEL LONZAGA CATARMAN LONZAGA MIDDLE NAME **TEACHER** OCCUPATION EMPLOYER/BUSINESS NAME **DEPED CATBALOGAN CITY** BUSINESS ADDRESS TELEPHONE NO. 09262160971 **CATARMAN** 24 FATHER'S SURNAME NAME EXTENSION (JR., SR) FIRST NAME **ALLAN** CORITANA MIDDLE NAME 25. MOTHER'S MAIDEN NAME **SALINAS** SURNAME FI ORA FIRST NAME **DELA CRUZ** MIDDLE NAME (Continue on separate sheet if necessary) **EDUCATIONAL BACKGROUND** SCHOLARSHIP/ PERIOD OF ATTENDANCE HIGHEST LEVEL/ 26. NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE ACADEMIC LEVEL UNITS EARNED (Write in full) (Write in full) GRADUATED HONORS

(if not graduated) RECEIVED From То JUNE MARCH KAPANGI-AN CENTRAL SCHOOL FI FMFNTARY N/A 2006 2000 2006 MARCH JUNE SECONDARY LEYTE NATIONAL HIGH SCHOOL N/A 2010 2006 2010 VOCATIONAL / N/A N/A TRADE COURSE **BACHELOR OF SCIENCE IN ELECTRICAL** JUNE MARCH COLLEGE **EASTERN VISAYAS STATE UNIVERSITY** 2015 ENGINEERING 2010 2015 GRADUATE STUDIES N/A N/A N/A N/A

DATE

Sept. 10,2021

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**SIGNATURE** 

	ERVICE ELIC	CIDILITY							
				2175.05				LICENSE (if	enlicable)
SPECIAL LAWS/ CES/ CSEE			RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT			LICENSE (if	Date of Validity
REGISTER	REGISTERED ELECTRICAL ENGINEER (REE) 70.00%			APRIL 10-11, 2016	CEBU CITY			0060503	04/08/2022
REGISTER	REGISTERED MASTER ELECTRICIAN (RME) 76			April 12, 2016 CEBU CITY				0048024	04/08/2022
			(Cont	tinue on separate sheet	if necessary)				
	EXPERIENCE ate employme	ent. Start from your recer				e attached	Work Expe	erience sheet.	
							SALARY/ JOB/ PAY GRADE (if		
From	То	POSITION TITL (Write in full/Do not abl		DEPARTMENT / AGEI (Write in full/I	MONTHLY SALARY	applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)	
11/04/2019	PRESENT	ELECTRICAL ENGINEER II		DOH-RO8 GOVE	36,628	16	CONTRACT OF SERVICE	YES	
20/05/2019	11/04/2020	POWER LINES DATA GATHERING/SEGREGATION ENGR.		LEY	12,000	N/A	CONTRACT OF SERVICE	YES	
11/06/2017	12/31/2018	ELECTRICAL ENGINEER II		DOH-RO8 GOVE CANDAHU	31,765	16	CONTRACT OF SERVICE	YES	
08/26/2016	09/10/2017	ELECTRICAL ENGINEER/ENGINEERING MAINTENANCE HEAD		GAISANO C	15,000	N/A	REGULAR	NO	
02/10/2014	03/19/2015	ELECTRICIAN(PARTIME)		BRGY. 93 BAG	N/A	N/A	N/A	N/A	
02/06/2014	05/08/2014	260hrs. On-the-Job	Training	LEY	/ECO II	N/A	N/A	N/A	N/A
			(Cont	tinue on separate sheet	if necessary)				
SIGNA	TURE			DATE	Sept. 10,	2021	CS FOR	RM 212 (Revised 201	7), Page 2 of 4

VI. VOLUNTARY WORK OR INVOLVEM	IENT IN CIVIC / NON-GOVERNI	MENT / PEOPL	.E/VOLUNT	ARY ORGANI	ZATION/S		
NAME & ADDRESS OF OF (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)  From To		NUMBER OF HOURS	POSITION / NATURE OF WORK			
		From	10				
	(Co	ontinue on separat	e sheet if necessa	ary)			
VII. LEARNING AND DEVELOPMENT (I							
(Start from the most recent L&D/training program and	d include only the relevant L&D/training ta			ision Chief/Executi	ive/Managerial posit	ions)	
TITLE OF LEARNING AND DEVELOPMENT INTE (Write in full)		INCLUSIVE ATTENI (mm/do	DANCE d/yyyy)	NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)		CONDUCTED/ SPONSORED BY (Write in full)
		From	То				
DEPARTMENT OF ENERGY-SEMINAR O CONSERVATION IN THE GOVERNMENT HELD A		11/15/18	11/15/18	8HRS.	Technical Lectures		Department of Energy
BASIC LIFE SUPPORT PROVIDERS (	COURSE-LAY RESCUERS	4/27/2018	4/27/2018	4HRS.	Technical Lectures		Craig, Lawrence M.,RN
TECHNICAL LECTURES AND WORKSHOPS ON IMPLEMENTATION OF A PROJECT HELD AT F	RITZ TOWER DE LEYTE TACLOBAN	07/06/18	07/10/18	35HRS.	Technical Lectures and Workshops		Engr. Jerry D. Bolo
SEMINAR ON ELECTRICAL SAFETY HELD AT F CITY	RITZ TOWER DE LEYTE, TACLOBAN	02/21/15	02/21/15	4HRS.	Technical Lectures		Engr. Cleofe T. Caidic
SEMINAR, FORUM ON HOUSEHOLD ENERGY EASTERN VISAYAS STAT		11/20/14	11/20/14	4HRS.	Technical Lectures		Engr. Clodualdo Patano
	(Co	ontinue on separat	te sheet if necessa	ary)			
VIII. OTHER INFORMATION							
SPECIAL SKILLS and HOBBIES	32. NON-/	ACADEMIC DISTIN (Write	CTIONS / RECOG	SNITION		33. MEM	BERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
WITH GOOD PRACTICAL AND ANALYTICAL SKILLS							r, Institute of Integrated Electrical Engineers of the Philippines
PROPER MAINTENANCE OF ELECTRICAL WIRINGS, EQUIPMENT AND DEVICES							
COMPUTER LITERATE, SUCH AS MS WORD,MS POWERPOINT AND MS EXCEL							
ELECTRICAL DESIGN, LAYOUT AND ESTIMATE							
AUTOCAD							
SKETCHUP STANDARD INSTALLATION OF							
ELECTRICAL WIRINGS AND ELECTRICAL EQUIPMENT (CIRCUIT BREAKERS,MOTOR STARTERS AND MOTOR OVERLOAD PROTECTION)							
/	(Cc	ontinue on separat	te sheet if necessa	1			I
SIGNATURE		$\rightarrow$	DATE		Sept. 10, 2021		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 - Care	☐ YES ☑ NO ☐ YES ☑ NO If YES, give details:				
35. a. Have you ever been found guilty of any administrative offer	YES V NO				
	If YES, give details:				
b. Have you been criminally charged before any court?	If YES, give details:  Date Filed:  YES  Status of Case/s:				
36. Have you ever been convicted of any crime or violation of an	y law, decree, ordinance or				
regulation by any court or tribunal?	If YES, give details:  ☐ YES				
37. Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, en phased out (abolition) in the public or private sector?	If YES, give details:  ☐ YES ☑ NO				
38. a. Have you ever been a candidate in a national or local election Barangay election)?	38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?				
b. Have you resigned from the government service during the last election to promote/actively campaign for a national or lo	☐ IřFES, give dills:				
39. Have you acquired the status of an immigrant or permanent	If YES, give details (country):				
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag	•	YES NO			
7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972),  a. Are you a member of any indigenous group?	7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), please answer the following items:				
		If YES, please specify:			
b. Are you a person with disability?		If YES, please specify ID No:			
c. Are you a solo parent?	Are you a solo parent?				
41. REFERENCES (Person not related by consanguinity or affinity to applican	it /appointee)				
NAME	ADDRESS	TEL. NO.			
Atty. Antonio C. Salinas ,CPA	TACLOBAN CITY	09205172136			
Engr. Mark Teotimo S. Reyes, M.M., M. eng'g faculty, ee/ece Dept. College of Engineering Eastern Visayas State University	TACLOBAN CITY	09173104053			
Engr. Rey Victor G. Palen	TACLOBAN CITY	09176225733			
42. I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertine Philippines. I authorize the agency head / authorized repre- agree that any misrepresentation made in this docum administrative/criminal case/s against me.	nt laws, rules and regulations of the sentative to verify/validate the conte	he Republic of the ents stated herein. I			
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)  PLEASE INDICATE ID Number and Date of Issuance  Government Issued ID: PRC  ID/License/Passport No.: 0060503  Date/Place of Issuance: TACLOBAN CITY	e box)  Right Thumbmark				
SUBSCRIBED AND SWORN to before me this	affiant exhib	biting his/her validly issued government ID as indicated above.			
	Person Administering Oa				