CS Form No. 212 Revised 2017	THEMSHOOM PER	SOI	NAL DAT	A SI	IEE.		3 (011:08:080; AR 3 (011:08:080; AR 3 (011:08:08:08:08:08:08:08:08:08:08:08:08:08:	ENTERNATES ASS MUSEUM SARCES MUSEUM SARCES	SAO BAS	
WARNING: Any misrepresent	ation made in the Personal Data Shee	et and the	Work Experience Sheet sh	all cause the	filing of adı	ministrative	/criminal case/s	against the pe	erson	
concerned. READ THE ATTACHED GUIDE	E TO FILLING OUT THE PERSONAL (	DATA SHE	EET (PDS) BEFORE ACCOM	MPLISHING T	HE PDS FO				H TO SERVE THE RESERVE	
Print legibly. Tick appropriate boxe I. PERSONAL INFORMATION	es 🔲 ) and use separate sheet if necessar	ry. Indicate N	I/A if not applicable. DO NOT	ABBREVIATE.		1. CS ID N	2.	(Do not fill up.	For CSC use onl	
2. SURNAME	VERIL									
FIRST NAME				NAME EXTENSION (JR., SR) N/A						
	RANNIE						particular programmer and procure and and	en vancous a seud a seu		
MIDDLE NAME  3. DATE OF BIRTH	BERONDO			Luguescalai e servicino	-					
(mm/dd/yyyy)	02/11/1995		16. CITIZENSHIP		☑ Filip	pino [	Dual Citizenship			
4. PLACE OF BIRTH	BAYBAY LEYTE		If holder of dual citize	enship,			by birth  Pls. indicate	by natural country:	ization	
5. SEX	☐ Male ☑ Fer	emale	please indicate the de	letails.	Philippine	es				
6 CIVIL STATUS	✓ Single		17. RESIDENTIAL ADDRESS						150-500-50	
	☐ Widowed ☐ Sep	eparated		Ho	use/Block/Lot	No.		Street PANGASUGAN	N.	
7. HEIGHT (m)	The state of the s	er out	A YOMERICAN THERMETHAMBER  MICHORINA ALBANYA		Subdivision/Village BAYBAY			Barangay LEYTE		
	1.63 m		MACHINE LE RESERVATION OF THE PROPERTY OF THE		City/Municipality			Province		
8. WEIGHT (kg)	57 kg	30090 s	ZIP CODE.		6521	TASET STATE	ida .	tiz kijasa — Tversit de fi		
9. BLOOD TYPE	CHAOL CRAIL	13.3448436	HO TWENTHARED LIEV HO		ouse/Block/Lot No.			Street		
10. GSIS ID NO.	N/A		PO 27,29 More 1931 Benefit to the constructed the contribution of the con-	S	ubdivision/Village		PANGASUGAN Barangay			
11. PAG-IBIG ID NO	121201370391			-	BAYBAY			LEYTE		
12. PHILHEALTH NO.	13-050190531-4		ZIP CODE		City/Municipality 6521			Province		
13. SSS NO.	N/A		19. TELEPHONE NO.				N/A			
14. TIN NO.	473-318-551-000		20. MOBILE NO.	09466752935						
15. AGENCY EMPLOYEE NO.	N/A		21. E-MAIL ADDRESS (if any)	ran		nieaningveril2021@gm		ail.com		
II. FAMILY BACKGROUND										
22. SPOUSE'S SURNAME	N	N/A	The second secon		of CHILDREN (Write full name and list all)			DATE OF BIRTH (mm/dd/yyyy		
FIRST NAME	N/A	N	NAME EXTENSION (JR., SR)	(JR., SR)		N/A			N/A	
MIDDLE NAME	N	N/A			N/A			1	N/A	
OCCUPATION	N	N/A			N/A			N	N/A	
EMPLOYER/BUSINESS NAME	N	N/A	And the second s	N/A				N	N/A	
BUSINESS ADDRESS	N	N/A		N/A			N/A		WA .	
TELEPHONE NO.	N	N/A				N/A		N	N/A	
24. FATHER'S SURNAME	VERIL	- Is				N/A		N	N/A	
FIRST NAME	RONALD	N	NAME EXTENSION (JR., SR)		MICHAEL ST. 12 - 14 M	N/A		N	I/A	
MIDDLE NAME	LEBRIA			N/A				N	I/A	
25. MOTHER'S MAIDEN NAME						N/A		N/A		
SURNAME		ONDO		N/A			N/		I/A	
FIRST NAME		YDIA		N/A		N/A		N/A		
MIDDLE NAME  II. EDUCATIONAL BACKG		TUDIO			(Continue on separate sheet if nece			ssary)		
	ROUND						le y			
26. LEVEL	NAME OF SCHOOL (Write in full)	al-periodor ration (consultation)	BASIC EDUCATION/DEGREE (Write in full)	E/COURSE	PERIOD OF A	ATTENDANCE	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS	
ELEMENTARY	PANGASUGAN BAYBAY ELEMENTARY		GRADE I TO VI		From 2000	To 2006	With Honor	2006	RECEIVED	
SECONDARY	SCHOOL  VISAYAS STATE LABORATORY HIGH									
VOCATIONAL /	SCHOOL CATIONAL /				2006	2011	With Honor	2011		
TRADE COURSE  COLLEGE	VISAYAS STATE UNIVERSITY		BACHELOR OF SCIENCE IN							
GRADUATE STUDIES			AGRIBUSINESS MASTERS OF SCIENCE IN AG	2011	2015	average variety	2015			
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY		MAJOR IN SOIL SCIE	ENE					Mark A. Alexander and A.	
SIGNATURE	A-40	Suif	nide un separate anete n neces	saryj	DA	TE	O -	1-13-20	21	

27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSSE RATING				DATE OF				LICENSE (if applicable)		
SPECIAL LAWS/ CES/ CSEE			(If Applicable)	CONFERMENT	PLACE OF EXAMIN	ATION / CONFE	RMENT	NUMBER	Date of Validity	
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V. WORK E	XPERIENCE		(Con	tinue on separate sheet	if necessary)		page 1		100 X 100 X	
		Start from your recen	t work) Descriptio	n of duties should b	e indicated in the attacl	ned Work Ex	CONTRACTOR OF STREET	<u>t</u>		
28. INCLUSIVE DATES (mm/dd/yyyy)		POSITION TITLE (Write in full/Do not abbreviate)		DEPARTMENT / AGE (Write in full	MONTHLY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP	STATUS OF	GOV'T SERVICE		
From	То	WEST WARRANT		(white in full	SALARY	(Format *00-0*)/ INCREMENT	APPOINTMENT	(Y/N)		
03/01/2017	PRESENT	ADMINISTRATIVE AIDE I		VSU-ACCO	553.40/DAY		JOB ORDER	Y		
06/01/2015	06/01/2016	PART-TIMER INSTRUCTOR		VSU-DEPARTME MAN	120/HR		JOB ORDER	ΥΥ		
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SIGNAT	TURE	DATE	pfiel		DATE		04-13-	2021 BACTAY	ADIS	

29. NAME & ADDRESS	OF ORGANIZATION		DLUNTARY O			
	or organization a in full)		d/yyyy)	NUMBER OF HOURS		POSITION / NATURE OF WORK
N/A	G SAVEL	N/A	N/A	N/A	Jac marks	
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N/A	d VF 3, give details:	N/A	N/A	N/A		N/A
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I. LEARNING AND DEVELOPMENT (L	&D) INTERVENTIONS/TRAINING F	The same of the sa				NO STATE OF THE ACT OF THE STATE OF THE STAT
	T INTERVENTIONS/TRAINING PROGRAMS in full)		DATES OF DANCE d/yyyy)	NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
WEBINAR RA 11313 S	AFE SPACES ACT	12/10/2020	12/10/2020	3 000	o ecosos en umot lecoso	VISAYAS STATE UNIVERSITY
ISO 9001:2015 AWARENESS/R	E-AWARENESS WEBINAR	11/27/2020	11/27/2020	4		VISAYAS STATE UNIVERSITY
WEBINAR DOCUMENT		11/13/2020	11/13/2020	3		VISAYAS STATE UNIVERSITY
WORKSHOP ON BOOKKEEPING & F ACCOUN	TANT	9/28/2019	9/28/2019	8	eury de Insers	HACKS4GROWTH TRAINING & DEVELOPMENT
ORIENTATION WORKSHOP AMONG TECHNIC		1/15/2019	1/15/2019	8	eusterne fot	VISAYAS STATE UNIVERSITY
TARGET SETTING		8/20/2018	8/21/2018	16	eq is divingin	VISAYAS STATE UNIVERSITY
ISO 9001-2018 ORIENTATION & W SECRETA		1/15/2018	1/15/2018	8		VISAYAS STATE UNIVERSITY
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SPECIAL SKILLS and HOBBIES	32. NO	N-ACADEMIC DISTING		IITION	Character of	33. MEMBERSHIP IN ASSOCIATION/ORGANIZA (Write in full)
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ADMINISTRATIVE SKILLS	Vend aftis an	N/A				N/A
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SIGNATURE	Blo		······································	DA7	E	04-13-2021

34.	Are you related by consanguinity or affinity to the appoint	ting or reco	mmending	authority, or	o the	
	chief of bureau or office or to the person who has immed Bureau or Department where you will be apppointed, a. within the third degree?	iate supervi	ision over	you in the Off	ce,	YES VO
	b. within the fourth degree (for Local Government Unit - 0	Dareer Emp	lovees)?			YES NO
		ide -	A(6)	ANH		If YES, give details:
5.	a. Have you ever been found guilty of any administrative	offense?	J630	ALINE	Section (Control of Control of Co	YES NO
	Asia Asia		AW	ANA		If YES, give details:
	AIA A		ALM			
	b. Have you been criminally charged before any court?	NAM .	ANA			☐ YES ☑ NO If YES, give details:
	AW		AW.	АН	and the second	Date Filed:
		(year)	span () tred	r sterenjas na sund	en 19	Status of Case/s:
6.	Have you ever been convicted of any crime or violation of any court or tribunal?	f any law, d	ecree, ord	dinance or reg	ulation by	✓ YES ✓ NO If YES, give details:
7.	Have you ever been separated from the service in any of retirement, dropped from the rolls, dismissal, termination, (abolition) in the public or private sector?	the following end of term	ng modes: n, finished	resignation, contract or ph	ased out	✓ YES
18.	a. Have you ever been a candidate in a national or local e Barangay election)?	election held	d within th	e last year (ex	cept	☐ YES ☑ NO If YES, give details:
	b. Have you resigned from the government service during election to promote/actively campaign for a national or loc	g the three ( cal candidat	(3)-month te?	period before	the last	☐ YES ☑ NO If YES, give details:
39.	Have you acquired the status of an immigrant or permane		of anothe	r country?	20	☐ YES ☑ NO If YES, give details (country):
	VISAYAS STATE UNIVERSITY		1102/01/1			AND THE RESERVE OF THE PARTY OF
	7277); and (c) Solo Parents Welfare Act of 2000 (RA 897.  Are you a member of any indigenous group?	2), please a	answer the	following iten	18:	☐ YES ☑ NO If YES, please specify:
	Are you a person with disability?			The particles with the particular of	00 m ( 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	☐ YES ☑ NO If YES, please specify ID No:
	Are you a solo parent?					☐ YES ☑ NO If YES, please specify ID No:
1.	REFERENCES (Person not related by consanguinity or affinity to applic	ant /appointee	)			
	NAME		A	DDRESS		TEL. NO.
_	ERLINDA S. ESGUERRA	VS	SU VISCA,	BAYBAY, LEY	TE	525-0140(1006)
-	LOUELLA C. AMPAC	VS	SU VISCA,	BAYBAY, LEY	TE .	525-0140(1061)
	DR. ANTONIO P. ABAMO	VS	SU VISCA,	BAYBAY, LEY	E	525-0140(1005)
	I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertiperations. I authorize the agency head/authorized represagree that any misrepresentation made in this docadministrative/criminal case/s against me.	nent laws,	rules an	d regulations	of the F	Republic of the
Gov	vernment Issued ID (i.e Passport, GSIS, SSS, PRC, Driver's License, etc.)  EASE INDICATE ID Number and Date of Issuance					
	rernment Issued ID:	-		ELin	1	
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	SUBSCRIBED AND SWORN to before me this					his/her validly issued government ID as indicated above.
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