CS Form No. 212 Revised 2017	PERSO	NAL DAT	A SH	EE1	Г				
WARNING: Any misrepresentati	on made in the Personal Data Sheet and the V					ninal case/s again	st the person	concerned.	
	TO FILLING OUT THE PERSONAL DATA SHEE	•		-		· ·	•		
Print legibly. Tick appropriate boxes (and use separate sheet if necessary. Indicate N/.				1. CS ID No.		(Do not fill up. I	For CSC use only)	
I. PERSONAL INFORMATION									
2. SURNAME	CAGOL					1			
FIRST NAME	EUGENIO					NAME EXTENSION (JF	R., SR) III		
MIDDLE NAME	BENIGA								
DATE OF BIRTH (mm/dd/yyyy)	4/14/1991	16. CITIZENSHIP	✓ Filipino ☐ Dual Citizenship			by naturalization			
4. PLACE OF BIRTH	Brgy. SAN JUAN BAYBAY,LEYTE	If holder of dual citize				country:			
5. SEX	✓ Male Female	please indicate the d	etails.					•	
6 CIVIL STATUS	✓ Single	17. RESIDENTIAL ADDRESS	House/Block/Lot No.			Street			
	Other/s:		Sub	odivision/Village	9		SAN JUAN Barangay		
7. HEIGHT (m)	157			AYBAY CITY			LEYTE Province		
8. WEIGHT (kg)	70	ZIP CODE	Ū.	утаторину					
9. BLOOD TYPE	0	18. PERMANENT ADDRESS	Hou	se/Block/Lot N	0.		Street	Street	
10. GSIS ID NO.	N/A		Sub	odivision/Village	9		SAN JUAN Barangay		
11. PAG-IBIG ID NO.	. PAG-IBIG ID NO. N/A			BAYBAY CITY City/Municipality			LEYTE Province		
12. PHILHEALTH NO.	13-2020010046-3	ZIP CODE	6521						
13. SSS NO.	0632696798	19. TELEPHONE NO.	N/A	4					
14. TIN NO.	763-202-347	20. MOBILE NO.	09069069575	069575					
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	eugenioca	igol@gm	ail.com				
II. FAMILY BACKGROUND									
22. SPOUSE'S SURNAME	N/A		23. NAME of CHI	LDREN (Write	e full name and	list all)	DATE OF BIR	TH (mm/dd/yyyy)	
FIRST NAME	N/A	NAME EXTENSION (JR., SR)							
MIDDLE NAME	N/A								
OCCUPATION	N/A								
EMPLOYER/BUSINESS NAME									
BUSINESS ADDRESS	N/A								
TELEPHONE NO.	TELEPHONE NO. N/A								
24. FATHER'S SURNAME	CAGOL								
FIRST NAME	EUGENIO	NAME EXTENSION (JR., SR)							
MIDDLE NAME	CABAJIT								
25. MOTHER'S MAIDEN NAME BE	NIGA								
SURNAME	CAGOL								
FIRST NAME	FELIPA								
MIDDLE NAME	DUPAL			(C	ontinue on se	parate sheet if neces	ssary)		
III. EDUCATIONAL BACKGR	ROUND								
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGR (Write in full)	EE/COURSE	PERIOD OF /	ATTENDANCE To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED	
ELEMENTARY	SAN JUAN ELEMENTARY SCHOOL	PRIMARY EDUCAT	TION	1998	2004	N/A	2004	4th Honor	
SECONDARY	BAYBAY NATIONAL HIGH SCHOOL	HIGHSCHOOL		2004	2008	N/A	2008	N/A	
VOCATIONAL / TRADE COURSE	VISAYAS STATE UNIVERSITY	DIPLOMA in ANIMAL PRO		2008	2010	N/A	2010	N/A	
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF ANIMAL	SCIENCE	2008	2012	N/A	2012	N/A	
GRADUATE STUDIES	BILIRAN PROVINCE STATE UNIVERSITY	MASTER OF EDUCATION ma	jor in SCIENCE	2020	2021	19 Units	N/A	N/A	

SIGNATURE

5/17/21

DATE

	ERVICE ELIG	BILITY							
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE			RATING	DATE OF EXAMINATION /	PLACE OF EXAMINA	TION / CONFERMENT		LICENSE (if a	pplicable) Date of
BARANGAY ELIGIBILITY / DRIVER'S LICENSE (If Applicable)			CONFERMENT	12.02 0. 200			NUMBER	Validity	
1	PROFESSION	AL TEACHER	80.6	9/30/2018	TACLOE	BAN CITY		1731996	4/14/2020
			(Con	tinue on separate sheet	if necessary)				
	EXPERIENCE								
	<u>rate employme</u> JSIVE DATES	nt. Start from your recen	t work) Description	n of duties should b	e indicated in the attach	ed Work Exp	SALARY/ JOB/ PAY	t.	
(m	m/dd/yyyy)	POSITION T (Write in full/Do not		DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)		MONTHLY SALARY	GRADE (if applicable)& STEP (Format "00-0")/	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)
From	То					INCREMENT			
9/15/2013	12/30/2020	KEY FARM ACCOUN CONTRACTUAL			B-MEG	12,000.00	N/A	CONTRACTUAL	N
01/07/2020	6/30/2020	DEVELOPMENT	OFFICER	\#2.1\/.0.0	PCA	20,000.00	N/A	CONTRACTUAL	Y
01/07/2021	PRESENT	PART- TIME INS	TRUCTOR	VISAYAS ST	TATE UNIVERSITY	16,000.00	N/A	CONTRACTUAL	Y
			(Con	tinue on separate sheet	if necessary)				
SIGN	ATURE		3		DATE		5/17/2021		

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S								
29. NAME & ADDRESS OF ORGANIZATION (Write in full)			/E DATES d/yyyy) To	NUMBER OF HOURS		POSITION / NATURE OF WORK		
N/A						N/A		
N/A						N/A		
N/A						N/A		
N/A						N/A		
N/A						N/A		
N/A						N/A		
N/A						N/A		
VII. LEARNING AND DEVELOPMENT (L&D)		tinue on separate s						
30. TITLE OF LEARNING AND DEVELOPMENT INTE (Write in full)	RVENTIONS/TRAINING PROGRAMS	INCLUSIVE	DATES OF DANCE	NUMBER OF HOURS	Type of LD (Managerial/			
Managing Research Remotely: Learning from 20	020 and Moving Forward in 2021	4/21/2021	4/21/2021	3 HRS	TECHNICAL	ELSEVIER		
Best Practices in Writing and Publishin	g Your Research Paper	4/16/2021	4/16/2021		TECHNICAL	ELSEVIER		
Bamboo Production	NCII	04/07/2021	04/07/2021	4 HRS	TECHNICAL	TESDA		
Livestock Biotechnologic	al Center	1/28/2021	1/28/2021	3 HRS	TECHNICAL	DA/ PCC		
Lanscaping Installation and Mi	intenance NCII	12/12/2020	12/12/2020	8 HRS	TECHNICAL	Villaconzoilo Farm		
Training on Organic Concoction and	Extract Production	12/01/2021	12/03/2021	24 HRS	TECHNICAL	ATI		
ORGANIC AGRICULTURE PRO	DUCTION NCII	4/22/2019	5/24/2019	232 HRS	TECHNICAL	GOLD FARM (Kan-lpa Baybay City)		
HORTICULTURE N	CIII	03/01/2019	4/19/2019	445HRS	TECHNICAL	TESDA-ANAS		
AGRICULTURE CROP PRODU	UCTION NCIII	01/07/2019	3/29/2019	336HRS	TECHNICAL	TESDA-ANAS		
ANIMAL PRODUCTION NCII (POU	ILTRY-CHICKEN)	10/22/2018	10/22/2018	8HRS	TECHNICAL	TESDA- CALUBIAN		
Enhanced Vegetable Production CUM Te	chnology Demonstration	6/26/2018	6/28/2018	24 HRS	TECHNICAL	Department of Agriculture		
Enhanced Poultry Production CUM Technology Demonstration			2/27/2018	16 HRS	TECHNICAL	Department of Agriculture		
Organic Farming System			2/17/2017	8 HRS	TECHNICAL	University of Eastern Phillppines		
	(Con	tinue on separate s	sheet if necessary					
VIII. OTHER INFORMATION	(COII	Soparate s	y)					
31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full) NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full) 33. MEMBERSHIP IN ASSOCIATION/OF (Write in full)				33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)			
COOKING	N/A					N/A		
WRITING	N/A					N/A		
READING					N/A			
	N/A					N/A		
	N/A					N/A		
	N/A				N/A			
		N/A				N/A		
SIGNATURE	(Continue on separate sheet if necessary) DATE 5/17/21							
						CS FORM 212 (Revised 2017), Page 3 of 4		

34.	Are you related by consanguinity or affinity to the appointing of chief of bureau or office or to the person who has immediate a Bureau or Department where you will be apppointed,								
	a. within the third degree?	YES V	0						
	b. within the fourth degree (for Local Government Unit - Caree	☐ YES ☑ No	0						
35.	a. Have you ever been found guilty of any administrative offer	nse?	☐ YES ☑ N	0					
			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	/ law, decree, ordinance or regulation by		NO					
33.	any court or tribunal?	, , , , , , , , , , , , , , , , , , ,	☐ YES ☑ If YES, give details:	NO .					
	Have you ever been separated from the service in any of the dropped from the rolls, dismissal, termination, end of term, finithe public or private sector?	ished contract or phased out (abolition) in	☐ YES ☑ If YES, give details:	NO					
38.	a. Have you ever been a candidate in a national or local elect Barangay election)?	ion held within the last year (except	☐ YES] NO					
	b. Have you resigned from the government service during the election to promote/actively campaign for a national or local calculation.	☐ YES ☑ If YES, give details:] NO						
39.	Have you acquired the status of an immigrant or permanent re	☐ YES ✓ If YES, give details (coun] NO htry):						
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magr	· · · · · · · · · · · · · · · · · · ·							
a.	and (c) Solo Parents Welfare Act of 2000 (RA 8972), please a Are you a member of any indigenous group?	answer the following items:		J NO					
	The your amount of any margement group.	☐ YES ☑ If YES, please specify:							
b.	Are you a person with disability?	☐ YES ☑ If YES, please specify ID No] NO						
C.	Are you a solo parent?	☐ YES ☑ If YES, please specify ID No	NO						
41.	REFERENCES (Person not related by consanguinity or affinity to applicant /	appointee)							
	NAME	ADDRESS	TEL. NO.						
	RAMONA BARBARONA	CATARMAN, NORTHERN SAMAR	9291661456						
	JAIME NUñEZ	BAYBAY CITY, LEYTE	9274769074	2					
	YANI BARBARONA	CATARMAN, NORTHERN SAMAR	9100467782						
42.	42. I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I authorize the agency head/authorized representative to verify/validate the contents stated herein. agree that any misrepresentation made in this document and its attachments shall cause the filling of administrative/criminal case/s against me.								
	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)								
	LEASE INDICATE ID Number and Date of Issuance overnment Issued ID: PRC -Teacher								
H	/License/Passport No.: 1731996	Signature (Sign inside the bo							
H		ox)							
Da	ate/Place of Issuance: Tacloban City		Right Thumbmark						
	SUBSCRIBED AND SWORN to before me this	, affiant exhibi	iting his/her validly issued gove	emment ID as indicated above.					
		Person Administering Oat	h						