CS Form No. 212 Revised 2017	DEDG	ONAL DA	TA CUE	CT					
	PERS	ONAL DA	IA SHE	EI					
WARNING: Any misrepresentation	on made in the Personal Data Sheet and the	Work Experience Sheet shall	I cause the filing of adm	inistrative/cr	iminal cas	o/s against the p	erson concen	ned.	
	O FILLING OUT THE PERSONAL DATA SHEE i) and use separate sheet if necessary, indicate N				. CS ID No.		(Do not fill up. F	For CSC use only)	
I. PERSONAL INFORMATION		A in thot applicable. Do NOT Ab	BREVIATE.		100 10 110	1994 (C. 1) 1994 (C. 1)			
2. SURNAME	GODMALING								
FIRST NAME	DENMARK . NAME EXTENSION (JR., SR)								
MIDDLE NAME	LLOREN								
3. DATE OF BIRTH (mm/dd/yyyy)	5/10/1997	16. CITIZENSHIP	CITIZENSHIP				hip		
4. PLACE OF BIRTH	BRGY. CONALUM, INOPACAN, LEYTE	If holder of dua	Pls. indicate o						
5. SEX	✓ Male ☐ Female	please indicate	please indicate the details.				Y		
6 CIVIL STATUS	☑ Single	17. RESIDENTIAL ADDRESS	NIA House/BlockLof No. NIA Subdivision/village			N/A Street CONALUM Barangay			
7. HEIGHT (m)	1.7373	٤,	INOPACAN CityMunicipality			LEYTE Province			
8. WEIGHT (kg)	65	ZIP CODE	, and a second		652	22			
9. BLOOD TYPE	N/A	18. PERMANENT ADDRESS	N.				N/A		
10. GSIS ID NO.	N/A	70,1	House/Blo N	Α			Street CONALUM		
	121238413524	The state of the s	Subdivisio	INOPACAN			Barangay LEYTE		
11. PAG-IBIG ID NO.			City/Mui	nicipality			Province		
12. PHILHEALTH NO.	1325052772009	ZIP CODE			652				
13. SSS NO.	3480960165	19. TELEPHONE NO.	N/A			A			
14. TIN NO.	353884938000	20. MOBILE NO.	09535616839						
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)		dengo	dmaling	@gmail.com			
II. FAMILY BACKGROUND				at your					
22. SPOUSE'S SURNAME	N/A	T was participal (in an)						H (mm/dd/yyyy)	
FIRST NAME	N/A	NAME EXTENSION (JR., SR)	N/A				N/A		
MIDDLE NAME	N/A							-	
OCCUPATION	N/A						3-77 (Harrison)		
EMPLOYER/BUSINESS NAME	N/A						1		
BUSINESS ADDRESS	N/A						- 17.		
TELEPHONE NO.	N/A				-				
24. FATHER'S SURNAME	GODMALING	NAME EXTENSION (JR., SR)							
FIRST NAME	NOEL								
MIDDLE NAME	OBADO						-		
25. MOTHER'S MAIDEN NAME	LLOREN								
SURNAME FIRST NAME	TERESITA								
MIDDLE NAME	PETEROS			(Continue	on separate	sheet if necessary)			
III. EDUCATIONAL BACKG	ROUND			200					
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/(Write in		PERGOD OF ATTENDANCE		HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED	
ELEMENTARY	CONALUM ELEMETARY SCHOOL	PRIMARY E	DUCATION	2004	2010	COMPLETED	2010	7th HONOR	
SECONDARY	CONALUM NATIONAL HIGHSCHOOL	SECONDARY	EDUCATION	2010	2014	COMPLETED	2014	7th HONOR	
VOCATIONAL / TRADE COURSE	N/A	N/A	1	N/A	N/A	N/A	N/A	N/A	
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE EDUCATION major in A		2014	2018	COMPLETED	2018	N/A	
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY	MASTER OF SCIENCE EXTENSION minor in A	gricultural Education	2022	2024	COMPLETED	2024	N/A	
SIGNATURE	ndn	Continue on separate sheet	ii necessary)	DATE July 9, 2024					
		0				CS F	ORM 212 (Revised	2017), Page 1 of 4	



IV. CIVIL SE	RVICE ELIG	BILITY							A STATE OF
		080 (BOARD/ BAR) UNDER	DATING	DATE OF		MA	THE RESERVE TO SERVE THE PARTY OF THE PARTY	LICENSE (if a	pplicable)
SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE			RATING (If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT			NUMBER	Date of Validity
LICENSURE	EXAMINATION	FOR AGRICULTURISTS	81.17	NOVEMBER 9-11, 2021	LINO GONZAGA AVE.,D		TACLOBAN	0038087	Valid until 10/05/2025
			101	ations on seconds show					
V WORKE	XPERIENCE		(Ce	ontinue on separate shee	n necessary)				A STREET, STRE
		nt. Start from your recen	(work) Description of d	luties should be indi	icated in the attached Wor	k Experienc	e sheet.		
28. INCLU	INCLUSIVE DATES POSITION TITLE (mm/dd/yyyy) (Write in full/Do not ab		N TITLE	DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)		MONTHLY SALARY	SALARYI JOBI PAY GRADE (I applicable) 1 STEP (Format 70-07) INCREMENT	STATUS OF APPOINTMENT	GOVT SERVICE (Y/N)
09/19/2022	05/27/2024	GRADUATE TEAC	HING ASSISTANT	VISAYAS S	14000.00	N/A	CONTRACTUAL	Y	
03/16/2022	08/31/2022	ADMINISTRATIV	E ASSISTANT I	DEPARTMEN REGIONAL	17000.00	SALARY GRADE 7	CONTRACTUAL	Y	
09/16/2019	10/31/2020	CUSTOMER SERVICE	REPRESENTATIVE	LEGATO HEAI	19500.00	N/A	PERMANENT	N	

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			10.	Onlinua on sanamia sha	et if necessary				. It can be be
SIGN	SIGNATURE		udnaline/	Continue on separate sheel if necessary DATE		July 9, 2024			
			0					CS FORM 212 (Rev	ised 2017), Page 2 of 4

I. VOLUNTARY WORK OR INVOLVEM	ENT IN CIVIC / NON-GOVERNME			RY ORGANIZA	ITION/S		
9. NAME & ADDRESS O (Write in		INCLUSIV (mm/di		MARIER OF HOURS	POSITION / NATURE OF WORK		
N/A		N/A	N/A	N/A		N/A	
The same of the sa							
		-					
		* -					
		ontinue on separa	to shoot if oncore	and .			
LEARNING AND DEVELOPMENT							
TITLE OF LEARNING AND DEVELOPMENT		INCLUSIVE			Type of LO		
TITLE OF LEARNING AND DEVELOPMENT (Write in		ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	(Managerial/ Supervisory/ Technical/etc)	CONDUCTED SPONSORED SY (Write in full)	
OBE SYLLABUS WRITI	NO WORKSHOP	From 1/7/2024	To 2/7/2024	16		VISAYAS STATE UNIVESRITY	
2nd ABAN-TEKNOLOHIYA-ACA		03/20/2024	03/20/2024	8	TECHNICAL	VISAYAS STATE UNIVESRITY	
EXTENSION DELIVE		06/26/2023	06/30/2023	40	TECHNICAL	AGRICULTURAL TRAINING INSTITUTE	
EVALUATION OF THE EXTENSION SER		9/2/2023	9/2/2023	8		PHILIPPINE FIBER DEVELOPMENT	
ABACA INDUSTRY IN EA					TECHNICAL	AUTHORITY	
LICENSURE EXAMINATION FOR AGE	RICULTURIST REVIEW CLASS	09/17/2022	09/17/2022	8	TECHNICAL	VISAYAS STATE UNIVESRITY	
		9.11					
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		to the state of the					
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		Continue on separa	ete sheet if necess	ary)			
I. OTHER INFORMATION		China China				HER PANTED STATE	
31. SPECIAL SKILLS and HOBBIES	32 NON	ACADEMIC DISTII	NCTIONS / RECOG	NITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
STRONG VERBAL AND WRITTEN		→ N/A				N/A	
COMMUNICATION SKILLS STRONG TIME MANAGEMENT AND		- 147	-				
ORGANIZATIONAL SKILLS							
COMPUTER LITERATE							
			بالمناك				
		1			7.02		
		4					
	10	414 160					
CICNATURE		Continue on separa	ate sheef If necess		ATE	July 9, 2024	
SIGNATURE	udnal	X	THE PARTY IS	D	ATE	CS FORM 212 (Revised 2017), Page 3	



chief of bureau or office or to the person who has immediate s Bureau or Department where you will be apppointed, a. within the third degree?	☐ YES ☑ NO					
b. within the fourth degree (for Local Government Unit - Care	YES INO If YES, give details:					
35. a. Have you ever been found guilty of any administrative offer	☐ 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 INO If YES, give details:					
37. Have you ever been separated from the service in any of the dropped from the rolls, dismissal, termination, end of term, fir in the public or private sector?	nished contract or phased out (abolition)	✓ YES □ NO If YES, give details: RESIGNATION				
38. a. Have you ever been a candidate in a national or local elect Barangay election)?	tion held within the last year (except	☐ YES ☑ NO If YES, give details:				
b. Have you resigned from the government service during the election to promote/actively campaign for a national or local of the election to promote actively campaign for a national or local of the election to promote actively campaign for a national or local	candidate?	☐ YES ☑ NO If YES, give details:				
39. Have you acquired the status of an immigrant or permanent r	YES NO If YES, give details (country):					
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magn						
7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), a. Are you a member of any indigenous group?	please answer the following items:					
Are you a member of any intigenous group?		☐ YES ☑ NO If YES, please specify:				
b. Are you a person with disability?		YES INO If YES, please specify ID No:				
c. Are you a solo parent?	96.5	YES IN NO If YES, please specify ID No:				
41. REFERENCES (Person not related by consanguinity or affinity to applicant /	(appointee)					
NAME	ADDRESS	TEL. NO.				
MARIA RUFELIE S. GULA	TACLOBAN CITY, LEYTE	9171161565	,			
KAREN LUZ P. YAP	BAYBAY CITY, LEYTE	9953602091				
LIJUERAJ J. CUADRA	BAYBAY CITY, LEYTE	9567922509				
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 represer agree that any misrepresentation made in this docur administrative/criminal case/s against me.	ent laws, rules and regulations of the l ntative to verify/validate the contents state	Republic of the ed herein.				
Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance						
Government Issued ID: PROFESSIONAL IDENTIFICATION CARD						
ID/License/Passport No: 0038087	0x)					
Date/Place of Issuance: 02/07/2022/STA. ROSA, LAGUNA	Right Thumbma	rk				
SUBSCRIBED AND SWORN to before me this	9 JUL 2024 , affiant exhibiti	ng his/her validly issued government ID as indicated at	oove.			
	ATTI RISAY C GUINOCOR VSU O-LICEN OSCIE Person Administering Oat	th	w w a			

WORK EXPERIENCE SHEET

Instructions: 1. Include only the work experiences relevant to the position being applied to.

- The duration should include start and finish dates, if known, month in abbreviated form, if known, and year in full. For the current position, use the word Present, e.g., 1998-Present. Work experience should be listed from most recent first.
- Duration: September 19, 2022 May 27, 2024
- · Position: Graduate Teaching Assistant
- Name of Office/Unit: Department of Agricultural Education and Extension
- Immediate Supervisor: Dr. Lijueraj J. Cuadra
 - Name of Agency/Organization and Location: Visayas State University, Visca, Baybay City, Leyte
 - List of Accomplishments and Contributions (if any)
 - o Conducted classes on Agricultural Extension subjects for BS in Agriculture students
 - o Recorded and computed grades of students
 - o Facilitated trainings related to the department's extension projects
 - Served as review master for LEA at VSU Review Center
 - · Summary of Actual Duties
 - o As Graduate Teaching Assistant, I handled classes for BS in Agriculture students.
- Duration: March 16, 2022 August 31, 2022
- Position: Administrative Assistant I
- Name of Office/Unit: Research Division
- Immediate Supervisor: Maria Rufelie S. Gula
 - Name of Agency/Organization and Location: DA-RFO 8 in Kanhuraw Hill, Tacloban City
 - List of Accomplishments and Contributions (if any)
 - Assisted the PRISM Project IT Focal Person in the database management and other IT related activities of the project
 - Assisted in the metadata gathering and monitoring visits of the project
 - o Conceptualized, Encoded, Printed of project documents such as programs, reports, knowledge products, etc.
 - o Facilitated preparation, monitored and reported updates of various administrative-related works
 - Summary of Actual Duties
 - As Administrative Assistant I, I assisted administrative work in the office. I processed papers in a timely manner and made sure the accuracy.
- Duration: September 16, 2019 October 31, 2020
- Position: Customer Service Representative I
- Name of Office/Unit: Provider Services
- Immediate Supervisor: James Marlon Manabat, RN
 - Name of Agency/Organization and Location: Legato Health Technologies Philippines Inc. in Taguig City, Metro Manila
 - List of Accomplishments and Contributions (if any)
 - Answered incoming calls from doctors and nurses
 - Assisted healthcare providers with requests for patient's information, complaints, making appointments, and resolving issues

Summary of Actual Duties

 As Customer Service Representative I under Provider Services, I provided patient's health insurance information such as eligibility, benefits, and claim.

DENMARK L. GODMALING
(Signature over Printed Name of Employee/Applicant)

Date: 07/09/2024