CS Form No. 212 Revised 2017		PERSO	NAL DAT	'A SI	HEET			
WARNING: Any misrepresent	ation made in the Perso	onal Data Sheet and th	e Work Experience Sheet sl	hall cause the	e filing of administrative/crimir	nal case/s against the per	rson	
concerned. READ THE ATTACHED GUIDE	TO FILLING OUT THE	PERSONAL DATA SH	EET (PDS) BEFORE ACCOM	MPLISHING T	HE PDS FORM.			
Print legibly. Tick appropriate boxe	es) and use separate					(Do not fill up.	. For CSC use	
I. PERSONAL INFORMATI								
2. SURNAME	GALAGALA				NAME	E EXTENSION (JR., SR)		
FIRST NAME	MARK RONAR				IVANIE	EXTENSION (SIX., SIX)		
MIDDLE NAME	GALAGALA							
DATE OF BIRTH (mm/dd/yyyy)	4 02	2 1994	16. CITIZENSHIP	· ·		al Citizenship by birth □ by naturalization		
4. PLACE OF BIRTH	JAGNA	A, BOHOL	If holder of dual citize	enship,		Pls. indicate country:		
5. SEX	☑ Male	☐ Female	please indicate the c	letails.			•	
6 CIVIL STATUS	☑ Single	☐ Married	17. RESIDENTIAL ADDRESS			PUROK 3		
O OIVIL OTATIOO	☐ Widowed	☐ Separated		H	House/Block/Lot No.	Street LARAPAN		
	☐ Other/s:				Subdivision/Village	Barangay		
7. HEIGHT (m)	1	1.65			JAGNA City/Municipality	BOHOL Province		
8. WEIGHT (kg)		50	ZIP CODE	6308				
9. BLOOD TYPE	,	AB+	18. PERMANENT ADDRESS		House/Block/Lot No.	PUROK 3 Street		
10. GSIS ID NO.		N/A				LARAPAN		
11. PAG-IBIG ID NO.	1211-4	1665-4922			Subdivision/Village JAGNA	Barangay BOHOL		
12. PHILHEALTH NO.)401518-3	ZIP CODE	City/Municipality 6308		Province		
·								
13. SSS NO.		560716-7	19. TELEPHONE NO.	N/A				
14. TIN NO.		4-084-0000	20. MOBILE NO.	09996670148/09978029102				
15. AGENCY EMPLOYEE NO.		N/A	21. E-MAIL ADDRESS (if any)	markusalejandro2015@gmail.com				
II. FAMILY BACKGROUND								
22. SPOUSE'S SURNAME		N/A	NAME EXTENSION (JR., SR)	23. NAME of	CHILDREN (Write full name and list all)	DATE OF BIR	₹TH (mm/dd/y	
FIRST NAME		N/A	TO THE EXTENSION (U.C., OIL)		N/A			
MIDDLE NAME		N/A			N/A			
OCCUPATION		N/A		NA				
EMPLOYER/BUSINESS NAME		N/A						
BUSINESS ADDRESS		N/A			NA NA			
TELEPHONE NO.		N/A			NA			
24. FATHER'S SURNAME	GALAGALA							
FIRST NAME	AVELINO		NAME EXTENSION (JR., SR)					
MIDDLE NAME	ACEDO							
25. MOTHER'S MAIDEN NAME								
SURNAME	GALAGALA							
FIRST NAME	TITA							
	_							

MIDDLE NAME	ACILO	(Continue on separate sheet if necessary)						
III. EDUCATIONAL BACKGROUND								
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE		HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS	
			From	То	(ii flot graduatos)		RECEIVED	
ELEMENTARY	LARAPAN ELEMENTARY SCHOOL		8 06 2000	31 03 2006		2006		
SECONDARY	BOHOL INSTITUTE OF TECHNOLOGY		8 06 2006	31 03 2010		2010		
COLLEGE	LOURDES COLLEGE	BACHELOR OF LIBRARY AND INFORMATION SCIENCE	8 06 2010	25 03 2015		2015		
GRADUATE STUDIES	LOURDES COLLEGE	MASTER OF LIBRARY AND INFORMATION SCIENCE	10 10 2015	25 03 2018		2018	CHED Sch.	
GRADUATE STUDIES	UNIVERSITY OF CEBU	DOCTOR OF BUSINESS ADMINISTRATION	on-going					
(Continue on separate sheet if necessary)								
SIGNATURE	38		DA	TE		May 5, 5021		

IV. CIVIL	SERVICE ELI	GIBILITY							
	R SERVICE/ RA 1080 CES/ CSEE	(BOARD/ BAR) UNDER SPECIAL BARANGAY	RATING	DATE OF EXAMINATION	PLACE OF EXAMINA	ATION / CONFER	MENT	LICENSE (if a	pplicable) Date of
		DRIVER'S LICENSE	(If Applicable)	pplicable) / CONFERMENT			NUMBER	Validity	
LIBR	ARIAN LICENSU	JRE EXAMINATION	PASSED	1 04 2015	CEB	U CITY		0007409	2 04 2021
			(C	ontinue on separate sheet	if necessary)				
	EXPERIENCE								
	ivate employme LUSNE DATES	nt. Start from your recen	t work) Description	on of duties should b	e indicated in the attache	ed Work Exp	SALARY/ JOB/ PAY		
	mm/dd/yyyy)	POSITION T (Write in full/Do not			ENCY / OFFICE / COMPANY I/Do not abbreviate)	MONTHLY SALARY	GRADE (if applicable) & STEP (Format "00-0")/	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/N)
From	То	0011505#1545	LIDDADIAN	OUDIO40 D	207020 0011 505		INCREMENT		
11 05 2015	11/16/2020	COLLEGE/HEAD			OCTORS COLLEGE	20000.00		FULL-TIME	
15 05 2015	15 09 2015	HIGH SCHOOL L	IBRARIAN	LOURD	ES COLLEGE	12000.00		FULL-TIME	
				ontinue on separate sheet		<u> </u>			
SIGN	IATURE	8	0		DATE			May 5, 5021	

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S						
29. NAME & ADDRESS OF OF (Write in full)			/E DATES d/yyyy) To	NUMBER OF HOURS		POSITION / NATURE OF WORK
VII. LEARNING AND DEVELOPMENT (L&D) I		inue on separate :		y)		
30. TITLE OF LEARNING AND DEVELOPMENT INTE (Write in full)	RVENTIONS/TRAINING PROGRAMS	INCLUSIVE ATTEN	DATES OF IDANCE d/yyyy)	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
Leading Libraries in Times of Crisis: Transforming Cha	allenges to Opportunities	From 6/24/2020	То		,	PAARL
O NEW NORMAL ENVIRONMENT or PANDEMIC: KEE			7/00/0000			PLAI-Negros Island Region
Introduction to Cybersecurity Leading Libraries in Times of Crisis: Transforming Cha	allenges to Opportunities	6/25/2020 6/24/2020	7/23/2020			Cisco Philippine Association of Academic/ Research
Investment Fundamentals		7/27/2019				International Business Management Institute
Seminiar on Communicating Professionally: Integrative Utilization and Usability of Electronic Resources: Impli		15 08 2018	17 08 2018			Philippine Librarians Association, Inc NMRLC
Productivity	cations to Teachers Academic	28 04 2020				Lourdes College Graduate School Research Forum
Regional Seminar/Workshop, General Assembly and L	ibrarians Summit	18 10 2017	20 10 2017			Philippine Librarians Association, Inc CRLC
Librarian as Researcher 3: Weaving Data Threads into I	Research Outputs	11 05 2017	13 05 2017			Philippine Librarians Association, Inc NMRLC
PLAI Congress 2016: Library as a Place			25 11 2016			Philippine Librarians Association, Inc.
Learning New Initiatives Through Adaptability of Chan Centers	ge in Libraries and Information	25 08 2016	26 08 2016			Philippine Librarians Association, Inc CRLC
	(Conti	inue on separate :	sheet if necessar) y)		
VIII. OTHER INFORMATION						
31. SPECIAL SKILLS and HOBBIES	32. NON	-ACADEMIC DISTIN (Write	NCTIONS / RECOG e in full)	NITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
						Philippine Librarians Association
	(Conti	inue on separate :	sheet if necessar		\ TE	
SIGNATURE	3	8		DA	ATE	May 5, 5021

34. Are you related by consanguinity or affinity to the apportance of bureau or office or to the person who has immediate or Department where you will be apppointed,	_						
a. within the third degree? b. within the fourth degree (for Local Government Unit		☑ NO ☑ NO ils:					
35. a. Have you ever been found guilty of any administration	35. a. Have you ever been found guilty of any administrative offense?						
b. Have you been criminally charged before any court?	b. Have you been criminally charged before any court?						
36. Have you ever been convicted of any crime or violation regulation by any court or tribunal?	n of any law, decree, ordinance or	☐ YES ☑ NO If YES, give details: ————————————————————————————————————					
37. Have you ever been separated from the service in any retirement, dropped from the rolls, dismissal, terminatio out (abolition) in the public or private sector?	on, end of term, finished contract or phased	✓ YES					
38. a. Have you ever been a candidate in a national or local Barangay election)?	al election held within the last year (except	☐ YES ☑ NO If YES, give details:					
	b. Have you resigned from the government service during the three (3)-month period before the last election to promote/actively campaign for a national or local candidate?						
39. Have you acquired the status of an immigrant or perma	☐ YES ☑ NO If YES, give details (country):						
 40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8 a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? 	☐ YES If YES, please speci ☐ YES If YES, please speci ☐ YES ☐ YES If YES, please speci	☑ NO ☑ NO					
41. REFERENCES (Person not related by consanguinity or affinity to app	licant /appointee)						
NAME	ADDRESS	TEL. NO.	A STATE OF THE STA				
ANN JERICA SIOJO, RL, MLIS	CAGAYAN DE ORO CITY	9177063758					
MELODY RETAZO, Ph.D. GLEROSE T. MILLANA, MBA, CHP	CAGAYAN DE ORO CITY SURIGAO CITY	9270172382 9091251640					
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. I agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me.							
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: CRN-0111-5575981-0 (UMID) ID/License/Passport No.: P3407824A Date/Place of Issuance: DFA CAGAYAN DE ORO CITY	ox)	Right Thumbmark					
SUBSCRIBED AND SWORN to before me this	, affiant exhib	iting his/her validly issue	d government ID as indicated above.				
	Person Administering Oat	th					