CS Form No. 212
Revised 2017

PERSONAL DATA SHEET

WARNING: Any misrepresentation made in the Personal Data Sheet and the Work Experience Sheet shall cause the filing of administrative/criminal case/s against the person

concerned.

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	e sneet if necessary. Indicate i	N/A if not applicable. DO NOT	ABBREVIATE.		1. CS ID No.		(Do not fill up. I	or CSC use only	
I. PERSONAL INFORMATIO	N									
2. SURNAME	BALOTOL									
FIRST NAME	RUBEN NAME EXTENSION (JR., SR) JR									
MIDDLE NAME	OBRAR									
3. DATE OF BIRTH (mm/dd/yyyy)	21	1/09/1984	16. CITIZENSHIP	✓ Filipino ☐ Dual Citizenship ✓ by birth ☐ by naturalization						
4. PLACE OF BIRTH	CATBALOGAN, SAMAR If holder of dual citizen			— · — ·						
5. SEX	✓ Male	☐ Female	please indicate the de	etails.	Philippines				•	
6 CIVIL STATUS	☐ Single ☐ Widowed	✓ Married ☐ Separated	17. RESIDENTIAL ADDRESS	House/Block/Lot No. Street			1			
7. HEICHT (m)	Other/s:	7 METERS		Sub	ndivision/Village	e		Barangay		
7. HEIGHT (m)		7 METERS 75 KGS	ZIP CODE	City/Municipality Province						
8. WEIGHT (kg)	1		18. PERMANENT ADDRESS		Zone 3		6521-A			
9. BLOOD TYPE		0+	10.1 ENWARENT ADDICESS	Hou	se/Block/Lot N	0.		Street		
10. GSIS ID NO.	Or	n Process		Subdivision/Village			В	rgy. Campetic Barangay		
11. PAG-IBIG ID NO.	913	155081116		Ci	Palo ty/Municipality			Leyte Province		
12. PHILHEALTH NO.	13-0	25424711-2	ZIP CODE		6500					
13. SSS NO.	06-	25386073	19. TELEPHONE NO.				N/A			
14. TIN NO.	23	238-945-767 20. MOBILE NO.			09186723633					
15. AGENCY EMPLOYEE NO.		N/A	21. E-MAIL ADDRESS (if any)	ruben.balotol@vsu.edu.ph						
II. FAMILY BACKGROUND										
22. SPOUSE'S SURNAME		Pepe		23. NAME of CH	ILDREN (Write	e full name and	d list all)	DATE OF BIR	TH (mm/dd/yyyy)	
FIRST NAME	M	Mary Jane NAME EXTENSION (JR., SR)								
MIDDLE NAME	Papa				Karl Caelo Reuben 14/06/2019			6/2019		
OCCUPATION		N/A								
EMPLOYER/BUSINESS NAME		N/A								
BUSINESS ADDRESS		N/A								
TELEPHONE NO.	N/A									
24. FATHER'S SURNAME		BALOTOL								
FIRST NAME		RUBEN	NAME EXTENSION (JR., SR)							
MIDDLE NAME		ROMPAL								
25. MOTHER'S MAIDEN NAME		OBRAR								
SURNAME		BALOTOL								
FIRST NAME	MARIA									
MIDDLE NAME		HISO			(Co	ontinue on se	parate sheet if neces	ssary)		
III. EDUCATIONAL BACKGI	ROUND									
26. LEVEL		E OF SCHOOL Vrite in full)	BASIC EDUCATION/DEGRE (Write in full)	EE/COURSE	PERIOD OF A	ATTENDANCE To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED	
ELEMENTARY	RIZAL CE	ENTRAL SCHOOL	N/A		1991	1997	N/A	1997	N/A	
SECONDARY	ST. MAI	RY'S ACADEMY	N/A		1997	2001	N/A	2012	N/A	
VOCATIONAL / TRADE COURSE		N/A	N/A		N/A	N/A	N/A	N/A	N/A	
COLLEGE	UNIVERSIT	Y OF SAN CARLOS	Bachelor of Arts in Phi	losophy	2002	2006	N/A	2006	N/A	
GRADUATE STUDIES	UNIVERSITY OF	SAN JOSE-RECOLETOS	Master of Arts in Philo	osophy	2018	2020	N/A	2020	N/A	
		(Co	ontinue on separate sheet if nece	essary)						

P3 (° (° (SIGNATURE DATE June 6, 2023

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IV. CIVIL SE	ERVICE ELIG	IBILITY							
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER			DATE OF		LICENSE (if applicable)				
SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE (If Applicable)			EXAMINATION / CONFERMENT	PLACE OF EXAMINA	TION / CONFE	RMENT	NUMBER	Date of Validity	
									validity
			(Con	l ntinue on separate sheet	if necessary)				
	XPERIENCE								
		nt. Start from vour recen	t work) Description	n of duties should b	e indicated in the attache	ed Work Exp	salary/job/pay		
	JSIVE DATES m/dd/yyyy)	POSITION T			ENCY / OFFICE / COMPANY	MONTHLY	GRADE (if applicable) & STEP	STATUS OF	GOV'T SERVICE
From	То	(Write in full/Do not	abbreviate)	(Write in ful	I/Do not abbreviate)	SALARY	(Format "00-0")/ INCREMENT	APPOINTMENT	(Y/N)
	20/12/2017	INSTRUC	TOP	DEPARTMENT O	F LIBERAL ARTS AND	120/br		JOB ORDER	YES
20/05/2014	20/12/2017	INSTRUC	IUR	BEHAVIORA	L SCIENCES. VSU	120/hr	N/A		
20/05/2014	present	Instruct	or	Department of A	rts and Sciences, VSU- Tolosa		SG12	Substitute Temp.	Yes
	<u> </u>								
				ntinue on separate sheet					
SIGNA	ATURE	730	6 6		DATE		6/6/2023		

VI. VOLUNTARY WORK OR INVOLVEMENT	IN CIVIC / NON-GOVERNMENT	/ PEOPLE / V	OLUNTARY (ORGANIZATIO	ON/S	
	DRESS OF ORGANIZATION (Write in full)		INCLUSIVE DATES (mm/dd/yyyy) From To			POSITION / NATURE OF WORK
		110111	10			
VII. LEARNING AND DEVELOPMENT (L&D)		tinue on separate)		
(Start from the most recent L&D/training program and include				Chief/Executive/Ma	nagerial positions)	
30. TITLE OF LEARNING AND DEVELOPMENT INTE (Write in full)		ATTEN	DATES OF DANCE d/yyyy) To	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
DLSU-VSU Research Publication Writeshop		18/06/2018	19/06/2018	16.0	Technical	Department of Liberal Arts and Behavioral Sciences - VSU
2nd International Conference on Philippine and Asian	Studies	03/05/2018	05/05/2018	24.0	Technical	De La Salle University
Faculty Training for the Teaching of the New General	Education Core Course in Ethics	03/01/2017	20/01/2017	136.0	Technical	Department of Liberal Arts and Behavioral Sciences - VSU
Research Extension Capability Building Workshop		04/02/2016	05/02/2016	16.0	Technical	College of Arts and Sciences - VSU
Dynamic Classrooms for Sociology Teachers		26/04/2015	30/04/2015	40.0	Technical	Ateneo de Manila University
	_					
	_					
VIII. OTHER INFORMATION	(Con	tinue on separate	sheet if necessary	<u>')</u>		
31. SPECIAL SKILLS and HOBBIES	32. NON-	-ACADEMIC DISTIN		SNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
N/A	(Write in full)					Social Ethics Society of Mindanao
IVA	NIA					
						Association of Eastern Visayas Studies
	(Continue on separate sheet if necessary)					
SIGNATURE	(Continue on separate sheet if necessar				ATE	June-6-2023
		_				

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?	☐ YES ☑ NO	0			
b. within the fourth degree (for Local Government Unit - Card	☐ YES ☑ No If YES, give details:	0			
35. a. Have you ever been found guilty of any administrative offer	☐ YES ☑ No If YES, give details:	0			
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 arby any court or tribunal?	☐ YES ☑ NO If YES, give details:				
37. Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, er out (abolition) in the public or private sector?	☐ YES ☑ NO If YES, give details:				
a. Have you ever been a candidate in a national or local election.b. Have you resigned from the government service during the	☐ YES ☑ NO If YES, give details: ☐ YES ☑ NO				
election to promote/actively campaign for a national or local		If YES, give details:			
39. Have you acquired the status of an immigrant or permanent	☐ YES ☑ NO If YES, give details (country): ————————————————————————————————————				
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag 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.	☐ YES	☑ NO		
b. Are you a person with disability?					
c. Are you a solo parent?		If YES, please specify ID ☐ YES If YES. please specify ID	NO NO		
41. REFERENCES (Person not related by consanguinity or affinity to applicant	t /appointee)				
NAME	ADDRESS	TEL. NO.			
Ilonah Jean Vivo	Visayas State Univ. Tolosa	09959364838			
Arian G. Acampado	Visayas State Univ. Tolosa	09051034543	100h		
Norlyn Borong	SLSU-Tomas Oppus	09487506496			
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 I agree that any misrepresentation made in this doct administrative/criminal case/s against me.	ent laws, rules and regulations of the esentative to verify/validate the contents	Republic of the s stated herein.			
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance		- 1			
Government Issued ID: Driver's License	PSC (6			
ID/License/Passport No.: H12-19-003062	ox)				
Date/Place of Issuance: Baybay City, Leyte		Right Thumbmark			
SUBSCRIBED AND SWORN to before me this	, affiant exhibit	ing his/her validly issued gov	ernment ID as indicated above.		
	Person Administering Oat	h			
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