CC Form No. 242										
CS Form No. 212 Revised 2017	-	DOO:			. .	-				
	PE	RSO	NAL DAT	A SH	IEE					
WARNING: Any misrepresentat	ion made in the Personal Data	Sheet and the V	Work Experience Sheet shall	l cause the filir	ng of admini	istrative/crii	minal case/s agai	nst the persor	concerned.	
READ THE ATTACHED GUIDE 1	O FILLING OUT THE PERSON	IAL DATA SHEE	ET (PDS) BEFORE ACCOMP	LISHING THE I	PDS FORM.					
Print legibly. Tick appropriate boxes		cessary. Indicate	N/A if not applicable. DO NOT	ABBREVIATE.		1. CS ID No.		(Do not fill up. I	For CSC use only	
I. PERSONAL INFORMATIO										
2. SURNAME	MARCO						N/A			
FIRST NAME	DARWIN						in A			
MIDDLE NAME	ESPINA									
DATE OF BIRTH (mm/dd/yyyy)	3/25/1998	3/25/1998 16. CITIZENSHIP ☑ Filipino ☐ Dual Citizenship								
				☑by birth ☐by naturalization			ation			
4. PLACE OF BIRTH	ALBUERA, LEY	ΓE	If holder of dual citizer							
5. SEX	☑ Male	Female	please indicate the de	etails.					•	
6 CIVIL STATUS		Married	17. RESIDENTIAL ADDRESS	.,				I.BARTE ST.		
	☐ Widowed ☐ Separated			House/Block/Lot No.			ļ	Street POBLACION		
		Other/s:		Subdivision/Village ALBUERA				Barangay LEYTE		
7. HEIGHT (m)	1.65m				ALBUERA City/Municipality			Province		
8. WEIGHT (kg)	60kg		ZIP CODE			6542				
9. BLOOD TYPE	0		18. PERMANENT ADDRESS	Hou	ZONE 3 House/Block/Lot No. Street					
10. GSIS ID NO.	N/A				GE			ENERAL ROXAS		
11. PAG-IBIG ID NO.	1302-5545-422	7	-	Sui	Subdivision/Village DULAG			Barangay LEYTE		
12. PHILHEALTH NO.			ZIP CODE	C	City/Municipality 6505			Province		
13. SSS NO.	13-025545422-7		19. TELEPHONE NO.	N/A						
14. TIN NO.	34-8815071-5 358-650-943		20. MOBILE NO.		09665220599					
	N/A			winmarco14@gmail.com						
15. AGENCY EMPLOYEE NO.	N/A		21. E-MAIL ADDRESS (if any)		<u> </u>	vinmarco	14@gmail.co	<u>)m</u>		
II. FAMILY BACKGROUND 22. SPOUSE'S SURNAME		N/A		23. NAME of CHI	I DDEN /Write	full name and li	et all)	DATE OF RIPT	TH (mm/dd/yyyy)	
FIRST NAME	N/A	II/A	N/A	,		N/A		N/A		
MIDDLE NAME	N/A	N/A			•			N/A		
OCCUPATION	N/A N/A					N/A				
		N/A			N/A					
BUSINESS ADDRESS		N/A		N/A N/A				N/A N/A		
	N/A									
TELEPHONE NO. 24. FATHER'S SURNAME	N/A			N/A N/A			N/A			
	MARCO IN/A		N/A				N/A			
FIRST NAME	MANUEL			N/A			N/A			
MIDDLE NAME	CAAMIC			N/A			N/A			
25. MOTHER'S MAIDEN NAME		FORMA		N/A			N/A			
SURNAME	ESPINA			N/A			N/A			
FIRST NAME	LUZVIMINDA			N/A				N/A		
III. EDUCATIONAL BACKG	CONJURADO (Continue on separate sheet if necessary)							_		
	ROUND								SCHOLARSHIP/	
26. LEVEL	NAME OF SCHOO (Write in full)	L	BASIC EDUCATION/DEGRE (Write in full)	EE/COURSE	PERIOD OF A	To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	ACADEMIC HONORS RECEIVED	
ELEMENTARY	SAN JOSE CENTRAL S	SCHOOL	OOL PRIMARY EDUCA		2006	2011	N/A	2011	N0	
SECONDARY	SAN JOSE NATIONAL HIG	SH SCHOOL	HIGH SCHOOL	-	2012	2015	N/A	2015	1SI HONORABLE MENTION	
VOCATIONAL / TRADE COURSE	N/A		N/A		N/A	N/A	N/A	N/A	N/A	
COLLEGE	VISAYAS STATE UNIV	ERSITY	BACHELOR OF SCIE AGRIBUSINES		2016	2019	N/A	2019	N/A	
			+		 		 			
GRADUATE STUDIES	N/A		N/A		N/A	N/A	N/A	N/A	N/A	

SIGNATURE

August 14, 2023

DATE

IV. CIVIL SERVICE ELIGIBILITY									
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER		RATING	DATE OF			LICENSE (if a			
BAF	SPECIAL LAWS/ CES/ CSEE		(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINA	PLACE OF EXAMINATION / CONFERMENT			Date of Validity
RA 1	RA 1080 LICENSED AGRICULTURIST		79.33%	NOVEMBER 22- 24,2022	TACLOBAN CITY			0041679	3/25/2026
			(0)		7				
	XPERIENCE			ntinue on separate sheet					
	ate employmen SIVE DATES	t. Start from your recent	work) Description	of duties should be i	indicated in the attached l	Nork Experie	SALARY/ JOB/ PAY		
(mi	m/dd/yyyy)	POSITION T (Write in full/Do not			ENCY / OFFICE / COMPANY VDo not abbreviate)	MONTHLY SALARY	GRADE (if applicable)& STEP (Format "00-0")/	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)
From	To	A DAMILUOTO A TO	E AIDE III	VISAYAS STAT	E UNIVERSITY-MAIN	000 1-11	INCREMENT	IOD ODDE	
3/13/2023	PRESENT	ADMINISTRATIV		С	AMPUS	603.45/day		JOB ORDER	Y
10/15/2019	7/4/2022	SUPERVIS		PUREGULD	PRICE CLUB INC.	14,456.00	N/A	PERMANENT	N
-									
-									
			100	ntinue on senarata chest	if necessary				
SIGNATURE (Continue on separate sheet if necessary) DATE August 14, 2					2023				
		`	_					S FORM 212 (Revised 2	017) Page 2 of 4

VI. VOLUNTARY WORK OR INVOLVE	MENT IN CIVIC / NON-GOVERNMENT	IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S					
	ESS OF ORGANIZATION	INCLUSIVE DATES (mm/dd/yyy)				POOLEIGH LANTURE OF WORK	
(Vrite in full)	From	To	NUMBER OF HOURS		POSITION / NATURE OF WORK	
	N/A	N/A	N/A		N/A		
VII. LEARNING AND DEVELOPMEN	(L&D) INTERVENTIONS/TRAINING PR	(Continue on separate sh ROGRAMS ATTEND					
	()	INCLUSIVE DATES OF ATTENDANCE			Type of LD		
	ENT INTERVENTIONS/TRAINING PROGRAMS Vrite in full)	(mm/dd/yyyy) From To		NUMBER OF HOURS	(Managerial/ Supervisory/	CONDUCTED/ SPONSORED BY (Write in full)	
					Technical/etc)		
MENTAL HEALTH WELLNESS SEMINAR		04/25/2023	04/25/2023	4 HOURS	N/A	VISAYAS STATE UNIVERSITY	
BASIC OCCUPATIONAL SAFETY AND HEAL	TH TRAINING COURSE	3/14/2022	3/18/2022	40 HOURS0	SUPERVISORY	PUREGOLD PRICE CLUB INC.	
ON-THE-JOB TRAINING		1/17/2019	3/20/2019	300 HOURS	N/A	KITZTEINHORN FOOD PRODUCTION/GUIMARAS WONDERS FARM	
		(Continue on separate sh	eet if necessary)				
VIII. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES	32.	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)				33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
COMPUTER LITERATE		N/A					
GOOD COMMUNICATION & WRITING SH	ILLS	N/A				N/A	
LEADERSHIP SKILLS		NIA					
		(Continue on separate sh	eet if necessary)				
SIGNATURE	10.	26		D.	ATE	August 14, 2023	

 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? b. within the fourth degree (for Local Government Unit - Car 	☐ YES ☑ NO ☐ YES ☑ NO If YES, give details:						
35. a. Have you ever been found guilty of any administrative off	fense?	☐ 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 a by any court or tribunal?	☐ YES ☑ NO If YES, give details:						
37. Have you ever been separated from the service in any of th retirement, dropped from the rolls, dismissal, termination, en out (abolition) in the public or private sector?	☐ YES ☑ NO If YES, give details:						
38. a. Have you ever been a candidate in a national or local ele Barangay election)?	a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?						
 b. Have you resigned from the government service during the election to promote/actively campaign for a national or local 	☐ YES ☑ NO 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) May 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972). a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? 	☐ YES ☑ NO If YES, please specify: ☐ YES ☑ NO If YES, please specify ID No: ☐ YES ☑ NO If YES, please specify ID No:						
41. REFERENCES (Person not related by consanguinity or affinity to applicant a	/appointee)						
NAME	ADDRESS	TEL. NO.					
GINA A. LORETO	BAYBAY CITY	9058946608					
NICK FREDDY R. BELLO	BAYBAY CITY	9292255015	(= =)				
EULA GRACE D. NEGADO	TACLOBAN CITY	9178579559					
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: PROFESSIONAL ID ID/License/Passport No.: 0041679 Date/Place of Issuance: 6/26/2023	Signature (Sign inside the both 8/14/2023 Date Accomplished	(хс	Right Thumbmark				
CURCODIRED AND CWORN IS A CONTROL OF THE CONTROL OF	ing hig/hor lidle	warmont ID on indicate disk					
SUBSCRIBED AND SWORN to before me this	, affiant exhibit Person Administering Oat		overnment ID as indicated above.				