SIGNATURE

Vinculado

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 READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING TH<u>E PDS FORM</u> Print legibly. Tick appropriate boxes () and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. (Do not fill up. For CSC use only) I. PERSONAL INFORMATION VALENZONA 2. SURNAME NAME EXTENSION (JR., SR) NONE FIRST NAME VALERIE MIDDLE NAME **CIRCULADO** 3. DATE OF BIRTH 16. CITIZENSHIP 8/5/1994 ✓ Filipino Dual Citizenship (mm/dd/yyyy) by birth by naturalization BRGY. PANGASUGAN BAYBAY CITY, 4. PLACE OF BIRTH Pls. indicate country: If holder of dual citizenship, **LEYTE** please indicate the details 5 SEX ☐ Male ▼ Female Single ✓ Married 17. RESIDENTIAL ADDRESS 6 CIVIL STATUS House/Block/Lot No. Widowed □ Separated **PANGASUGAN** Other/s: Subdivision/Village Barangay BAYBAY 7. HEIGHT (m) 1.65 City/Municipality Province 8. WEIGHT (kg) ZIP CODE 6521-A 71 18. PERMANENT ADDRESS 9. BLOOD TYPE 0 House/Block/Lot No. Street PANGASUGAN 10. GSIS ID NO. CRN-021-3136-2040-6 Barangay Subdivision/Village **BAYBAY** LEYTE 11. PAG-IBIG ID NO. 1212-0156-7625 City/Municipality Province 12. PHILHEALTH NO. 13-025360778-6 ZIP CODE 6521-A NONE 13. SSS NO. 06-4400529-6 19. TELEPHONE NO. 14 TIN NO 492-053-316-000 0950 444 1319 20 MORILE NO 15. AGENCY EMPLOYEE NO. V001121 21. E-MAIL ADDRESS (if any) valeriedcirculado@gmail.com **FAMILY BACKGROUND** 22. SPOUSE'S SURNAME **VALENZONA** 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) AME EXTENSION (JR., SF ALEANNA MARRIE C. VALENZONA 12/1/2015 FIRST NAME **ALEMAR** NONE **NAPOLES** MIDDLE NAME OCCUPATION FIELD LABORER EMPLOYER/BUSINESS NAME **VISAYAS STATE UNIVERSITY (VSU) BUSINESS ADDRESS** BRGY. PANGASUGAN, VISCA, BAYBAY CITY, LEYTE TELEPHONE NO. NONE 24. FATHER'S SURNAME **CIRCULADO** NAME EXTENSION (JR., SR **GEORGE** FIRST NAME SABADO MIDDLE NAME 25. MOTHER'S MAIDEN NAME SURNAME **DABALOS** FIRST NAME ROSALINA MIDDLE NAME LAPARA (Continue on separate sheet if necessary) **EDUCATIONAL BACKGROUND** SCHOLARSHIP/ PERIOD OF 26 NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE YEAR **ACADEMIC** LEVEL UNITS FARNED GRADUATED HONORS (Write in full) (Write in full) (if not graduated) RECEIVED From То PANGASUGAN ELEMENTARY SCHOOL PRIMARY EDUCATION FIRST HONORS **ELEMENTARY** 06/01/2001 03/30/2007 **GRADUATED** 2007 SECONDARY **BAYBAY NATIONAL HIGH SCHOOL** SECONDARY EDUCATION 06/01/2007 04/01/2011 GRADUATED 2011 NONE VOCATIONAL / NONE TRADE COURSE **BACHELOR OF SCIENCE IN** VSU ACADEMIC-**VISAYAS STATE UNIVERSITY (VSU)** COLLEGE 06/01/2011 04/22/2015 **GRADUATED** 2015 **AGRIBUSINESS** A SHOLARSHIP GRADUATE STUDIES **VISAYAS STATE UNIVERSITY (VSU)** MM IN AGRIBUSINESS MANAGEMENT 08/01/2017 continuing 40 UNITS NONE

February 27, 2024

DATE

IV. CIVIL SI	ERVICE ELIC	GIBILITY							
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER			DATE OF				LICENSE (if a	pplicable)	
SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE RATING (If Applicable)				EXAMINATION / CONFERMENT				NUMBER	Date of Validity
CARRER SERVICE PROFESSIONAL EXAMINATION			80.47	4/17/2016	EASTERN VISAYAS (EVSU), TAC				
			(0	inua on sonovota at-	of if naceseary				
V. WORK E	XPERIENC	E	(Cont	inue on separate she	et ir necessary)				
		ent. Start from your rec	ent work) Descrip	otion of duties sho	uld be indicated in the a	attached W	ork Experienc	e sheet.	
20.	SIVE DATES /dd/yyyy) To	POSITION T (Write in full/Do not			NCY / OFFICE / COMPANY /Do not abbreviate)	MONTHLY SALARY	PAY GRADE (if applicable)& STEP (Format "00-0")/	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/N)
2/20/2023	PRESENT	ADMINISTRATIVE OFFIC	CER I (CASHIER I)	CASH	OFFICE, VSU	23,176.00	Salary Grade 10; Step 1	PERMANENT	YES
10/1/2019	2/19/2023	ADMINISTRATIV	'E AIDE IV	CASH	OFFICE, VSU	14,993.00	Salary Grade 4; Step 1	PERMANENT	YES
1/3/2019	9/30/2019	ADMINISTRATIV	/E AIDE III	CASH	CASH OFFICE, VSU		Salary Grade 3; Step 1	PERMANENT	YES
10/1/2016	12/31/2018	OFFICE CL	ERK	BUDGET	OFFICE, VSU	6,600.00	N/A	JOB ORDER	YES
8/16/2016	9/30/2016	DATA ENCODER		DEPT. OF AGRICULTURAL ENGINEERING, VSU		5,720.00	N/A	JOB ORDER	YES
4/1/2014	5/30/2014	STUDENT ASSISTANT		DEPT. OF FORESTRY, VSU		2,000.00	N/A	TEMPORARY	YES
4/1/2009	5/30/2009	NURSERY CARETAKER		ANTONIO AGRO-FARM TRADE CORPORATION		2,880.00	N/A	TEMPORARY	NO
			(Conf	inue on separate she	et if necessarv)				
SIGNA	TURE	Virculado		· ·	DATE			y 27, 2024	
			-				CS FORM	212 (Revised 2017),	Page 2 of A

VI. VOLUNTARY WORK OR INVOLVEME				TARY ORGA	NIZATION/S		
29. NAME & ADDRESS OF ORGANIZATION (Write in full)			INCLUSIVE DATES (mm/dd/yyyy)			POSITION / NATURE OF WORK	
VSU ULTIMATE FRISBEE TEAM			PRESENT			ORGANIZATION ADVISER	
V30 DETIMATET KISB	LLILAW	8/22/2023	PRESENT			OKOANIZATION ADVISEK	
	0.5						
II. LEARNING AND DEVELOPMENT (L&	D) INTERVENTIONS/TRAININ		MS ATTEND	ED			
Start from the most recent L&D/training program a	nd include only the relevant L&D/trai		he last five (5) y DATES OF	ears for Division	Type of LD	Managerial positions)	
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)			ATTENDANCE (mm/dd/yyyy)		(Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
60 9001:2015 AWARENESS AND RE-AWARENESS	WEBINAR	From 8/29/2023	To 8/29/2023	8 HOURS	TECHNICAL	VISAYAS STATE UNIVERSITY	
EMPLOYEE SKILL ENHANCEMENT: A SUPERVISORY DEVELOPMENT SEMINAR			6/16/2023	32 HOURS	SUPERVISORY	PERSONNEL OFFICERS ASSOCIATION OF TH PHIL. INC. (POAP, INC.) , PUERTO PRINCESA CITY, PALAWAN	
ORIENTATION/RE-ORIENTATION OF DUTIES AND RESPONSIBILITIES OF dDRCs and AdDRCs, and CASCADING OF DOCUMENTS AND KRECORDS CONTROL PROCEDURE MANUALS AND GUIDELINES			9/7/2022	8 HOURS	TECHNICAL	VISAYAS STATE UNIVERSITY	
60 9001:2015 AWARENESS/ RE-AWARENESS SEM	INAR	8/30/2022	8/31/2022	16 HOURS	TECHNICAL	VISAYAS STATE UNIVERSITY	
AGAP Convention-Seminar: NAVIGATING THE CHALLENGES OF FINANCIAL TECHNOLOGY AND DIGITAL TRANSFORMATION			8/22/2022	32 HOURS	TECHNICAL	ASSOCIATION OF GOVERNMENT ACCOUNTANTS OF THE PHILIPPINES, INC. (AGAP), BAGUIO COUNTRY CLUB, BAGUIO CITY	
N-HOUSE TRAINING ON PUBLIC FINANCIAL MAN	AGEMENT	8/3/2022	8/5/2022	24 HOURS	TECHNICAL	DEPARTMENT OF BUDGET AND MANAGEMENT REGIONAL OFFICE VIII	
BRIEFING ON CONSTRUCTIVE STAMPING OF DOCUMENTARY STAMP TAX			7/26/2022	8 HOURS	TECHNICAL	BUREAU OF INTERNAL REVENUE (BIR), ORMOC CITY, LEYTE	
AGAP Technical Seminar: E-PAYMENT AND E-COLLECTION			6/16/2022	8 HOURS	TECHNICAL	ASSOCIATION OF GOVERNMENT ACCOUNTANTS OF THE PHILIPPINES, INC (AGAP)	
KNOW YOUR MONEY AND COUNTERFEIT DETECTION			2/26/2021	6 HOURS	TECHNICAL	BANKERS INSTITUTE OF THE PHILIPPINES INC. (BAIPHIL)	
ASH MANAGEMENT AND CONTROL SYSTEM		7/22/2019	7/24/2019	24 HOURS	TECHNICAL	COMMISSION ON AUDIT, PALO LEYTE	
ARGET SETTING WORKSHOP		8/20/2018	8/21/2018	16 HOURS	TECHNICAL	VISAYAS STATE UNIVERSITY	
ITERNATIONAL CONFERENCE ON BUSINESS AN ANAGING, AND DISTRIBUTING WEALTH LEADIN	•	2/16/2018	2/17/2018	16 HOURS	TECHNICAL	UNIVERSITY OF SAN CARLOS, CEBU CITY	
CONFERENCE WORKSHOP ON REPORTING POLICIES AMONG REGISTRARS AND THOSE DESIGNATED AS HR OFFICERS, BUDGET OFFICERS AND BOOKKEEPER/ACCOUNTANT IN EXTERNAL CAMPUS			9/2/2017	8 HOURS	TECHNICAL	VISAYAS STATE UNIVERSITY	
VSUCC BASIC COOPERATIVE COURSE SEMINAR			11/19/2016	8 HOURS	TECHNICAL	VISAYAS STATE UNIVERSITY	
HIJO RESOURCES CORPORATION (ON-THE-JOB TRAINING)			1/19/2015	302 HOURS	TECHNICAL	HIJO RESOURCES CORPORATION	
	(Contin	ue on separate	sheet if necessa	ary)			
/III. OTHER INFORMATION	NON-ACADEMIC DISTINCTIONS / RECOGNITION MEMBERSHIP IN						
31. SPECIAL SKILLS and HOBBIES	32. (Write in full)					33. ASSOCIATION/ORGANIZATION (Write in full)	
COMPUTER LITERATE	NONE				VSU-AdPA		
BUSINESS SKILLS					VSUCC		
DRIVING SKILLS (MOTOR BIKE) GARDENING							
DANCING							
DANCING							
		ue on separate					
OIONATURE	IGNATURE (Continuing Continuing C			l .	ATE		

34.	Are you related by consanguinity or affinity to the appointin 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?	□ vec	NO.					
	b. within the fourth degree (for Local Government Unit - Ca	-	✓ NO ✓ NO ls:					
35.	a. Have you ever been found guilty of any administrative of	☐ 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 regulation by any court or tribunal?	☐ YES ☑ NO If YES, give details:						
37.	Have you ever been separated from the service in any of retirement, dropped from the rolls, dismissal, termination, el 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 of Barangay election)?	☐ YES ☑ NO If YES, give details:						
	b. Have you resigned from the government service during last election to promote/actively campaign for a national or	☐ YES ☑ NO If YES, give details:						
39.	Have you acquired the status of an immigrant or permaner	☐ YES ☑ NO If YES, give details (country):						
40.	40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), please answer the following items:							
а	Are you a member of any indigenous group?		│ │ │ YES	✓ NO				
b	Are you a person with disability?		If YES, please specify: ☐ YES ✓ NO If YES, please specify ID No:					
С	Are you a solo parent?		YES					
41.	REFERENCES (Person not related by consanguinity or affinity to	applicant /appointee)						
	NAME	ADDRESS	TEL. NO.					
	QUEEN-EVER Y. ATUPAN	CASH OFFICE, VSU	(565) 0600-1011					
	LOUELLA C. AMPAC	OFFICE OF THE DIRECTOR OF FINANCE, VSU	(565) 0600-1009					
	MONA NENA B. GERALDO	BUDGET OFFICE, VSU	(565) 0600-1009					
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							
	icense, etc.) PLEASE INDICATE ID Number							
Government Issued ID: PHILHEALTH								
	0/License/Passport No. 13-025360778-6	Signature (Sign inside the February 27, 2024						
	late/Place of Issuance: BAYBAY CITY, LEYTE		Right Thumbmark					
	SUBSCRIBED AND SWORN to before me this , affiant exhibiting his/her validly issued government ID as indicated above.							
		th						