CS Form No. 212 evised 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 READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM (Do not fill up. For CSC use only) Print legibly. Tick appropriate boxes () and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. 1. CS ID No. I. PERSONAL INFORMATION BALANA 2. SURNAME IAME EXTENSION (JR., SR) RUEL FIRST NAME MIDDLE NAME REYES 3. DATE OF BIRTH 5/14/1993 16. CITIZENSHIP ✓ Filipino Dual Citizenship (mm/dd/yyyy) by birth by naturalization Pls. indicate country: 4 PLACE OF BIRTH ESCALANTE NEGROS OCCIDENTAL If holder of dual citizenship. please indicate the details ✓ Male Female 5. SEX 17. RESIDENTIAL ADDRESS ✓ Single Married 6 CIVIL STATUS House/Block/Lot No. Widowed Separated PATAG Other/s: Subdivision/Village Barangay Baybay Leyte 7. HEIGHT (m) 161 City/Municipality 54 kg ZIP CODE 8. WEIGHT (kg) 6521 18. PERMANENT ADDRESS 9. BLOOD TYPE 0+ House/Block/Lot No Patag 10. GSIS ID NO. Subdivision/Village Barangay Baybay Leyte 11. PAG-IBIG ID NO. 121226820414 City/Municipality Province 12. PHILHEALTH NO. 13-025419341-1 ZIP CODE 6521 NA 13. SSS NO. 19. TELEPHONE NO. 14. TIN NO. 20. MOBILE NO. 09983373022 ruel.balana@vsu.edu.ph 15 AGENCY EMPLOYEE NO 21. E-MAIL ADDRESS (if anv) II. FAMILY BACKGROUND N/A 22. SPOUSE'S SURNAME 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) Gerald Roy E. Maniego Feb. 24, 2008 FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO. 24. FATHER'S SURNAME **BALANA** ROGELIO FIRST NAME BASAS MIDDLE NAME 25. MOTHER'S MAIDEN NAME **REYES** SURNAME FIRST NAME LUCIA (Continue on separate sheet if necessary) MIDDLE NAME DESCARTIN III. EDUCATIONAL BACKGROUND IIGHEST LEVEL/ UNITS EARNED SCHOLARSHIP/ ACADEMIC NAME OF SCHOOL PERIOD OF ATTENDANCE BASIC EDUCATION/DEGREE/COURSE YEAR LEVEL (Write in (Write in full) GRADUATED HONORS full) (if not graduated) RECEIVED From Τo Maria Lopez Elementary School 2017 None **ELEMENTARY** 2001 /2007/ SECONDARY baybay National High School /2011/ 2011 2008/ None VOCATIONAL / N/A COLLEGE Visayas State University **Bachelor of Animal Science** 2012/ /2016/ 2016 None

Master of Science in Animal Science

GRADUATE STUDIES

SIGNATURE

Visayas State University

January 25, 2025

on-going

DATE

38

2019

IV. CIVIL SI	ERVICE ELIG	IBILI I Y							
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER			RATING	DATE OF EXAMINATION /	DI ACE OF EVAMINATION / CONFE		DMENIT	LICENSE (if ap	
			(If Applicable)	CONFERMENT	TION / CONFERMENT		NUMBER	Date of Validity	
License Agriculturist 75.67%			75.67%	Nov. 20-21, 2024	oban				
			(Co.	-tinus on concrete choose	if managed in				
V. WORK E	XPERIENCE		(Cor	ntinue on separate sheet	n necessary)				
			t work) Description		oe indicated in the attache	ed Work Exp	salary/ JOB/ PAY	t.	GOV I SERVICE
	m/dd/yyyy)	POSITION TITLE	(Write in full/Do not	DEPARTMENT / AGENC	(Write in	MONTHLY SALARY	GRADE (if applicable)& STEP (Format "00-0")/	STATUS OF APPOINTMENT	SERVICE
From	То	abbreviate			not abbreviate)		INCREMENT		
08/03/2020				School				Part-time	
	06/31/2020	Admin ai			of Education	9000.00		J.0	
	6/6/2019	Part-time Ins		Visayas State University Laboratory High School				Part-time	1
	5/21/2018	Community O			TI-RTC8	16000.00		Contractual	1
	3/17/2017	Field Enum		CF	12000.00		Contractual	1	
5/21/2016	7/20/2016	Data Enco		DAS-VSU DVM-VSU				JO	
7/25/2016	8/16/2016	Data enco	oder	ים	VM-VSU			JO	
			(Cor	ntinue on separate sheet	if necessary)				
SIGNATURF		1001	oopurate sneet	DATE			1/25/2	5	

VI. VOLUNTARY WORK OR INVOLVEMENT	IN CIVIC / NON-GOVERNMENT	/ PEOPLE / V	OLUNTARY C	DRGANIZATIO	N/S		
29. NAME & ADDRESS OF ORGANIZATION (Write in full)			(mm/dd/vvvv)	NUMBER OF HOURS		POSITION / NATURE OF WORK	
	(Cor	ntinue on separate	sheet if necessary)			
VII. LEARNING AND DEVELOPMENT (L&D				C/E // 0.4			
(Start from the most recent L&D/training program and inclu	de only the relevant L&D/training taken for t	INCLUSIVE DATES OF		у- <u>-</u> хесипvелиападе	Type of LD		
30. TITLE OF LEARNING AND DEVELOPMENT INTERVEN (Write in		ATTENDANCE (mm/c	id/yyyy) To	NUMBER OF HOURS	(Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
Webinar on Navigating the Digital Shift: Instructiona Flexible Learnin		3/18/2021	3/18/2021			Office of the Vice President for Academic Affairs	
Echo-Webinar on the TIEC-CHED Flexible Learni	<u>-</u>	3/15/2021	3/16/2021			Office of the Vice President for Academic Affairs	
VSU E-Learning Environment Train	ing - Workshop Series	12/1/2020	12/1/2020			Office of the Vice President for Academic Affairs	
Learn and Re-learn: VSU TOS a	and Item Analysis	11/12/2020	11/12/2020			Office of the Vice President for Academic Affairs	
ISO 9001:2015 Awareness/Re-a	wareness Webinar	11/27/2020	11/27/2020			Quality Assurance Center	
Philsan Virtual Animal Nutrition Cor	ference 2020 Webinar	10/21/2020	10/21/2020			Institute of Animal Science, UP Los Banos	
Philsan Virtual Animal Nutrition Cor	ference 2020 Webinar	10/14/2020	10/14/2020			Institute of Animal Science, UP Los Banos	
Philsan Virtual Animal Nutrition Cor	ference 2020 Webinar	10/7/2020	10/7/2020			Institute of Animal Science, UP Los Banos	
Learn and Lead: Evoking Participation a	4/24/2017	4/28/2017			Agricultural Training Institute-Regional Training Center VIII		
An Overview of the Poultry and Livestock Gene	etic Resources in Asian Countries	3/14/2017	3/14/2017			Department of Animal Science	
LaForeT Community Level Researc	h Training Workshop	8/16/2016	8/19/2016			College Forestry and Environmental Science	
	(Cor	ntinue on separate	sheet if necessary				
VIII. OTHER INFORMATION	(00)	timae on ooparate	oneet ii neeccoury,				
31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RE	ECOGNITION	(M/site in £.II)			MEMBERSHIP IN ASSOCIATION/ORGANIZATION 33. (Write in	
			(Write in full)			full)	
SIGNATURE				D	ATE	1/25/25	

 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? b. within the fourth degree (for Local Government Unit - Care 	☐ YES ☑ ☐ YES ☑ If YES, give details:	NO NO				
35. a. Have you ever been found guilty of any administrative offe	☐ 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 an any court or tribunal?	☐ YES ☑ NO If YES, give details:					
	37. Have you ever been separated from the service in any of the following modes: resignation, retirement, dropped from the rolls, dismissal, termination, end of term, finished contract or phased out (abolition) in the public or private sector?					
38. a. Have you ever been a candidate in a national or local elec 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 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 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), page 3. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? 	☐ YES					
41. REFERENCES (Person not related by consanguinity or affinity to applicant /		If YES, please specify ID	No:			
NAME	ADDRESS	TEL. NO.				
Dr. Aleli A. Villocino	Visca, Baybay City, Leyte	1064				
Dr. Charis B.Limbo	Visca, Baybay City, Leyte	9485105847				
Dr. Rosario P. Abela	Visca, Baybay City, Leyte	9183641159				
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. agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me.						
PLEASE INDICATE ID Number and Date of						
Government Issued ID: Passport						
ID/License/Passport No.: P7999366A	Signature (Sign inside the bo	ox)				
Date/Place of Issuance: 07/19/2018-Tacloban	1/25/25 Date Accomplished		Right Thumbmark			
SUBSCRIBED AND SWORN to before me this, affiant exhibiting his/her validly issued government ID as indicated above.						
	h					
			CS FORM 212 (Revised 2017), Page 4 of			