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 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 sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. 1. CS ID No. (Do not fill up. For CSC use only) I. PERSONAL INFORMATION 2. SURNAME BONGCALES IAME EXTENSION (JR., SR) FIRST NAME MARIAN MIDDLE NAME SACRO 3. DATE OF BIRTH 8/24/1996 16. CITIZENSHIP ✓ Filipino Dual Citizenship (mm/dd/yyyy) 4. PLACE OF BIRTH BAYBAY, LEYTE Pls. indicate country: If holder of dual citizenship. please indicate the details 5. SEX ☐ Male ✓ Female ✓ Married 7. RESIDENTIAL ADDRESS Single 6 CIVIL STATUS House/Block/Lot No. Widowed Separated Street BRGY, GUADALUPE Other/s: Subdivision/Village Barangay BAYBAY CITY. LEYTE 7. HEIGHT (m) 1.53 City/Municipality 8. WEIGHT (kg) 55 ZIP CODE 6521 18. PERMANENT ADDRESS 9. BLOOD TYPE 0' House/Block/Lot No Street BRGY. GUADALUPE N/A 10. GSIS ID NO. Subdivision/Village Barangay BAYBAY CITY. LEYTE 11. PAG-IBIG ID NO. 121266359022 City/Municipality Province 13-252952848-9 6521 12 PHILHEALTH NO ZIP CODE 19. TELEPHONE NO. 13. SSS NO. N/A 14. TIN NO. 763-843-930 09368135015/09201035896 20. MOBILE NO. 15. AGENCY EMPLOYEE NO. 21. E-MAIL ADDRESS (if any) marian.sacro@vsu.edu.ph FAMILY BACKGROUND 22. SPOUSE'S SURNAME **BONGCALES** 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) CALYX GIDEON LOUISE S. BONGCALES MARK LOUISE 1/2/2023 FIRST NAME MIDDLE NAME **OBEÑA ELECTRICIAN** OCCUPATION EMPLOYER/BUSINESS NAME N/A BUSINESS ADDRESS N/A TELEPHONE NO. N/A SACRO 24. FATHER'S SURNAME NAME EXTENSION (JR., SR) FIRST NAME **FELIX** MIDDLE NAME BITOY 25. MOTHER'S MAIDEN NAME **GRANADA** SURNAME HERNANE FIRST NAME MIDDLE NAME IBAÑEZ (Continue on separate sheet if necessary) III. EDUCATIONAL BACKGROUND SCHOLARSHIP/ HIGHEST LEVEL/ PERIOD OF ATTENDANCE BASIC EDUCATION/DEGREE/COURSE NAME OF SCHOOL ACADEMIC

YEAR GRADUATED LEVEL UNITS EARNED HONORS (Write in full) (Write in full) (if not graduated) RECEIVED From То **BAYBAY I CENTRAL SCHOOL** N/A **ELEMENTARY** 2003 2009 N/A 2009 N/A **BAYBAY NATIONAL HIGH SCHOOL** SECONDARY 2013 N/A 2009 2013 N/A N/A VOCATIONAL / N/A N/A N/A N/A N/A N/A TRADE COURSE COLLEGE VISAYAS STATE UNIVERSITY **BACHELOR OF SCIENCE IN AGRIBUSINESS** 2019 N/A 2019 N/A 2015 GRADUATE STUDIES VISAYAS STATE UNIVERSITY MASTER IN MANAGEMENT 2021 2022 9 UNITS N/A

ani an

SIGNATURE

August 19, 2024

DATE

7. CARE		080 (BOARD/ BAR) UNDER	RATING	DATE OF				LICENSE (if a	pplicable)
BA	SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE			EXAMINATION / CONFERMENT	PLACE OF EXAMINAT	FION / CONFE	RMENT	NUMBER	Date of Validity
LICENSED AGRICULTURIST 80.0  Career Service (Professional) 82.9			80.0	Nov. 5-7, 2019	TACLOBAN	CITY, LEYT	E	0031921	8/24/2026
			Aug. 20, 2024	City, Leyte		NA	NA		
/ WORK	VALUE		(Co	ntinue on separate sheet	if necessary)				
	EXPERIENCE rate emplovme		nt work) Descripti	on of duties should	be indicated in the attach	ed Work Ex	perience she	et.	
28. INCLU	JSIVE DATES m/dd/yyyy)	POSITION T (Write in full/Do not	ITLE	DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)		MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVIC (Y/ N)
/17/2020	PRESENT	ADMIN. All	DE III	UNIVERSITY REGISTRAR - Visayas State Univeristy		13274.80	N/A	JOB ORDER	Υ
04/30/2014	04/30/2015	Computer Café	Attendant		Computer Shop	3500.00	NA	NA	N
1/9/2018	12/15/2018	Student Assistant		VSU Department of Business Management		25/hour	NA	NA	N
				ntinue on senarate chest	if necessary)				
SICN	ATURE		fran	ntinue on separate sheet	DATE		August 19, 2	024	

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / NAME & ADDRESS OF ORGANIZATION		INCLUSIVE DATES					
29. NAME & ADDRESS OF ORGANIZATION (Write in full)			(mm/dd/yyyy) From To		POSITION / NATURE OF WORK		
N/A			N/A	N/A	N/A		
	(Con	tinue on separate :	sheet if necessary)				
I. LEARNING AND DEVELOPMENT (L&D)	INTERVENTIONS/TRAINING PR	OGRAMS AT	TENDED	1			
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)			INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
ofessional Lecture Series w/ Prof. Ladislav Kokoska		From 3/13/2024	To 3/13/2024		recrimical/etc)	Dean, Graduate School	
parkling Spaces: Mastering the Art of Ho	usekeeping (Batch 1)	3/26/2024	3/26/2024	8		VSU HRMO	
ebinar on HR Training and Developmer	t: Strategies for Empowering	2/3/2024	2/3/2024	2		Knights of Online Marketers	
xcellence of RIS Software Onboarding		12/6/2024	12/6/2024	8		VSU HRMO	
nlocking Excellence: The 5S Revolution	for Clerks and Heads at	44/00/000	44/00/000			Vell	
Visayas State University PURCHASE REQUEST (PR) MODULE OF THE SUPPLY			11/29/2023 8/28/2020	4		VSU SPPMIS	
ROPERTIES PROCUREMENT OCUMENT TRACKING SYSTEMS		8/28/2020		-		VSU HRIS	
			11/13/2020	3		VSU HRIS	
lental Health Awareness Seminar		4/25/2023	4/25/2023	3		VSU HRMO	
SO 9001:2015 Awareness and Re-aware	ness Webinar	8/29/2023	8/29/2023	3		VSU	
SO 9001:2015 Awareness and Re-aware	ness Webinar	8/31/2023	8/31/2023	3		VSU	
Breaking Limits: Be an Effective Speaker			11/27/2018	4		VSU	
Youth Entrepreneurship: Entrepreneurial Mindsetting and Business Planning			4/24/2018	8		DTI Leyte	
	(Con	tinus on consusts	had if name and				
III. OTHER INFORMATION	(Con	tinue on separate :	aneet ii necessary)				
	NON-ACADEMIC DISTINCTIONS / RECOGNITION MEMBERSHIP IN ASSOCIATION/ORGANIZATION						
31. SPECIAL SKILLS and HOBBIES	32.	(Write in full)			33. (Write in full)		
licrosoft Office omputer Skill	N/A				Philippine Association of Agriculturist Inc		
ommunicartion							
ead Generation ighly Competitive							
asic Graphic Design							
dmin Support valuation and attention to detail							
ocial Media management							
bility to work independently or as part of							
Oata Entry	(Con	tinue on separate s	sheet if necessary				
CIONATURE	france		occir nocessaly)		TC		
SIGNATURE	mour c			DA	TE	August 19, 2024	

34. Are you related by consanguinity or affinity to the appointin	or recommending authority, or to the							
chief of bureau or office or to the person who has immedia								
Bureau or Department where you will be apppointed,								
a. within the third degree?	☐ YES ☑							
b. within the fourth degree (for Local Government Unit - Ca	reer Employees)?	☐ YES ☑  If YES, give details:	NO					
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?		NO						
	If YES, give details:							
	Date Filed: _ Status of Case/s:							
36. Have you ever been convicted of any crime or violation of a	YES NO							
by any court or tribunal?	If YES, give details:							
37. Have you ever been separated from the service in any of the	<del>-</del>	☐ YES ☑ NO						
retirement, dropped from the rolls, dismissal, termination, e out (abolition) in the public or private sector?	nd of term, finished contract or phased	If YES, give details:						
38. a. Have you ever been a candidate in a national or local el	ection held within the last year (except	YES NO						
Barangay election)?	If YES, give details:							
b. Have you resigned from the government service during election to promote/actively campaign for a national or local.	t September 1 NO September 1 NO September 2 NO Sept							
39. Have you acquired the status of an immigrant or permaner	☐ YES ☑ NO							
	If YES, give details (co	ountry):						
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma	agna Carta for Disabled Persons (RA	-						
7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972	), please answer the following items:							
Are you a member of any indigenous group?		YES If YES, please specify:	✓ NO					
b. Are you a person with disability?	Are you a person with disability?							
s Are you a cole perent?		If YES, please specify ID No:						
c. Are you a solo parent?								
41. REFERENCES (Person not related by consanguinity or affinity to applicant	t /appointee)							
NAME	ADDRESS	TEL. NO.						
RENATO A. MAALA	BAYBAY CITY, LEYTE	9606090137						
NORMA O. VILLAS	VISCA, BAYBAY CITY, LEYTE	9061023570						
LOUISA MARIE B. ANDRADE	STA. CRUZ, BAYBAY CITY, LEYTE	563-7527						
	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.	Junient and its attachments shall caus	se the liling of	711010					
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)								
PLEASE INDICATE ID Number and Date of Issuance	C = '=							
Government Issued ID: PRC ID								
ID/License/Passport No.: 0031921	ox)							
Date/Place of Issuance: PRC ORMOC		Right Thumbmark						
SUBSCRIBED AND SWORN to before me this, affiant exhibiting his/her validly issued government ID as indicated above.								
I -	Person Administering Oat	th						