PRSONAL DATA SHEET

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

Print legibly. Tick appropriate boxe	ETO FILLING OUT THE PERSONAL DATA SHE es (and use separate sheet if necessary. Indicate	ET (PDS) BEFORE ACCOM	PLISHING THE	PDS FOR	M. 1. CS ID No	ION FOR LEAST	(Do not fill us	p. For CSC use on
LERGINAL MEDILLI	ion				J. 55 JD H.		(DO HOT IIII O	or 1 of coc use offi
2. SURNAME	AURE				-			
FIRST NAME	MA RACHEL KIM	2 2		SINI.	-	NAME EXTENSION (JR, SR) N	IA-
MIDDLE NAME	LOCAYON		1000	Ta .				
DATE OF BIRTH (mm/dd/yyyy)	08/30/1981	16 CITIZENSHIP	Filipino 🔲 Dual Citizensh			nip		
4. PLACE OF BIRTH	MANDALUYONG CITY	If holder of dual citiz	enship,			Pls. indicate		alization
5. SEX	☐ Male ☐ Female	please indicate the	details,	Philippine	cs	Fr. The	44	-
6 CIVIL STATUS	☐ Single ☐ Married ☐ Widowed ☐ Separated ☐ Other/s:	17. RESIDENTIAL ADDRESS	VISAY	APT 66 ouse/Block/Lot AS STATE UNI	VERSITY		Street RGY. PANGASUG	
7. HEIGHT (m)	1.64 m	The state of the s	S	BAYBAY CITY			Barangay LEYTE	
8. WEIGHT (kg)	89 kgs.	ZIP CODE		City/Municipali	ty	6521	Province	
9. BLOOD TYPE	"AB+"	18. PERMANENT ADDRESS		CJP erez CMP	0		B. CABAHUG ST	0.000
10. GSIS ID NO.	E 18 0		Н	ouse/Block/Lot	No.	TOTAL	Street	
	006-0017-6383-2			ubdivision/villia	ige	THE	IBABAO Barangay	
11. PAG-IBIG ID NO.	1700-0029-6209		MANDAU	E CITY City/Municipalii	y		Province	
12. PHILHEALTH NO.	12-050350445-1	ZIP CODE		6014		70/07	-	To the second
13. SSS NO.	623257861	19. TELEPHONE NO.			05	3-5637411		
4. TIN NO.	227099093	20. MOBILE NO.		09228008135				
5. AGENCY EMPLOYEE NO	V00407	21. E MAIL ADDRESS (if any)		N I I I	kim au	re@vsu.edu.r	oh	-
E Mail Florida en el 18.								
2. SPOUSE'S SURNAME	AURE	tana and tank and the	23. NAME of CH	ILDREN (Write	full name and	list all)	DATE OF BIR	TH (mm/dd/yyyy)
FIRST NAME	REV RHIZZA .	NAME EXTENSION (JR., SR)	A	LIKA DAN	NIELLA L.	AURE	12/0	03/2009
MIDDLE NAME	LIONG		A	LINA DON	IINIQUE L.	AURE	12/2	26/2015
OCCUPATION	COLLEGE PROFESS	SOR			N/A		12.12	N/A
EMPLOYER/BUSINESS NAME	VISAYAS STATE UNIVE	RSITY		1 19	N/A	1	1	N/A
BUSINESS ADDRESS	BAYBAY CITY, LEY	TE		19	N/A	Ø1		N/A
TELEPHONE NO.	N/A				N/A			N/A
4. FATHER'S SURNAME	LOCAYON				N/A			N/A
FIRST NAME	ROMEO	NAME EXTENSION (JR., SR)			N/A			N/A
MIDDLE NAME	BASQUIÑAS	to the second second		18	N/A	9	E CO	N/A
5. MOTHER'S MAIDEN NAME		75 July 1997			N/A	undir di	180	WA
SURNAME	PEREZ		e 11		N/A	10.0	are of	WA .
FIRST NAME	RUTH				N/A		N/A	
MIDDLE NAME	JAYME		(Continue on separ			arate sheet if necessary)		
	ROUID							
E LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)		PERIOD OF	ATTENDANCE To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
ELEMENTARY	MARIE ERNESTINE SCHOOL	ELEMENTARY		1990	1994	N/A	1994	N/A
SECONDARY	STA ROSA PAROCHIAL SCHOOL	SECONDARY EDUCA	TION	1994	1998	N/A	1998	N/A
VOCATIONAL/TRADE SCHOOL	NA	N/A		N/A	N/A	N/A	N/A	WA
COLLEGE	UNIVERSITY OF SAN CARLOS	BACHELOR OF SECONDARY EDUCATION MAJOR IN MATHEMATICS		1998	2003	N/A	2003	CHED-CITE
GRADUATE STUDIES	CEBU NORMAL UNIVERSITY	MASTER OF ARTS IN EDUCAT MATHEMATICS		2003	2011	NVA	2011	N/A
SIGNATURE	THE CO	Continue on separate sheet if nece		PRIL 24, 2017	14	C8 FORM 212	2 (Revised 2017),	Page 1 of 4

CARE	ER SERVICE/RA 108	0 (BOARD/BAR) UNDER		DATE OF	THE PARTY			LICENSE (if a	pplicable)
	SPECIAL LAWS		RATING (If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINA	TION / CONFER	MENT	NUMBER	Date of Validity
LICENSU	RE EXAMINATIO	N FOR TEACHERS	TOTAL SERVICE STATE SERVICE	AUGUST, 2003	CEBU	JCITY	ew z sutan	0818520	8/30/2019
	N/A	150	N/A	N/A		VA .		N/A	N/A
	N/A		N/A	N/A	NA			N/A	N/A
N/A N/A		N/A	N/A	N	VA	MOYAUG JI	N/A	N/A	
		N/A	N/A	N	N/A	N/A			
6	N/A		N/A	N/A N/A		VA.		N/A	N/A
N/A		N/A	. N/A N/A				N/A	N/A	
			(Cc	ontinue on separate sheet if	necessary)	i e descere			
28 INCL	JSIVE DATES	**************************************					SALARY/ JOB/ PAY		
	m/dd/yyyy)	POSITION TI (Write in full/Do not a			ICY / OFFICE / COMPANY to not abbreviate)	MONTHLY SALARY	applicable) & STEP	STATUS OF APPOINTMENT	GOVT SERVICE (Y/N)
01/01/2017	To PRESENT	ACCIOTANT DO	EECOD I	DEPARTMENT OF TEACH	ER EDUCATION, COLLEGE OF		INCREMENT		
01/01/2017	12/31/2016	ASSISTANT PRO		EDUCATION, VISAY	AS STATE UNIVERSITY ER EDUCATION, COLLEGE OF	27,565.00	330,780.00	PERMANENT	Y
	1530				AS STATE UNIVERSITY ER EDUCATION, COLLEGE OF	26,192.00	314,304.00	PERMANENT	Y
1/01/2016	7/31/2016	ASSISTANT PRO	1100	EDUCATION, VISAY	AS STATE UNIVERSITY	26,192.00	314,304.00	TEMPORARY	Y
1/01/2015	.12/31/2015	ASSISTANT PRO	FESSOR I	EDUCATION, VISAY	ER EDUCATION, COLLEGE OF AS STATE UNIVERSITY	24,887.00	298,644.00	TEMPORARY	Y
11/01/2015	10/31/2015	ASSISTANT PRO	FESSOR I	EDUCATION, VISAY	ER EDUCATION, COLLEGE OF AS STATE UNIVERSITY	24,887.00	298,644.00	TEMPORARY	Y
06/01/2012	12/31/2014	INSTRUCTO	OR II	DEPARTMENT OF TEACHE EDUCATION, VISAY,	21,436.00	257,232.00	TEMPORARY	Y	
0/28/2011	5/31/2012	INSTRUCTO	DR II		ER EDUCATION, COLLEGE OF 19,658.00 235,896.		235,896.00	TEMPORARY	Υ.
6/01/2011	10/27/2011	INSTRUCT	OR I	The second secon	R EDUCATION, COLLEGE OF AS STATE UNIVERSITY	18,333.00	219,996.00	TEMPORARY	Y
1/01/2010	5/31/2011	INSTRUCTO	ORI	the second secon	R EDUCATION, COLLEGE OF AS STATE UNIVERSITY	16,726.00	200,712.00	TEMPORARY	Υ
6/24/2010	10/31/2010	INSTRUCTO	ORI		E EDUCATION, COLLEGE OF AS STATE UNIVERSITY	16,726.00	200,712.00	CONTRACTU AL	Y
7/01/2009	6/23/2010	INSTRUCTO	DRI		E EDUCATION, COLLEGE OF AS STATE UNIVERSITY	15,119.00	181,428.00	CONTRACTU	Υ
7/01/2009	6/23/2010	INSTRUCTO	DRI	DEPARTMENT OF SCIENCE	E EDUCATION, COLLEGE OF	15,119.00	181,428.00	CONTRACTU	Υ
7/01/2009	6/23/2010	INSTRUCTO	DRI	DEPARTMENT OF SCIENCE EDUCATION, COLLEGE OF EDUCATION, VISAYAS STATE UNIVERSITY		15,119.00	181,428.00	CONTRACTU	Y
7/01/2009	6/23/2010	INSTRUCTO	DR1	DEPARTMENT OF SCIENCE EDUCATION, COLLEGE OF EDUCATION, VISAYAS STATE UNIVERSITY		15,119.00	181,428.00	CONTRACTU AL	Y
7/01/2009	6/23/2010	INSTRUCTO	DRI	DEPARTMENT OF SCIENCE	E EDUCATION, COLLEGE OF AS STATE UNIVERSITY	15,119.00	181,428.00	CONTRACTU AL	Υ
7/01/2008	6/30/2009	INSTRUCTO	DRI	DEPARTMENT OF SCIENCE	E EDUCATION, COLLEGE OF AS STATE UNIVERSITY	13,512.00	162,144.00	CONTRACTU	Υ
1/01/2007	6/30/2008	INSTRUCTO	DRI		E EDUCATION, COLLEGE OF AS STATE UNIVERSITY	12,284.00	147,408.00	CONTRACTU	Y
7/01/2007	10/31/2007	INSTRUCTO	DRI	DEPARTMENT OF SCIENC	E EDUCATION, COLLEGE OF	12,284.00	147,408.00	CONTRACTU	Y
1/02/2005	6/30/2007	INSTRUCTO	DRI		E EDUCATION, COLLEGE OF AS STATE UNIVERSITY	11,167.00	134,004.00	CONTRACTU	Υ
I/A	N/A	N/A		N	V A	N/A	N/A	N/A	N/A
VA.	N/A	N/A		N	VA	N/A	. N/A	N/A	N/A
V/A	N/A	N/A		NA		N/A	N/A	N/A	N/A
WA .	N/A	N/A	tan	northann (myson)	VA	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

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26. LEVEL		NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF	FATTENDANCE	LEVEL/ UNITS EARNED (if not	YEAR GRADUATED	SCHOLARSHIP ACADEMIC HONORS RECEIVED
				From	То			
ELEMENTARY								
SECONDARY								
VOCATIONAL TRADE COURSE								
COLLEGE								
GRADUATE ST	UDIES							
GRADUATE ST	UDIES	UNIVERSITY OF SAN CARLOS	PHDED IN RESEARCH AND EVALUATION	2012	PRESENT	27 UNITS	ON DISSERTATIO N WRITING	VSU FELLOWSHIP CHED DISSERTATION

Huggen

NAME & ADDRESS OF ORGANIZATION full)	(Write in	INCLUSIVE DATES (mm/dd/yyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK		
		From	. To	Tioono		The special section of	
N/A		N/A	N/A	N/A	epartition to	N/A	
N/A		N/A	N/A	N/A		N/A	
N/A		N/A	N/A	N/A	entra irag	NA medical over	
. N/A	Jan. 200	N/A	N/A	N/A	7.3	N/A	
N/A	The second secon	N/A	N/A	N/A		N/A	
N/A N/A			N/A	N/A	· N/A		
			N/A	N/A	N/A		
TE DEMOGRADO DE DE LOCACIÓN (LA C Comos como ser de la como de la		linue on separate s	NDED Notes to see	and the second			
TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)			DATES OF IDANCE Idd/yyy)	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
The 6th Asian Conference	on Education	October 28, 2014	November 2, 2014	32 hours	Technical	The International Academic Forum	
17th CDU Annual Research	Poster Contest	April 22, 2014	April 22, 2014	8 hours	Technical	Cebu Doctors' University - Cebu doctors' - Cebu doctors' university - Cebu doctors' - Cebu doctors' university - Cebu doctors' university - Cebu doctors' university - Cebu doctors' university - Cebu doctors' un	
N/A	3, 73 GLF	N/A	N/A	. N/A	N/A	N/A	
N/A	elushs. (EPY)	N/A	N/A	N/A .	N/A	NA NA	
N/A		N/A	N/A	N/A	N/A	months and another NA	
N/A	and Direction	N/A	N/A .	N/A	N/A	N/A	
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N/A		N/A	N/A	N/A	N/A	N/A	
. N/A		N/A	N/A	N/A	N/A	N/A	
N/A	White extra growth to	N/A	N/A	N/A	,N/A	N/A	
N/A	Transport de la companya del companya del companya de la companya	N/A	N/A	N/A	N/A	N/A	
N/A		N/A	N/A	N/A	N/A	N/A N/A	
N/A		N/A N/A	N/A N/A	N/A N/A	N/A N/A	N/A	
NA.	(Cor	CARTAGO.	sheet if necessary)	TWA	19/1	A SECTION ASSOCIATION	
DUCKER BUILDING							
SPECIAL SKILLS and HOBBIES	32. NOI		NCTIONS / RECOGN te in full)	ITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATII (Write in full)	
READING	and the control of the second of	N/A ·				VSUFA	
READING PAGE TO A STATE OF THE VIGO					N/A		
COOKING PASTA AND BAKING		N/A			N/A		
N/A		N/A			N/A		
N/A		N/A			Park of the last o	N/A	
	(Col	ntinue on separate	sneet it necessary)				

MAY O 4 2017

AITY RYSAN C GUINOCOR

NOTAR VICUELICANO
UNTR. DECEMBER ST. ZOTY

DIR O19 5859 - EAVENY LEVIE -1/12/17

IBP 1930929 - IA ALOBAN OITY - 12/19/16

MOLE COMP. NO. V-000288 O-81/20/16

ROLL OF ATTORNEYS NO: 57467

Are you related by consanguinity or affinity to the appearing or re thief of bureau or office or to the person who has immediate sup				
Bureau or Department where you will be apppointed,		☐ YES	₩ NO	
n. within the third degree?	and the state of t	☐ YES	₩ NO	
o. within the fourth degree (for Local Government Unit - Career E	Employees)?		IFVES give details:	
			If YES, give details:	
a. Have you ever been found guilty of any administrative offense		YES	NO NO	
. Have you ever been found guilty of any authinistrative offense				
			If YES, give details:	
		☐ YES	₩ NO	
b. Have you been criminally charged before any court?				
			If YES, give details:	
		YES	IN NO	ate Filed:
the state of the second			Status o	of Case/s:
Have you ever been convicted of any crime or violation of any lated to tribunal?	w, decree, ordinance or regulation	n by any		
out of ubunal?		YES	If Singive details:	
	The second second			
lave you ever been separated from the service in any of the follow			₩ NO	
dropped from the rolls, dismissal, termination, end of term, finish public or private sector?			If YES, give details:	
Table 1 Tabl		YES	NO NO	SECTION AND ADMINISTRATION OF THE PARTY OF T
a. Have you ever been a candidate in a national or local election election)?			If VES ains details:	
		YES	If YES, give details:	
b. Have you resigned from the government service during the thi	[10] [10] [10] [10] [10] [10] [10] [10]	ast	ISVED 1 1111	
election to promote/actively campaign for a national or local cand			If YES, give details:	
Have you acquired the status of an immigrant or permanent resi	dent of another country?			
		☐ YES	If YE ONCE details (co	untry):
		□ VEC	✓ NO	
			The state of the s	
Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna		7277); and		
c) Solo Parents Welfare Act of 2000 (RA 8972), please answer	41. F. B	7277); and YES	☑ NO	
	41. F. B	☐ YES	☑ NO	
(c) Solo Parents Welfare Act of 2000 (RA 8972), please answer Are you a member of any indigenous group?	41. F. B	☐ YES		
c) Solo Parents Welfare Act of 2000 (RA 8972), please answer	41. F. B	☐ YES	☑ NO	No:
(c) Solo Parents Welfare Act of 2000 (RA 8972), please answer Are you a member of any indigenous group?	41. F. B	☐ YES	If YES, please specify: If YES, please specify ID	
(c) Solo Parents Welfare Act of 2000 (RA 8972), please answer Are you a member of any indigenous group? Are you a person with disability?	41. F. B	☐ YES	✓ NO If YES, please specify:	
(c) Solo Parents Welfare Act of 2000 (RA 8972), please answer Are you a member of any indigenous group? Are you a person with disability?	the following items:	☐ YES	If YES, please specify: If YES, please specify ID	
(c) Solo Parents Welfare Act of 2000 (RA 8972), please answer Are you a member of any indigenous group? Are you a person with disability? Are you a solo parent?	the following items:	☐ YES	If YES, please specify: If YES, please specify ID	
(c) Solo Parents Welfare Act of 2000 (RA 8972), please answer Are you a member of any indigenous group? Are you a person with disability? Are you a solo parent? REFERENCES (Rerson not related by consanguinity or affinity to applicant to	appointee) ADDRESS	☐ YES	If YES, please specify: If YES, please specify ID I If YES, please specify ID I TEL. NO.	
(c) Solo Parents Welfare Act of 2000 (RA 8972), please answer Are you a member of any indigenous group? Are you a person with disability? Are you a solo parent? REFERENCES (Person not related by consanguinity or affinity to applicant to NAME LIJUERAJ J. CUADRA	appointee) ADDRESS DTE, CE, VSU, BAYBAY (☐ YES	If YES, please specify: If YES, please specify ID I If YES, please specify ID I TEL. NO. 535637527	
(c) Solo Parents Welfare Act of 2000 (RA 8972), please answer Are you a member of any indigenous group? Are you a person with disability? Are you a solo parent? REFERENCES (Person not related by consanguinity or affinity to applicant // NAME LIJUERAJ J. CUADRA CLIMACO D. ESPINA	eppointee) ADDRESS DTE, CE, VSU, BAYBAY (DMP, CAS, VSU, BAYBAY	CITY	If YES, please specify: If YES, please specify ID I If YES, please specify ID I TEL. NO. 535637527 9175508488	
(c) Solo Parents Welfare Act of 2000 (RA 8972), please answer Are you a member of any indigenous group? Are you a person with disability? Are you a solo parent? REFERENCES (Rerson not related by consanguinity or affinity to applicant // NAME LIJUERAJ J. CUADRA CLIMACO D. ESPINA ROSARIO P. ABELA	appointee) ADDRESS DTE, CE, VSU, BAYBAY O DMP, CAS, VSU, BAYBAY VLHS, BAYBAY CITY, LE	CITY CITY CYTE	If YES, please specify: If YES, please specify ID If YES, please specify ID TEL_NO 535637527 9175508488 9183641159	
Are you a person with disability? Are you a person with disability? Are you a solo parent? REFERENCES (Person not related by consanguinity or affinity to applicant // NAME LIJUERAJ J. CUADRA CLIMACO D. ESPINA ROSARIO P. ABELA declare under oath that I have personally accomplished this	appointee) ADDRESS DTE, CE, VSU, BAYBAY O DMP, CAS, VSU, BAYBAY VLHS, BAYBAY CITY, LE Personal Data Sheet which is	CITY CITY YTE	If YES, please specify: If YES, please specify ID If YES, please specify ID TEL NO. 535637527 9175508488 9183641159 prect and complete	
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