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 concerned. 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) 2. SURNAME ARMECIN NAME EXTENSION (JR., SR) FIRST NAME ROMEL MIDDLE NAME BRIGOLI 3. DATE OF BIRTH 6/29/1966 16. CITIZENSHIP Filipino (mm/dd/yyyy) Dual Citizenship by birth by naturalization 4. PLACE OF BIRTH Sogod, Cebu If holder of dual citizenship. Pls. indicate country: please indicate the details 5 SEX ✓ Male Female -Single **✓** Married 17. RESIDENTIAL ADDRESS Apt #17 Kilbourne Drive 6 CIVIL STATUS Widowed Separated House/Block/Lot No. Street VSU Compound Pangasugan Other/s: Subdivision/Village Barangay 7. HEIGHT (m) Baybay Leyte 1 52 City/Municipality Province 8. WEIGHT (kg) 70.0 ZIP CODE 6521-A 18. PERMANENT ADDRESS 9. BLOOD TYPE Apt #17 Kilhourne Orive 0 House/Block/Lot No Street 10. GSIS ID NO. VSU Compound 2001715491 Pangasugar Subdivision/Village Barangay 11 PAGIBIGID NO Baybay Leyte 913172181250 efetil eswach City/Municipality Province 12. PHILHEALTH NO. 13-000014963-3 ZIP CODE 6521-A 13 SSS NO n/a 19. TELEPHONE NO. (053) 563 7012 enulturais 4 TIN NO 116-622-789 20 MOBILE NO. 00100005000 15. AGENCY EMPLOYEE NO. 20-484 21. E-MAIL ADDRESS (if any) rbarmecin@vsu.edu.ph FAMILY BACKGROUND SPOUSE'S SURNAME Armecin 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) FIRST NAME Brigida Ladie Genesis B. Armecin 1/10/1995 MIDDLE NAME Bitancor OCCUPATION none EMPLOYER/BUSINESS NAME n/a **BUSINESS ADDRESS** nla TELEPHONE NO (053) 563 7012 24. FATHER'S SURNAME Armecin NAME EXTENSION (JR., SR) FIRST NAME Dominador (deceased) MIDDLE NAME Comaingking 5. MOTHER'S MAIDEN NAME Brigoli SURNAME Armecin FIRST NAME Irene (deceased) MIDDLE NAME Brigoli (Continue on separate sheet if necessary) **EDUCATIONAL BACKGROUND** SCHOLARSHIP/ HIGHEST LEVEL NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE PERIOD OF ATTENDANCE I FVFI YEAR **ACADEMIC** UNITS EARNED (Write in full) (Write in full) GRADUATED HONORS (if not graduated) From To ELEMENTARY Sogod Central School ntary diploma 6/2/1973 3/31/1979 1979 PRIMA RY vith honors SECONDARY Juan Dosado Memorial Schoo High School diploma 6/1/1979 3/31/1983 1983 CECHNDARY with honors VOCATIONAL / N.A. COLLEGE Visayas State College of Agriculture BS in Agriculture (major in Soil Science) 6/1/1983 4/2/1987 1987 4. H GRADUATE STUDIES NIA. Master of Science (Soil Science) Visayas State University 6/1/1990 4/4/2000 2000 University of the Philippines Los Banos Doctor of Philosophy (Soil Science) N.A. 6/1/2005 9/2/2009

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VI. VOLUNTARY WORK OR INVOLVEMEN	TIN CIVIC/hGOVERNMENT/	PEOPLE / VO	DLUNTARY O	RGANIZATION		
29. NAME & ADDRESS OF (Write in		INCLUSIVE DATES (mm/dd/yyyy) NUMBER OF HOURS		ing of the second	POSITION / NATURE OF WORK	
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II. LEARNING AND DEVELOPMENT (L&D tart from the most recent L&D/training program and inc				Chief Executive Man	agerial positions)	
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II. OTHER INFORMATION						
31. SPECIAL SKILLS and HOBBIES	ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)				33. MEMBERSHIP IN ASSOCIATION/ORGANIZATIO (Write in full)	
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34. Are you related by consanguinity or affinity to the point chief of bureau or office or to the person who has immed				
Bureau or Department where you will be apppointed,	late supervision over you in the Office,	The number of seasons as well		
a. within the third degree?	YES NO			
b. within the fourth degree (for Local Government Unit - 0				
		If VES give details:		
Post di di milita	Pacaul Alberta	TEO, giro dotalid.		
35. a. Have you ever been found guilty of any administrative	offense?	YES NO		
		If YES, give details:		
b. Have you been criminally charged before any court?		YES V NO		
2. Hard you would minimally stranged bolloto unity country		If YES, give details:		
		Date Filed:		
		Status of Case/s:		
36. Have you ever been convicted of any crime or violation of	f any law, decree, ordinance or regulation by	YES V NO		
any court or tribunal?		If YES, give details:		
		No year of the instrument of the state of th		
37. Have you ever been separated from the service in any of		YES V NO		
retirement, dropped from the rolls, dismissal, termination	, end of term, finished contract or phased out	If YES, give details:		
(abolition) in the public or private sector?  38. a. Have you ever been a candidate in a national or local	election hold within the last was favored	SYSSINGS INVALORS FOR THE SECRET SANAGE FROM SEAS MEDITINOS. THE SAN		
Barangay election)?	election field within the last year (except	YES VO NO		
#F#Fire NEW York of Branching 2 section of 1	Gall Comments and	If YES, give details:		
<ul> <li>b. Have you resigned from the government service during election to promote/actively campaign for a national or lo</li> </ul>		YES the details I NO you respond this to seven go		
		If YES, give details:		
39. Have you acquired the status of an immigrant or perman	ent resident of another country?	YES NO		
		If YES, give details (country):		
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) I	Magna Corta for Disabled Remove (DA			
7277); and (c) Solo Parents Welfare Act of 2000 (RA 897	72), please answer the following items:			
Are you a member of any indigenous group?				
		If YES, please specify:		
Are you a person with disability?		☐ YES ☑ NO		
Are you a solo parent?		If YES, please specify ID No:		
7110 you a solo paronte		If YES, please specify ID No:		
A1 DECEDENCES (Description of the later)		ii 120, prodeo apoully ib 140.		
41. REFERENCES (Person not related by consanguinity or affinity to applic	ant /appointee)			
NAME	ADDRESS	TEL. NO.		
r. Jose L. Bacusmo	Director, Office for the Vice President for Rearch and Extention			
Dr. Othello B. Capuno	VP, Office of the Vice President for	(38)		
F. H. L O. O.	Research and Extension Director, National Abaca Research			
r. Feliciano G. Sinon	Center			
42. I declare under oath that I have personally accomplish	hed this Personal Data Sheet which is a tr	rue, correct and		
complete statement pursuant to the provisions of per Philippines. I authorize the agency head/authorized representations.	rtinent laws, rules and regulations of the			
agree that any misrepresentation made in this do	ocument and its attachments shall cause	ed herein. I Rowel P. Armerin		
administrative/criminal case/s against me.	A STATE OF THE STA			
Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)				
PLEASE INDICATE ID Number and Date of Issuance	IN DULL	20 Maria 19		
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ID/License/Passport No.: EC1755535	10/10	- William Was 180 - 280		
ACCIONATE O NOS TO VIDAGO EN PORTENA	Signature (Sign inside the bo April 24, 2017	×)		
Date/Place of Issuance: 07/30/2014 - DFA Cebu	Date Accomplished	Right Thumbmark		
SUBSCRIBED AND SWORN to before me this				
.onlinoi/silon Alabana Salota GRADA	APR 2 6 2017 , affiant exhibitin	g his/her validly issued government ID as indicated above.		
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	ATTY. RYSOLG. GUINOC	OR		
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