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 concerned.

READ THE ATTACHED GUIDE TO FILE Print legibly. Tick appropriate boxes	LLING OUT THE PERSONAL DATA SHEET (PDS) BE s ( ) and use separate sheet if necessary. Indic			ATE	1. CS ID No.	,	/De set fill up F	or CSC use only	
I. PERSONAL INFORMATION		ate N/A ii flot applicable. DO	NOT ABBREVI	AIE.	I. CS ID NO.		(Do Hot IIII up. F	or CSC use only)	
2. SURNAME	Balbarino								
FIRST NAME	Vivian				NAME EXTENSION (JI	R., SR) N/A			
MIDDLE NAME	Villocino								
3. DATE OF BIRTH (mm/dd/yyyy)	08/23/1960	16. CITIZENSHIP	✓ Filipino Dual Citizenship					Park	
4. PLACE OF BIRTH	Cebu City	If holder of dual citizenship,		by birth by nature			<b>—</b> '	liization	
5. SEX	☐ Male ✓ Female	please indicate the details.		Philippines					
6. CIVIL STATUS	Single Married Widowed Separated Other/s:			se/Block/Lot No. bdivision/Village			Street Guadalupe Barangay		
7. HEIGHT (m)	1.52			INOPACAN			LEYTE  Province		
8. WEIGHT (kg)	56.00	ZIP CODE		цулии пстранцу	y/Municipality 6522				
9. BLOOD TYPE	0	18. PERMANENT ADDRESS	Hou	se/Block/Lot N	lo.		Street		
10. GSIS ID NO.	N/A			bdivision/Villag		Guadalupe Barangay			
11. PAG-IBIG ID NO.	N/A		I		INOPACAN ty/Municipality			LEYTE  Province	
12. PHILHEALTH NO.	N/A	ZIP CODE				6522			
13. SSS NO.	N/A	19. TELEPHONE NO.		(1					
14. TIN NO.	N/A	20. MOBILE NO.		917-551-8871					
15. AGENCY EMPLOYEE NO.	V00072	21. E-MAIL ADDRESS (if any)			vbalbarir	no@vsu.edu.ph			
II. FAMILY BACKGROUND									
22. SPOUSE\'S SURNAME	BALBARINO	NAME EXTENSION (JR., SR)	23. NAME of CHILDREN (Write full name an		,	DATE OF BIRT			
FIRST NAME	EDWIN	NAME EXTENSION (JIX., JIX)	VIVI	ENE VILLO	CINO BALE	10/15/1997			
MIDDLE NAME	ADOLFO								
OCCUPATION	RETIREE								
EMPLOYER/BUSINESS NAME	N/A								
BUSINESS ADDRESS	N/A								
TELEPHONE NO.	N/A								
24. FATHER\'S SURNAME	VILLOCINO	NAME EXTENSION (ID. OD)							
FIRST NAME	SANTOS	NAME EXTENSION (JR., SR) Sr.							
MIDDLE NAME	BARRIOS								
25. MOTHER\'S MAIDEN NAME	CABALHUG								
SURNAME	VILLOCINO								
FIRST NAME	APOLONIA								
MIDDLE NAME	BERDIN			(0	Continue on sep	parate sheet if neces	sary)		
III. EDUCATIONAL BACKG	ROUND I					HIGHEST		SCHOLARSHIP/	
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGR (Write in full)	EE/COURSE	PERIOD OF /	To	LEVEL/UNITS EARNED (if not graduated)	YEAR GRADUATED	ACADEMIC HONORS RECEIVED	
ELEMENTARY	Maguikay Elementary School	Elementary		1967	1973		1973	N/A	
SECONDARY	Univeristy of the Visayas	High School		1975	1977		1977	N/A	
VOCATIONAL/ TRADE COURSE	N/A								
COLLEGE	Visayas State University	Bachelor of Science in A		1977	1982		1982	N/A	
GRADUATE STUDIES	Visayas State University (0	Master of Science in Agricultu		0		30		N/A	
SIGNATURE	1		•/	DA	ATE		03/05/2025		

	IV. CIVIL SERVICE ELIGIBILITY								
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER DATING DATE OF					LICENSE (if applicable)				
ВА		AWS/ CES/ CSEE ILITY / DRIVER'S LICENSE	(If Applicable)	EXAMINATION / PLACE OF EXAMINATION / CONFERMENT  CONFERMENT			NUMBER	Date of Validity	
CAREER S	ERVICE PROF	ESSIONAL EXAMINATION	71.48	07/26/1987	87 Tacloban City			035855	N/A
				(Continue on concepts also	and if acceptant				
V. WORK	EXPERIE	NCE		(Continue on separate she	eet II necessary)				
		ent. Start from your recent	work) Descripti	on of duties should k	pe indicated in the attache	d Work Exper	SALARY/ JOB/		
	SIVE DATES n/dd/yyyy) To	POSITION TITL (Write in full/Do not ab			ENCY / OFFICE / COMPANY II/Do not abbreviate)	MONTHLY SALARY	PAY GRADE (if applicable)& STEP (Format"00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/N)
01/01/2025		Administrative Off	icer V	Visayas	State University	51,304.00	18-1	Permanent	Y
01/01/2024		Administrative Off	icer V	Visayas	State University	49,015.00	18-1	Permanent	Y
01/01/2024		Administrative Off	icer V	Visayas	State University	49,015.00	18-1	Permanent	Υ
07/03/2023		Administrative Off	icer V	Visayas State University		46,725.00	18-1	Permanent	Y
07/03/2023		Administrative Off	icer V	Visayas State University		46,725.00	18-1	Permanent	Υ
01/01/2023		Administrative Off	icer III	Visayas State University		34,888.00	14-4	Permanent	Y
01/01/2022		Administrative Off	icer III	Visayas State University		33,366.00	14-4	Permanent	Y
01/16/2021		Administrative Off	icer III	Visayas State University		31,844.00	14-4	Permanent	Y
01/01/2021		Administrative Off	icer III	Visayas State University		31,491.00	14-3	Permanent	Y
01/01/2020		Administrative Off	icer III	Visayas	State University	29,969.00	14-3	Permanent	Y
01/01/2019		Administrative Off	icer III	Visayas State University		28,447.00	14-3	Permanent	Y
01/16/2018	12/31/2018	Administrative Off	icer III	Visayas	State University	26,806.00	14-2	Permanent	Y
01/01/2018	01/15/2018	Administrative Off	icer III	Visayas	Visayas State University		14-3	Permanent	Y
01/01/2017	12/31/2017	Administrative Off	icer III	Visayas	State University	25,573.00	14-2	Permanent	Y
01/01/2016	12/31/2016	Administrative Off	icer III	Visayas	State University	24,396.00	14-2	Permanent	Y
01/16/2015	12/31/2015	Administrative Off	icer III			23,274.00	-	Permanent	Y
06/01/2012	01/15/2015	Administrative Off	icer III			23,044.00	-	Permanent	Y
01/16/2012	05/31/2012	Administrative Off	icer III			21,078.00	-	Permanent	Y
07/16/2011	01/15/2012	Administrative Off	icer II			18,227.00	-	Permanent	Y
06/01/2011	07/15/2011	Administrative Off	îcer II			17,994.00	-	Permanent	Y
06/24/2010	05/31/2011	Administrative Off	icer II			16,687.00	-	Permanent	Y
07/01/2009	06/23/2010	Administrative Off	icer II			15,379.00	-	Permanent	Y
07/16/2008	06/30/2009	Administrative Off	icer II			14,071.00	-	Permanent	Y
07/01/2008	07/14/2008	Administrative Off	icer II			13,726.00	-	Permanent	Y
07/01/2007	06/30/2008	Administrative Off	icer II			12,478.00	-	Permanent	Y
07/16/2005	06/30/2007	Administrative Off	icer II			11,344.00	-	Permanent	Y
PLEASE SEE ATTACHMENT A									
				(Continue on separate she	,	Ι		2005	
SIGNATURE         DATE         03/05/2025           CS FORM 212 (Revised 2         CS FORM 212 (Revised 2					117) Page 2 of 4				

	EXPERIEN	NCE ent. Start from your recent work) Descripti	on of duties should b	e indicated in the attac	hed Work E	xperience she	eet.	
28. INCLU	SIVE DATES					SALARY/JOR/		GOV'T
(mr From	n/dd/yyyy) To	POSITION TITLE (Write in full/Do not abbreviate)		CY / OFFICE / COMPANY o not abbreviate)	MONTHLY SALARY	PAY GRADE (if applicable)& STEP (Format"00-0")/ INCREMENT	STATUS OF APPOINTMENT	SERVICE (Y/N)
12/01/2004	07/15/2005	Administrative Officer II			11,068.00	-	Permanent	Υ
07/16/2002	11/30/2004	Information Officer I			11,068.00	-	Permanent	Υ
07/01/2001	07/15/2002	Information Officer I			10,798.00	-	Permanent	Y
01/01/2000	06/30/2001	Information Officer I			10,284.00	-	Permanent	Υ
07/01/1999	12/31/1999	Information Officer I			9,349.00	-	Permanent	Υ
11/01/1997	06/30/1999	Information Officer I			9,121.00	-	Permanent	Υ
01/01/1997	10/31/1997	Information Officer I			7,682.00	-	Permanent	Υ
07/01/1996	12/31/1996	Information Officer I			6,243.00	-	Permanent	Υ
02/01/1996	12/31/1994	Communication Equipment Operator			138.63	-	Casual	Υ
01/01/1996	06/30/1996	Communication Equipment Operator			229.55	-	Casual	Υ
01/01/1995	12/31/1995	Communication Equipment Operator			184.09	-	Casual	Υ
01/01/1994	01/31/1994	Science Aide			305.00	-	Contractual	Υ
01/16/1993	12/31/1993	Science Aide			225.00	-	Contractual	Y
01/16/1992	12/31/1992	Science Aide			225.00	-	Contractual	Υ
		(Co	ontinue on separate sheet if					
SIGNA	ATURE			DATE	03/05/2025		5/2025	

I. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S								
29. NAME & ADDRESS OF ORC (Write in full)			/E DATES	NUMBER OF HOURS	POSITION / NATURE OF WORK			
N/A		N/A	N/A	N/A		N/A		
	(	Continue on separat	e sheet if necessary)					
VII. LEARNING AND DEVELOPMENT (L&D) (Start from the most recent L&D/training program and include					agerial positions)			
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)			DATES OF DANCE d/yyyy)	NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)		
Public Financial Management Work	shop 2024	09/18/2024	09/20/2024	36	Managerial	Visayas State University		
Strategic Planning Training Wo	rkshop	07/22/2024	07/26/2024	40	Supervisory	Visayas State University		
Strategic Foresight-Scenario Building Tra	aining Workshop	07/15/2024	07/19/2024	40	Supervisory	Visayas State University		
Symposium on Fiscal Remedies in Procurement a	and Property Management	04/03/2024	04/05/2024	32	Supervisory	ALLS Management Consultants, Inc.		
ISO 9001:2015 Awareness & Re-awar	eness Webinar	08/29/2023	08/29/2023	8	Managerial	Visayas State University		
Accounting for Non-Account		07/25/2023	07/28/2023	32	Supervisory	Personnel Officers Association of the Philippines, Inc.		
Benchmarking and Capacity Needs Assessment Towards Develop Netherlands	oing VSU into a National Green University:	06/23/2023	07/04/2023	40	Technical	Stichting Stagiaries Cebu		
Problem Solving and Decision -	Making	11/06/2018	11/09/2018	32	Supervisory	Personnel Officers Association of the Philippines, Inc.		
VIII OTHER INFORMATION	(	Continue on separat	e sheet if necessary)					
VIII. OTHER INFORMATION	NC	ON-ACADEMIC DIS	TINCTIONS / DECC	OCNITION		MEMPERSHIP IN ACCOCIATION/OPCANIZATION		
31. SPECIAL SKILLS and HOBBIES	32.	(W	rite in full)	JGNITION	33. MEMBERSHIP IN ASSOCIATION/ORGANIZAT (Write in full)			
N/A	N/A N/A							
		(Otim-						
SIGNATURE	(	Continue on separat	e sneet it necessary)	DA	ATE	03/05/2025		
						CS FORM 212 (Revised 2017) Page 3 of		

the chief of bureau or office or to the person who has Office, Bureau or Department where you will be appp a. within the third degree?  b. within the fourth degree (for Local Government Unit	☐YES ✓I ☐YES ✓I If YES, give details:		
35. a. Have you ever been found guilty of any administrat	☐YES ✓IIf YES, give details:	NO	
b. Have you been criminally charged before any cour	☐YES ✓I  If YES, give details:  Date Filed:  Status of Case/s:	NO	
36. Have you ever been convicted of any crime or violation regulation by any court or tribunal?	☐YES ✓I If YES, give details:	NO	
37. Have you ever been separated from the service in an retirement, dropped from the rolls, dismissal, terminal phased out (abolition) in the public or private sector?	☐YES ✓IIf YES, give details:	NO	
38. a. Have you ever been a candidate in a national or lo (except Barangay election)?		☐YES ✓II If YES, give details:	
b. Have you resigned from the government service du last election to promote/actively campaign for a nation	☐YES ✓I If YES, give details:	NO	
39. Have you acquired the status of an immigrant or pern	☐YES ✓I  If YES, give details (count		
<ul> <li>40. Pursuant to: (a) Indigenous People\'s Act (RA 8371); 7277); and (c) Solo Parents Welfare Act of 2000 (RA a. Are you a member of any indigenous group?</li> <li>b. Are you a person with disability?</li> <li>c. Are you a solo parent?</li> </ul>	YES	No	
41. REFERENCES (Person not related by consanguinity or affinity to a	applicant /appointee)		
NAME	ADDRESS	TEL. NO.	ID picture taken within
GUIRALDO C. FERNANDEZ	DLABS, VSU, Baybay City, Leyte		the last 6 months 3.5 cm x 4.5 cm (passport size)
RYSAN C. GUINOCOR	Admin. Services, VSU, Visca, Baybay City	/	With full and handwritten name tag and signature over
42. I declare under oath that I have personally accomplise complete statement pursuant to the provisions of per Philippines. I authorize the agency head/authorized magree that any misrepresentation made in this dadministrative/criminal case/s against me.	Republic of the stated herein. I	printed name  Computer generated or photocopied picture is not acceptable  PHOTO	
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Drivert's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: PASSPORT ID/License/Passport No.: P1607830C Date/Place of Issuance: 09/08/2022 / Tacloban City	Signature (Sign inside the 03/05/2025 Date Accomplished	box)	Right Thumbmark
SUBSCRIBED AND SWORN to before me this	, affiant ex	hibiting his/her validly issued g	overnment ID as indicated above.
	Person Administering Oa	ath	