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. Indica			ΔTE	1. CS ID No.		(Do not fill up. E	or CSC use only)	
I. PERSONAL INFORMATIC		ate WA II Not applicable. Bo	NOT ADDICEVE	AIL.	1. CO ID 140.		(Bo flot fill dp. 1	or coc use only)	
2. SURNAME	Tabudlong								
FIRST NAME	Sheena Eunice		NAME EXTENSION (JR., SR) N/A						
MIDDLE NAME	Bathan								
3. DATE OF BIRTH		40 OITIZENOUID							
(mm/dd/yyyy)	04/13/1990	16. CITIZENSHIP	✓ Filipino ☐ Dual Citizenship				lization		
4. PLACE OF BIRTH	Baybay, Leyte	If holder of dual citize	enship,	by birth by naturalizatio				iization	
5. SEX	Male Female	please indicate the d	etails.	Philippines					
6. CIVIL STATUS	✓ Single Married	17. RESIDENTIAL ADDRESS		673 A			A. Bonifacio St.		
	Widowed Separated		Hou	use/Block/Lot No. Street					
	Other/s:		Subdivision/Village		Poblacion Zone 12 Barangay				
7. HEIGHT (m)	1.49			BAYBAY ity/Municipality	BAYBAY			LEYTE Province	
8. WEIGHT (kg)	62.00	ZIP CODE			<u>'</u>	6521	TTOVINCE		
9. BLOOD TYPE	B+	18. PERMANENT ADDRESS	Hou	se/Block/Lot N	Vo.		Street		
10. GSIS ID NO.	N/A			bdivision/Villag					
11. PAG-IBIG ID NO.	N/A	-		ity/Municipality			Barangay Province		
12. PHILHEALTH NO.	N/A	ZIP CODE		ултанорану			Trovince		
13. SSS NO.	N/A	19. TELEPHONE NO.		(1					
14. TIN NO.	N/A	20. MOBILE NO.	920-958-5002						
15. AGENCY EMPLOYEE NO.	V00751	21. E-MAIL ADDRESS (if any)		sheenatabudlong@vsu.edu.ph					
II. FAMILY BACKGROUND									
22. SPOUSE\'S SURNAME	N/A		23. NAME of CH	IILDREN (Wri	te full name an	d list all)	DATE OF BIRT	H (mm/dd/yyyy)	
FIRST NAME	N/A	NAME EXTENSION (JR., SR) N/A	N/A			N/A			
MIDDLE NAME	N/A								
OCCUPATION	N/A								
EMPLOYER/BUSINESS NAME	N/A								
BUSINESS ADDRESS	N/A								
TELEPHONE NO.	N/A								
24. FATHER\'S SURNAME	TABUDLONG								
FIRST NAME	SHEENA EUNICE	NAME EXTENSION (JR., SR)							
MIDDLE NAME	BATHAN								
25. MOTHER\'S MAIDEN NAME	ELSA DIDAL BATHAN								
SURNAME	TABUDLONG								
FIRST NAME	ELSA								
MIDDLE NAME	BATHAN			(0	Continue on se _l	parate sheet if neces	sary)		
III. EDUCATIONAL BACKG	ROUND					- HIGHTOT			
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGR (Write in full)	EE/COURSE	PERIOD OF	ATTENDANCE To	HIGHEST LEVEL/UNITS EARNED	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED	
ELEMENTARY	Baybay North Central School	Elementary		1999	2003	(if not graduated)	2003	KLOLIVED	
SECONDARY	Franciscan College of Immaculate Conception	High School		2003	2007		2007		
VOCATIONAL/ TRADE COURSE COLLEGE	N/A Cebu Normal University	Bachelor of Science in Secondary E		2007	2011		2011		
GRADUATE STUDIES	Southwestern University	Music, Arts, Physical Educatio Master of Arts in Teaching (Major in			2011	27	2016		
		PLEASE SEE ATTACHMENT							
0/04/47/17		Continue on separate sheet if nece	essary)	I .	A T.C.		40/04/0000		
SIGNATURE	l			DA	ATE	1	10/04/2022		

Attachment A

Thought II							
III. EDUCATIONAL BACKGF	ROUND						
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE		HIGHEST LEVEL/UNITS	YEAR	SCHOLARSHIP/ ACADEMIC
LEVEL			From	То	EARNED (if not graduated)	GRADUATED	HONORS RECEIVED
GRADUATE STUDIES	Cebu Normal University	Master of Arts in Education (Major in PHYSICAL EDUCATION)	2016	2018		2018	
(Continue on separate sheet if necessary)							
SIGNATURE DATE 10/04/2022							

IV. CIVIL SERVICE ELIGIBILITY										
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER PATING			RATING	DATE OF					LICENSE (if applicable)	
SPECIAL LAWS/ CES/ CSEE		(If Applicable)	EXAMINATION / PLACE OF EXAMINATION / CO CONFERMENT		ATION / CONFER	ION / CONFERMENT		Date of Validity		
Licensed Professional Teacher			09/27/2011 CEE		BU CITY		113649	N/A		
				(Continue on separate she	pet if necessary)					
	EXPERIE									
	vate employm JSIVE DATES	ent. Start from your recent	t work) Descripti	on of duties should k	e indicated in the attached	d Work Exper	ience sheet.			
	m/dd/yyyy)	POSITION TITI (Write in full/Do not ab			ENCY / OFFICE / COMPANY I/Do not abbreviate)	MONTHLY SALARY	PAY GRADE (if applicable)& STEP (Format"00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/N)	
01/01/2022	PRESENT	Instructor I		Visayas	State University	28,180.00	12-3	Permanent	Y	
01/01/2021		Instructor I		Visayas	State University	26,624.00	12-3	Permanent	Y	
01/01/2021		Instructor I		Visayas	State University	26,336.00	12-2	Permanent	Y	
09/17/2020	12/31/2020	Instructor I		Visayas State University		25,067.00	12-3	Permanent	Y	
01/01/2020		Instructor I		Visayas	State University	24,779.00	12-2	Permanent	Υ	
01/01/2019	12/31/2019	Instructor I		Visayas State University		23,222.00	12-2	Permanent	Y	
12/01/2018	12/31/2018	Instructor I		Visayas State University		22,410.00	12-2	Permanent	Y	
08/01/2018	11/30/2018	Instructor I		Visayas State University		22,410.00	12-2	Temporary	Y	
01/01/2018	07/31/2018	Instructor I		Visayas State University		22,410.00	12-2	Temporary	Y	
01/01/2017	12/31/2017	Instructor I		Visayas State University		21,626.00	12-2	Temporary	Y	
11/01/2016	12/31/2016	Instructor I		Visayas State University		20,870.00	12-2	Temporary	Y	
01/01/2016	10/31/2016	Instructor I		Visayas	State University	20,870.00	12-2	Temporary	Y	
12/01/2015	12/31/2015	Instructor I		Visayas	State University	20,140.00	-	Temporary	Y	
12/01/2012	11/30/2015	Instructor I		Visayas	State University	19,940.00	-	Temporary	Y	
06/18/2012	11/30/2012	Instructor I		Visayas	State University	19,940.00	-	Contractual	Y	
				(Continue on separate she	pet if necessary)					
					10/04/	2022				
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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S							
29. NAME & ADDRESS OF OR (Write in full)		INCLUSIV	/E DATES d/yyyy) To	NUMBER OF HOURS	POSITION / NATURE OF WORK		
N/A		N/A	N/A	N/A		N/A	
		(Continue on separa	te 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 INTEF (Write in full)	EVENTIONS/TRAINING PROGRAMS	ATTEN	E DATES OF IDANCE d/yyyy) To	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
N/A		N/A	N/A	N/A	N/A	N/A	
		0	(- tt"				
VIII. OTHER INFORMATION		conunue on separa	te sheet if necessary)				
31. SPECIAL SKILLS and HOBBIES	32. NO		TINCTIONS / RECO	OGNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
N/A		N	N/A				
SIGNATURE		(Continue on separa	te sheet if necessary)		NTE	10/04/2022	
SIGNATURE				DA	N/E	10/04/2022	

34	Are you related by consanguinity or affinity to the apportune the chief of bureau or office or to the person who has in Office, Bureau or Department where you will be appposed. Within the third degree? b. within the fourth degree (for Local Government Unit]no]no			
35	a. Have you ever been found guilty of any administrati	YES []NO			
	b. Have you been criminally charged before any court	YES 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 If YES, give details:]NO			
37.	Have you ever been separated from the service in any retirement, dropped from the rolls, dismissal, terminati phased out (abolition) in the public or private sector?	YES If YES, give details:]NO			
38.	A. Have you ever been a candidate in a national or loc (except Barangay election)?	YES If YES, give details:				
	b. Have you resigned from the government service du last election to promote/actively campaign for a nation	YES If YES, give details:				
39.	Have you acquired the status of an immigrant or perm	☐YES ☐NO If YES, give details (country):				
a. b.	Pursuant to: (a) Indigenous People\'s Act (RA 8371); (7277); and (c) Solo Parents Welfare Act of 2000 (RA 8 Are you a member of any indigenous group? Are you a person with disability? Are you a solo parent?	☐YES ☐ If YES, please specify: ☐YES ☐ If YES, please specify ID				
41	REFERENCES (Person not related by consanguinity or affinity to a	pplicant /appointee)	ii 120, piodos oposity iz			
	NAME	ADDRESS	TEL. NO.	ID picture taken within the last 6 months 3.5 cm x 4.5 cm (passport size) 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 reagree that any misrepresentation made in this deadministrative/criminal case/s against me.	rtinent laws, rules and regulations of the presentative to verify/validate the content	Republic of the s 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: N/A D/License/Passport No.: N/A	Signature (Sign inside the	box)			
	Date/Place of Issuance: N/A	,	Right Thumbmark			
_	SUBSCRIBED AND SWORN to before me this	hibiting his/her validly issued	government ID as indicated above.			
		Person Administering O		go. S		
1	L					