CS Form No. 212 Revised 2017

PERSONAL DATA SHEET

READ THE ATTACHED GUIDE TO FI	LLING OUT THE PERSONAL DATA SHEET (PDS) BE	FORE ACCOMPLISHING THE P	DS FORM.		-				
Print legibly. Tick appropriate boxes I. PERSONAL INFORMATIC	s () and use separate sheet if necessary. Indic	ate N/A if not applicable. DO	NOT ABBREVI	ATE.	1. CS ID No.		(Do not fill up. F	or CSC use only)	
2. SURNAME	Conde								
FIRST NAME	NAME EXTENSION (JR., SR)								
MIDDLE NAME	Palermo								
3. DATE OF BIRTH	raieiiiio								
(mm/dd/yyyy)	10/07/1987	16. CITIZENSHIP			p by naturalization				
4. PLACE OF BIRTH	Baybay, Leyte	If holder of dual citize	itizenship, Pls. indicate country:						
5. SEX	☐ Male ✓ Female	please indicate the d	he details. Philippines						
6. CIVIL STATUS	☐ Single ✓ Married ☐ Widowed ☐ Separated	17. RESIDENTIAL ADDRESS	Hou	Llaure /Dlast // at Ma			Stroot	Street	
	Other/s:		House/Block/Lot No. Subdivision/Village		Barangay				
7. HEIGHT (m)	1.00		City/Municipality			Province			
8. WEIGHT (kg)	1.00	ZIP CODE		, , ,					
9. BLOOD TYPE	A-	18. PERMANENT ADDRESS	House/Block/Lot No.			Street			
10. GSIS ID NO.	N/A		Sul	bdivision/Villag	ie		Barangay		
11. PAG-IBIG ID NO.	N/A		City/Municipality			Province			
12. PHILHEALTH NO.	N/A	ZIP CODE							
13. SSS NO.	N/A	19. TELEPHONE NO.	1						
14. TIN NO.	N/A	20. MOBILE NO.		1					
15. AGENCY EMPLOYEE NO.	V00773	21. E-MAIL ADDRESS (if any)	ladieanne.conde@vsu.edu.ph						
II. FAMILY BACKGROUND									
22. SPOUSE\'S SURNAME	Conde			,				DATE OF BIRTH (mm/dd/yyyy)	
FIRST NAME	Allen Brian	NAME EXTENSION (JR., SR)		Alfonzo Sebastian Conde			05/03/2016		
MIDDLE NAME	Yamit								
OCCUPATION	DDRC								
EMPLOYER/BUSINESS NAME	Visayas State Univer	rsity							
BUSINESS ADDRESS	Brgy. Pangasugan, Baybay	City, Leyte							
TELEPHONE NO.									
24. FATHER\'S SURNAME	Palermo								
FIRST NAME	Antonio	NAME EXTENSION (JR., SR)							
MIDDLE NAME	Morales								
25. MOTHER\'S MAIDEN NAME	Victoria L. Gases	3							
SURNAME	Palermo								
FIRST NAME	Victoria	toria							
MIDDLE NAME	Gases			(C	Continue on sep	parate sheet if neces	sary)		
III. EDUCATIONAL BACKG	ROUND								
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGR (Write in full)	EE/COURSE	PERIOD OF A	To	HIGHEST LEVEL/UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED	
ELEMENTARY	Visca Foundation Elementary School	Elementary		1994	2000	, g. = Juntod)	2000	N/A	
SECONDARY	Visayas State University Laboratory High School	High School		2000	2004		2004	N/A	
VOCATIONAL/ TRADE COURSE	N/A	Desk-trackOrd 1.5	Tashasi	0004	0000		2000	NI/A	
COLLEGE GRADUATE STUDIES	Visayas State University Katholieke Universiteit Leuven	Bachelor of Science in Food Master of Science in Food Science		2004 2011	2009		2009	N/A N/A	
	1	PLEASE SEE ATTACHMENT							
		Continue on separate sheet if nece	nanan d						

Attachment A

III. EDUCATIONAL BACKGROUND								
26. LEVEL	NAME OF SCHOOL	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE		HIGHEST LEVEL/UNITS	YEAR	SCHOLARSHIP/ ACADEMIC	
	(Write in full)		From	То	EARNED (if not graduated)	GRADUATED	HONORS RECEIVED	
GRADUATE STUDIES	University of Otago	Doctor of Philosophy (Major in Food Science)	2019	2023		2023		
(Continue on separate sheet if necessary)								
SIGNATURE	SIGNATURE				(05/03/2024		

IV. CIVIL	SERVICE I	ELIGIBILITY							
27. CARE	PATING				LICENSE (if applicable)				
ВА		AWS/ CES/ CSEE ILITY / DRIVER'S LICENSE	(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT		NUMBER	Date of Validity	
	N	//A	N/A	N/A	N/A		N/A	N/A	
				(Continue on separate she	eet if necessary)				
	EXPERIE						. , ,		
28. INCLU	SIVE DATES n/dd/yyyy)	ent. Start from your recent	.E	DEPARTMENT / AG	ENCY / OFFICE / COMPANY	MONTHLY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP	STATUS OF	GOV'T SERVICE
From	То	. (Write in full/Do not ab	breviate)	(Write in ful	II/Do not abbreviate)	SALARY	(Format"00-0")/ INCREMENT	APPOINTMENT	(Y/ N)
01/01/2023	PRESENT	Assistant Profess	sor III	Visayas	State University	43,030.00	17-1	Permanent	Y
09/15/2022		Assistant Profess	sor III	Visayas	State University	41,508.00	17-1	Permanent	Y
01/01/2022		Assistant Profes	sor II	Visayas	State University	38,150.00	16-1	Permanent	Y
01/01/2021		Assistant Profes	sor II	Visayas	State University	36,628.00	16-1	Permanent	Y
01/01/2020		Assistant Profes	sor II	Visayas State University		35,106.00	16-1	Permanent	Y
01/01/2019	12/31/2019	Assistant Profes	sor II	Visayas State University		27,755.00	14-1	Permanent	Y
01/01/2018	12/31/2018	Instructor III		Visayas State University		26,494.00	14-1	Permanent	Y
01/01/2017	12/31/2017	Instructor III		Visayas State University		25,290.00	14-1	Permanent	Y
01/01/2017		Instructor III		Visayas State University		21,626.00	12-2	Permanent	Y
08/01/2016	12/31/2016	Instructor I		Visayas State University		20,870.00	12-2	Permanent	Y
01/01/2016	07/31/2016	Instructor I		Visayas	Visayas State University 20,651.00 12-1		Temporary	Y	
11/01/2015	12/31/2015	Instructor I		Visayas	State University	19,940.00	-	Temporary	Y
11/01/2013	10/31/2015	Instructor I		Visayas	State University	19,940.00	-	Temporary	Y
07/01/2013	10/31/2013	Instructor I		Visayas	State University	19,940.00	-	Contractual	Y
				(Continue on separate she	eet if necessary)				
SIGNATURE DATE						05/03/2	2024		
		l						FORM 212 (Revised 20)17), Page 2 of 4

/I. 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)	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	INTERVENTIONS/TRAINING	G PROGRAM	IS ATTENDE	D	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)	
N/A		N/A	N/A	N/A	N/A	N/A	
		Continue on separat	e sheet if necessary)				
VIII. OTHER INFORMATION			<u>, , , , , , , , , , , , , , , , , , , </u>				
31. SPECIAL SKILLS and HOBBIES	32. NC	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)					
N/A		N/	Couples for Christ				
		Philippine Society for Probiotics and Functional Foods Inc					
		Continue on separat	e sheet if necessary)				
SIGNATURE				DA	\TE	05/03/2024	

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 appporal, 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 dulast election to promote/actively campaign for a nation	YES If YES, give details:]NO			
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 ☐YES ☐				
41.	REFERENCES (Person not related by consanguinity or affinity to a	policant /appointee)	If YES, please specify ID) NO		
	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 printed name		
42	I declare under oath that I have personally accomplis complete statement pursuant to the provisions of pe Philippines. I authorize the agency head/authorized re agree that any misrepresentation made in this do administrative/criminal case/s against me.	rtinent laws, rules and regulations of the presentative to verify/validate the content	Republic of the stated herein. I	Computer generated or photocopied picture is not acceptable PHOTO		
е	Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver'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	05/03/2024 Date Accomplished		Right Thumbmark		
	SUBSCRIBED AND SWORN to before me this	hibiting his/her validly issued	government ID as indicated above.			
		Person Administering O	akh			
		atn				