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.

	LLING OUT THE PERSONAL DATA SHEET (PDS) BE			ATE	4 00 ID N	<i>'</i>	/D+ 611 F		
Print legibly. Tick appropriate boxes I. PERSONAL INFORMATIO		ate N/A if not applicable. DO	NOT ABBREVI	AIE.	1. CS ID No.		(Do not fill up. F	or CSC use only)	
2. SURNAME	Beato								
FIRST NAME	Ma. Rosa De Lima		NAME EXTENSION (JR., SR) N/A						
MIDDLE NAME	Gerebise								
DATE OF BIRTH (mm/dd/yyyy)	04/04/4000	16. CITIZENSHIP		Eilir	nino -	Dual Citizonchir	`		
(min/dd/yyyy)	01/04/1990			Filipino Dual Citizenship by birth by naturalization				lization	
4. PLACE OF BIRTH	Brgy, Guadalupe, Baybay Clty, Leyte	If holder of dual citize	enship,	Pls. indicate country:					
5. SEX	☐ Male ✓ Female	please indicate the d	Philippines						
6. CIVIL STATUS	Single Married	17. RESIDENTIAL ADDRESS		1			Zone 6		
	Widowed Separated Other/s:		Hou	se/Block/Lot N	lo.	Gı	Street Guadalupe (Utod)		
	Unici/s.		Sul	bdivision/Villag	e		Barangay		
7. HEIGHT (m)	1.52	Ci		BAYBAY City/Municipality			LEYTE Province		
8. WEIGHT (kg)	46.00	ZIP CODE		6521					
9. BLOOD TYPE	0+	18. PERMANENT ADDRESS	Hou	se/Block/Lot N	se/Block/I at Na			Zone 6 Street	
10. GSIS ID NO.	021140550545		Sul	bdivision/Village			Guadalupe (Utod)		
11. PAG-IBIG ID NO.	121036297566			BAYBAY			Barangay LEYTE		
12. PHILHEALTH NO.	120511015605	ZIP CODE	Ci	ty/Municipality 6521			Province		
13. SSS NO.	0727589383	19. TELEPHONE NO.			(053) 563-7353				
14. TIN NO.	423670887 20. MOBILE NO.			968-657-0694					
15. AGENCY EMPLOYEE NO.	V00824	21. E-MAIL ADDRESS (if any)	ma.rosadelima.beato@vsu.edu.ph						
II. FAMILY BACKGROUND									
22. SPOUSE\'S SURNAME	Beato		23. NAME of CH	HILDREN (Write full name and list all)			DATE OF BIRTH (mm/dd/yyyy)		
FIRST NAME	Vivencio	NAME EXTENSION (JR., SR) Jr.	Viktor Lucas G. Beato				01/22/2017		
MIDDLE NAME	Pait	Pait		Anthea Martine G. Beato			09/01/2021		
OCCUPATION	Senior Technical Repres	entative							
EMPLOYER/BUSINESS NAME	Lakpue Drug Inc.								
BUSINESS ADDRESS	24 12th Ave, Cubao, Quezon Cit	ao, Quezon City, Metro Manila							
TELEPHONE NO.									
24. FATHER\'S SURNAME	Gerebise								
FIRST NAME	Benjamin	NAME EXTENSION (JR., SR)	AME EXTENSION (JR., SR)						
MIDDLE NAME	Caputol								
25. MOTHER\'S MAIDEN NAME	Rebecca Villa Capu	Rebecca Villa Capuno							
SURNAME	Gerebise								
FIRST NAME	Rebecca								
MIDDLE NAME	Villa (Continue on separate sheet if necessary)								
III. EDUCATIONAL BACKG	ROUND			1		HIGHEST		SCHOLARSHIP/	
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGR (Write in full)	EE/COURSE	PERIOD OF A	To To	LEVEL/UNITS EARNED (if not graduated)	YEAR GRADUATED	ACADEMIC HONORS RECEIVED	
ELEMENTARY	Gabas Central Elementary School	Elementary		0	2002		2002	N/A	
SECONDARY	Visayas State University Laboratory High School	High School		2002	2006		2006	N/A	
VOCATIONAL/ TRADE COURSE	N/A								
COLLEGE	Visayas State University	Bachelor of Science in Element		2006	2010		2010	N/A	
GRADUATE STUDIES	Visayas State University	Master of Science in Anima Continue on separate sheet if nece		2010	2012		2012	N/A	
SIGNATURE	1		,,	DA	\TE		05/06/2024		

IV. CIVIL SERVICE ELIGIBILITY									
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER			RATING	DATE OF			LICENSE (if applicable)		
SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE			(If Applicable)	EXAMINATION / PLACE OF EXAMINATION / CONFERMENT CONFERMENT			RMENT	NUMBER	Date of Validity
	Agric	ulturist	77.00	07/21/2010	07/21/2010 Tacloban			0011627	01/04/2025
				(Continue on separate she	pat if nacassan/)				
	EXPERIE								
	/ate employm JSIVE DATES	ent. Start from your recent	t work) Descripti	on of duties should k	be indicated in the attached	d Work Exper	SALARY/ JOB/		
20.	m/dd/yyyy) To	POSITION TITI (Write in full/Do not ab		DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)		MONTHLY SALARY	PAY GRADE (if applicable)& STEP (Format"00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVICE (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
07/01/2019	12/31/2019	Assistant Profes	sor II	Visayas State University		33,584.00	16-1	Permanent	Υ
01/01/2019	12/31/2019	Instructor III	1	Visayas State University		28,447.00	14-3	Permanent	Y
01/01/2018		Instructor III		Visayas State University		26,494.00	14-1	Permanent	Y
01/01/2018	12/31/2018	Instructor III		Visayas State University		26,494.00	14-1	Permanent	Y
01/01/2018		Instructor III		Visayas	Visayas State University		14-3	Permanent	Y
01/01/2017	12/31/2017	Instructor III		Visayas	State University	25,290.00	14-1	Permanent	Υ
01/01/2017		Instructor I		Visayas	State University	21,626.00	12-2	Permanent	Υ
08/01/2016	12/31/2016	Instructor I		Visayas	State University	20,870.00	12-2	Permanent	Y
06/01/2016	07/31/2016	Instructor I		Visayas	State University	20,651.00	12-1	Permanent	Y
01/01/2016	05/31/2016	Instructor I		Visayas	State University	20,651.00	12-1	Temporary	Υ
06/01/2015	12/31/2015	Instructor I		Visayas	State University	19,940.00	-	Temporary	Y
08/01/2013	05/31/2015	Instructor I		Visayas State University		19,940.00	-	Temporary	Y
				(Oanti	- 4 %				
SIGNA	ATURE			(Continue on separate she	eet if necessary) DATE		05/06/2	2024	
0.0.0	CS FORM 212 (Revised 2017), Pag					017), Page 2 of 4			

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S								
29. NAME & ADDRESS OF OR (Write in full)	GANIZATION		VE DATES Id/yyyy)	NUMBER OF HOURS	POSITION / NATURE OF WORK			
N/A		N/A	N/A	N/A		N/A		
VII. LEARNING AND DEVELOPMENT (L&D)			te sheet if necessary) IS ATTENDEL					
(Start from the most recent L&D/training program and include	Start from the most recent L&D/training program and include only the relevant L&D/training taken for the last five (5) years for Division Chief/Executive/Managerial positions)							
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)			E DATES OF IDANCE Id/yyyy)	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)		
Animal Feed Milling Technology an	d Utilization	09/14/2020	09/18/2020	40	Technical	ATI-International Training Center on Pig Husbandry		
Feednovation: 3P's of Alternative Feedst	uff and Utilization	08/28/2020	08/28/2020	8	Technical	ATI-International Training Center on Pig Husbandry		
Short Course on Sustainable Pig farming (LAB	S-Pigs) and Utilization	08/18/2020	08/20/2020	24	Technical	ATI-International Training Center on Pig Husbandry		
National Trainer's Course on Basic Meat Proc	cessing and Utilization	08/15/2020	08/17/2020	24	Technical	ATI-International Training Center on Pig Husbandry		
National Trainer's Course on Animal Waste Mar	nagement and Utilization	07/06/2020	07/10/2020	40	Technical	ATI-International Training Center on Pig Husbandry		
Native Chicken Raising			12/18/2019	8	Technical	City Agriculture's Office Baybay City, Leyte		
(Continue on separate sheet if necessary) VIII. OTHER INFORMATION								
31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full) 33. MEMBERSHIP IN ASSOCIATION (Write in full)							
Basic Swine Practices and Management		Philippine Association of Agriculturists, Inc.						
Animal Production		Philippine Society of Animal Science						
		Philippine Society of Animal Science - Visayas Chapter						
		Continue on separat	te sheet if necessary))				
SIGNATURE			,		TE	05/06/2024		
						00 FORM 040 (Paris at 0047), Paris 0 at		

b. within the fourth degree (for Local Government Unit - Caree]no no			
35. a. Have you ever been found guilty of any administrative offen	YES If YES, give details:	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 of any regulation by any court or tribunal?	☐YES ☐ If YES, give details:	NO .			
37. Have you ever been separated from the service in any of the f retirement, dropped from the rolls, dismissal, termination, end phased out (abolition) in the public or private sector?	If YES, give details: Resignation				
38. a. Have you ever been a candidate in a national or local electi (except Barangay election)?					
b. Have you resigned from the government service during the last election to promote/actively campaign for a national or loc	☐YES ☐NO If YES, give details:				
39. Have you acquired the status of an immigrant or permanent re	☐YES ☐NO If YES, give details (country):				
 40. Pursuant to: (a) Indigenous People\'s Act (RA 8371); (b) Magr 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), p a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? 	If YES, please specify: YES If YES, please specify ID	NO			
41. REFERENCES (Person not related by consanguinity or affinity to applicant /a	appointee)				
NAME	ADDRESS	TEL. NO.	ID picture taken within		
Julius V. Abela	VSU, Visca, Baybay City, Leyte	09208553990	the last 6 months 3.5 cm x 4.5 cm (passport size)		
MARK A. ESPIDELLA	Seminaries Institutes of Religion, Tacloban, Leyte	09364543188	With full and handwritten		
Manuel D. Gacutan	VSU, Visca, Baybay City, Leyte	09702926437	name tag and signature over printed name		
42. I declare under oath that I have personally accomplished this complete statement pursuant to the provisions of pertinent I Philippines. I authorize the agency head/authorized represent agree that any misrepresentation made in this documen administrative/criminal case/s against me.	Republic of the stated herein. I	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 ID/License/Passport No.: N/A	Signature (Sign inside the b	pox)			
Date/Place of Issuance: N/A		Right Thumbmark			
SUBSCRIBED AND SWORN to before me this	, affiant exh Person Administering Oa		government ID as indicated above.		