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 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. <b>DO NOT ABBREVIATE.</b> 1. CS ID No. (Do not fill up. For CSC use only)  I. PERSONAL INFORMATION									
2. SURNAME	Quimbo								
FIRST NAME	Hannah Mae	NAME EXTENSION (JR., SR) N/A							
MIDDLE NAME	Evangelio								
3. DATE OF BIRTH	10/00/1000	16. CITIZENSHIP		<b>✓</b> Filip		l B . 1 677 1 .			
(mm/dd/yyyy)	10/06/1990	10/06/1990 16. CITIZENSHIP			oino	Dual Citizenship by birth	o by natura	lization	
4. PLACE OF BIRTH	Korondal City, South Cotabato	If holder of dual citize	enship,			Pls. indicate of	ountry:		
5. SEX	☐ Male ✓ Female	please indicate the d	etails.	Philippines					
6. CIVIL STATUS	Single  Married	17. RESIDENTIAL ADDRESS	. ADDRESS						
	Widowed Separated		Hou	se/Block/Lot No.			Street		
	Other/s:		Sub	odivision/Villag	10	Barangay			
7. HEIGHT (m)	1.00			ity/Municipality			Province		
8. WEIGHT (kg)	1.00	ZIP CODE							
9. BLOOD TYPE	A-	18. PERMANENT ADDRESS	Hou	se/Block/Lot N	lo.		Street		
10. GSIS ID NO.	N/A			odivision/Villag			Barangay		
11. PAG-IBIG ID NO.	N/A		Ū.				Province		
12. PHILHEALTH NO.	N/A	ZIP CODE	OI	ity/Municipality			Trovince		
13. SSS NO.	N/A	19. TELEPHONE NO.		1					
14. TIN NO.	N/A	20. MOBILE NO.		1					
15. AGENCY EMPLOYEE NO.	V00845	21. E-MAIL ADDRESS (if any)	hannahmae.quimbo@vsu.edu.ph						
II. FAMILY BACKGROUND									
22. SPOUSE\'S SURNAME	Quimbo	23. NAME of CH		IILDREN (Write full name and list all)			DATE OF BIRTH (mm/dd/yyyy)		
FIRST NAME	Leonil	NAME EXTENSION (JR., SR)	Leonessa Mae E. Quimbo			nbo	04/06/2016		
MIDDLE NAME	Ampilanon			Leone Paul E. Quimbo			12/14/2021		
OCCUPATION	Credit Officer								
EMPLOYER/BUSINESS NAME	BPI Direct BanKo, li	nc.							
BUSINESS ADDRESS	Osmena St., Brgy. Sto. Nino,	Isabel, Leyte							
TELEPHONE NO.	NA								
24. FATHER\'S SURNAME	Evangelio								
FIRST NAME	Rolando	NAME EXTENSION (JR., SR)							
MIDDLE NAME	Artizon								
25. MOTHER\'S MAIDEN NAME	Clarita Panes Ladianghibong								
SURNAME	Evangelio								
FIRST NAME	Clarita	Clarita							
MIDDLE NAME	Ladianghibong	Ladianghibong		(Continue on separate sheet if necessary)					
III. EDUCATIONAL BACKG	ROUND								
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGRI (Write in full)	EE/COURSE	PERIOD OF A	ATTENDANCE To	HIGHEST LEVEL/UNITS EARNED	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED	
ELEMENTARY	Koronadal Central Elementary School	Elementary		1997	2003	(if not graduated)	2003	N/A	
SECONDARY	Koronadal National Comprehensive High School	High School		2003	2007		2007	N/A	
VOCATIONAL/ TRADE COURSE	N/A								
COLLEGE	Visayas State University	Bachelor of Science in Hotel Restat Management	urant and Tourism	2007	2011		2011	Cum Laude	
GRADUATE STUDIES	University of Cebu	Master in Business Mana Continue on separate sheet if nece		2013	2014		2014	N/A	
SIGNATURE		20 Soparato Oriote il 11000		DA	ATE		03/27/2023		

IV. CIVIL SERVICE ELIGIBILITY									
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER PATING			DATE OF				LICENSE (if applicable)		
SPECIAL LAWS/ CES/ CSEE		(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		(	an af duties about d		d Mark Francis	iamaa ahaat		
28. INCLU	SIVE DATES m/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)	(vvrite in ful	II/Do not abbreviate)	SALARY	(Format"00-0")/ INCREMENT	APPOINTMENT	(Y/ N)
01/01/2023	PRESENT	Instructor III		Visayas	State University	33,843.00	14-1	Permanent	Y
09/15/2022		Instructor III		Visayas	State University	32,321.00	14-1	Permanent	Y
07/01/2022		Instructor II		Visayas	State University	30,111.00	13-2	Permanent	Y
01/01/2022		Instructor II		Visayas	State University	29,798.00	13-1	Permanent	Y
01/01/2021		Instructor II		Visayas	State University	28,276.00	13-1	Permanent	Y
01/01/2020		Instructor II		Visayas	State University	26,754.00	13-1	Permanent	Y
07/01/2019	12/31/2019	Instructor II		Visayas	State University	25,232.00	13-1	Permanent	Y
01/01/2019		Instructor I		Visayas State University		22,938.00	12-1	Permanent	Y
01/01/2018	12/31/2018	Instructor I		Visayas	Visayas State University		12-1	Permanent	Y
01/01/2017	12/31/2017	Instructor I		Visayas	Visayas State University		12-1	Permanent	Y
06/01/2016	12/31/2016	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	Y
06/01/2015	12/31/2015	Instructor I		Visayas	State University	19,940.00	-	Temporary	Y
07/01/2014	05/31/2015	Instructor I		Visayas	Visayas State University 19,9		-	Temporary	Y
				(Continue on separate she	eet if necessary)				
SIGNATURE				DATE	03/27/2023				
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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)	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)			
		INCLUSIVE	DATES OF		Type of LD			
30. TITLE OF LEARNING AND DEVELOPMENT INTEF (Write in full)	RVENTIONS/TRAINING PROGRAMS	ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)		
N/A		From N/A	To N/A	N/A	N/A	N/A		
		(0-4)						
(Continue on separate sheet if necessary)  VIII. OTHER INFORMATION								
31. SPECIAL SKILLS and HOBBIES	32. NC		TINCTIONS / RECO	OGNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)		
N/A		N/	'A		N/A			
		Continue on separat	e sheet if necessary					
SIGNATURE				DA	TE	03/27/2023		

J-1.	the chief of bureau or office or to the person who has Office, Bureau or Department where you will be apppear. within the third degree?		NO				
	b. within the fourth degree (for Local Government Uni	YES     If YES, give details:	NO				
35.	a. Have you ever been found guilty of any administrat	☐YES ☐If YES, give details:	NO .				
	b. Have you been criminally charged before any court	If YES, give details:  Date Filed: Status of Case/s:	NO				
36.	Have you ever been convicted of any crime or violatic regulation by any court or tribunal?	☐YES ☐If YES, give details:	NO .				
37.	Have you ever been separated from the service in an retirement, dropped from the rolls, dismissal, terminat phased out (abolition) in the public or private sector?	If YES, give details:	NO .				
38.	(except Barangay election)?	If YES, give details:	NO				
	b. Have you resigned from the government service du last election to promote/actively campaign for a nation	If YES, give details:	NO				
39.	Have you acquired the status of an immigrant or perm	YES   If YES, give details (count	<b>NO</b> ry):				
	Pursuant to: (a) Indigenous Peoplel's Act (RA 8371); 7277); and (c) Solo Parents Welfare Act of 2000 (RA Are you a member of any indigenous group?			NO			
	Are you a person with disability?	TYES II YES, please specify ID					
	Are you a solo parent?	YES   If YES, please specify ID	NO				
41.	REFERENCES (Person not related by consanguinity or affinity to a	applicant /appointee)					
	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 accomplished this Personal Data Sheet which is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I authorize the agency head/authorized representative to verify/validate the contents stated herein. I agree that any misrepresentation made in this document and its attachments shall cause the filing of							
	administrative/criminal case/s against me.						
е	Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driven's License, tc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: N/A						
	D/License/Passport No.: N/A	box)					
	Date/Place of Issuance: N/A	03/27/2023 Date Accomplished		Right Thumbmark			
	SUBSCRIBED AND SWORN to before me this	hibiting his/her validly issued g	overnment ID as indicated above.				
		ath					