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			ATE	1. CS ID No.		/Do not fill up. E	or CSC use only	
I. PERSONAL INFORMATION		ate N/A II not applicable. DO	NOT ABBREVI	AIE.	1. C3 ID NO.		(Do not nii up. F	or CSC use only	
2. SURNAME	Asoy								
FIRST NAME	Angelica		NAME EXTENSION (JR., SR) N/A						
MIDDLE NAME	Castillo								
3. DATE OF BIRTH	Cuotino								
(mm/dd/yyyy)	09/10/1996	16. CITIZENSHIP		✓ Filip	oino	Dual Citizenship by birth	by natura	lization	
4. PLACE OF BIRTH	Ormoc City	If holder of dual citize	enship.			country:	ilization		
5. SEX		please indicate the d	Philippines						
	<u> </u>	17. RESIDENTIAL ADDRESS				UPPER CAMPUS			
6. CIVIL STATUS	✓ Single	17. RESIDENTIAL ADDRESS	ILANG-ILANG DORMTORY House/Block/Lot No. VISCA Subdivision/VIllage			Street			
	Other/s:				10		Pangasungan		
7. HEIGHT (m)	1.54			BAYBAY			Barangay LEYTE		
8. WEIGHT (kg)	54.00	ZIP CODE	City/Municipality		<u> </u>	Province 6521			
1 - 1		18. PERMANENT ADDRESS				ITIO CONCON			
9. BLOOD TYPE	A+		Hou	se/Block/Lot N	lo.	-	Street		
10. GSIS ID NO.	N/A		Sub	odivision/Village			Hibunawon <i>Barangay</i>		
11. PAG-IBIG ID NO.	N/A			ORMOC CITY ity/Municipality	,	LEYTE Province			
12. PHILHEALTH NO.	132507390793	ZIP CODE				6541			
13. SSS NO.	N/A	19. TELEPHONE NO.		N/A					
14. TIN NO.	N/A	20. MOBILE NO.		912-581-6741					
15. AGENCY EMPLOYEE NO.	MPLOYEE NO. V01223 21. E-MAIL ADDRESS (if any) angelica.asoy@vsu.edu.ph								
II. FAMILY BACKGROUND									
22. SPOUSE\'S SURNAME	N/A		23. NAME of CH	of CHILDREN (Write full name and list all)			H (mm/dd/yyyy)		
FIRST NAME	N/A	NAME EXTENSION (JR., SR) N/A	N/A				N	I/A	
MIDDLE NAME	N/A								
OCCUPATION	N/A	N/A							
EMPLOYER/BUSINESS NAME	N/A								
BUSINESS ADDRESS	N/A								
TELEPHONE NO.	N/A								
24. FATHER\'S SURNAME	ASOY								
FIRST NAME	GONZALO	NAME EXTENSION (JR., SR)							
MIDDLE NAME	LUMAAD								
25. MOTHER\'S MAIDEN NAME	MERCEDITA BOLOY CASTILLO								
SURNAME	ASOY								
FIRST NAME	MERCEDITA								
MIDDLE NAME	CASTILLO		(Continue on separate sheet if necessary)						
III. EDUCATIONAL BACKG	ROUND								
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGR (Write in full)	EE/COURSE	PERIOD OF A	ATTENDANCE To	HIGHEST LEVEL/UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED	
ELEMENTARY	Hibunaon Elementary School	Elementary		2003	2009	(g. uuuateu)	2009	N/A	
SECONDARY	Dolores National High School	High School		2009	2013		2013	N/A	
VOCATIONAL/ TRADE COURSE	N/A								
COLLEGE	Visayas State University	Bachelor of Science in Cl	hemistry	2013	2017		2017	N/A	
GRADUATE STUDIES	N/A								
	(0	Continue on separate sheet if nece	essary)		·		1	·	
SIGNATURE				DA	ATE		01/21/2025		

IV. CIVIL	SERVICE I	ELIGIBILITY								
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE			RATING	DATE OF	DI AGE OF EVANUATION / GOVERNMENT			LICENSE (if a	oplicable)	
BA	SPECIAL L RANGAY ELIGIB	AWS/ CES/ CSEE ILITY / DRIVER'S LICENSE	(If Applicable)	EXAMINATION / CONFERMENT			NUMBER	Date of Validity		
	Chemical	Technician	82.50	10/09/2019	Cebu City		0005378	09/10/2025		
	Laboratory Technician N/A CSC RO VIII			362408220009	11/24/2022					
V WORK	EXPERIEI	NCE		(Continue on separate she	eet if necessary)					
		nent. Start from your recen	t work) Descripti	ion of duties should b	oe indicated in the attached	l Work Exper				
(mr	SIVE DATES m/dd/yyyy)	POSITION TITI (Write in full/Do not ab			DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)		SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format"00-0")/	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)	
From 01/01/2024	To PRESENT	Laboratory Techn	ician II	Visayas	State University	20,720.00	INCREMENT 8-2	Permanent	Y	
12/07/2023		Laboratory Techn			State University	19,923.00	8-2	Permanent	Y	
01/01/2023	12/06/2023	Laboratory Techn			State University	19,744.00	8-1	Permanent	Υ	
11/25/2022		Laboratory Techn	ician II	Visayas	State University	18,998.00	8-1	Permanent	Y	
01/01/2022		Laboratory Techn	ician II	Visayas	Visayas State University		8-1	Temporary	Υ	
12/01/2021	11/30/2022	Laboratory Techn	ician II	Visayas	Visayas State University		8-1	Temporary	Y	
01/01/2021		Laboratory Techn	ician II	Visayas State University		18,251.00	8-1	Temporary	Y	
12/07/2020	12/06/2021	Laboratory Techn	ician II	Visayas State University		17,505.00	8-1	Temporary	Y	
				(Continue on separate she	eet if necessary)					
SIGNA	SIGNATURE				DATE 01/21/2025					
		!					CS	FORM 212 (Revised 20)17), 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)		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)				
	(Continue on separate sheet if necessary) VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED 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 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	
(Continue on separate sheet if necessary) VIII. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES	32. NO		TINCTIONS / RECO	OGNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
N/A	N/A N/A						
		(Continue on separa	te sheet if necessary)				
SIGNATURE				DA	TE	01/21/2025	

34	Are you related by consanguinity or affinity to the apputhe chief of bureau or office or to the person who has Office, Bureau or Department where you will be apppear. within the third degree? b. within the fourth degree (for Local Government Unit		✓ NO			
35.	a. Have you ever been found guilty of any administrat	YES [√ NO			
	b. Have you been criminally charged before any court	YES [If YES, give details: Date Filed: Status of Case/s:	✓N0			
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, terminat 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:	√ NO			
	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 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] ☐YES [
41.	REFERENCES (Person not related by consanguinity or affinity to a	pplicant /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		
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 diadministrative/criminal case/s against me.	ertinent laws, rules and regulations of the epresentative 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, tc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: UMID					
 	D/License/Passport No.: 021314692543	box)				
	Date/Place of Issuance: 01/06/2021 / Maasin City		Right Thumbmark			
	SUBSCRIBED AND SWORN to before me this	, affiant ex Person Administering O		d government ID as indicated above.		
		ath				