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. **DO NOT ABBREVIATE.**

1. CS ID No. (Do not fill up. For CSC use only)

I. PERSONAL INFORMATION

2. SURNAME	Pajares
FIRST NAME	Glenn
NAME EXTENSION (JR., SR)	N/A
MIDDLE NAME	Gubalane

3. DATE OF BIRTH (mm/dd/yyyy)	07/30/1979	16. CITIZENSHIP	☑ Filipino ☐ Dual Citizenship ☐ by birth ☐ by naturalization
4. PLACE OF BIRTH	Ormoc City, Leyte	If holder of dual citizenship, please indicate the details.	Pls. indicate country: **Philippines**
5. SEX	☑ Male ☐ Female		
6. CIVIL STATUS	☐ Single ☑ Married ☐ Widowed ☐ Separated ☐ Other/s:	17. RESIDENTIAL ADDRESS	# 12 (House/Block/Lot No.) Betty street (Street); Bliss Project (Subdivision/Village) Bagong Buhay (Barangay); ORMOC CITY (City/Municipality) LEYTE (Province); ZIP CODE 6541
7. HEIGHT (m)	1.70		
8. WEIGHT (kg)	86.00		
9. BLOOD TYPE	A+	18. PERMANENT ADDRESS	# 12 (House/Block/Lot No.) Betty street (Street); Bliss Project (Subdivision/Village) Bagong Buhay (Barangay); ORMOC CITY (City/Municipality) LEYTE (Province); ZIP CODE 6541
10. GSIS ID NO.	N/A		
11. PAG-IBIG ID NO.	N/A		
12. PHILHEALTH NO.	N/A		
13. SSS NO.	N/A	19. TELEPHONE NO.	N/A
14. TIN NO.	N/A	20. MOBILE NO.	920-925-1159
15. AGENCY EMPLOYEE NO.	V02055	21. E-MAIL ADDRESS (if any)	glenn.pajares@vsu.edu.ph

II. FAMILY BACKGROUND

22. SPOUSE\'S SURNAME	Pajares	23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	Riza	N/A	N/A
NAME EXTENSION (JR., SR)			
MIDDLE NAME	Yap		
OCCUPATION	Medical Technologist		
EMPLOYER/BUSINESS NAME	N/A		
BUSINESS ADDRESS	N/A		
TELEPHONE NO.	09176221159		
24. FATHER\'S SURNAME	Pajares		
FIRST NAME	Edgardo		
NAME EXTENSION (JR., SR)			
MIDDLE NAME	Villa		
25. MOTHER\'S MAIDEN NAME	Gubalane		
SURNAME	Pajares		
FIRST NAME	Flordeliza		
MIDDLE NAME	Gubalane	*(Continue on separate sheet if necessary)*	

III. EDUCATIONAL BACKGROUND

26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE From	PERIOD OF ATTENDANCE To	HIGHEST LEVEL/UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
ELEMENTARY	St. Paul's School, Ormoc City, Leyte	Elementary	1982	1992		1992	N/A
SECONDARY	Sacred Heart Seminary, Palo, Leyte	High School	1992	1996		1996	N/A
VOCATIONAL/ TRADE COURSE	N/A						
COLLEGE	Sacred Heart Seminary, Palo, Leyte	Bachelor of Arts in Philosophy	1996	2000		2000	N/A
GRADUATE STUDIES	University of San Carlos, Cebu City	Master of Arts in Philosophy	2000	2022		2022	N/A

PLEASE SEE ATTACHMENT A

(Continue on separate sheet if necessary)

SIGNATURE		***DATE***	06/04/2024

Attachment A

III. EDUCATIONAL BACKGROUND							
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE		HIGHEST LEVEL/UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From	To			
GRADUATE STUDIES	University of San Carlos, Cebu City, Philippines	Doctor Philosophy in Philosophy	2002	2006		2006	
	Cebu Normal University	Doctor of Arts in Literature and Communication	2012	2017		2017	
(Continue on separate sheet if necessary)							
SIGNATURE			DATE		06/04/2024		

IV. CIVIL SERVICE ELIGIBILITY

27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
				NUMBER	Date of Validity
PD 907: Honor Elig.		N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.

28. INCLUSIVE DATES (mm/dd/yyyy)		POSITION TITLE (Write in full/Do not abbreviate)	DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format"00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)
From	To						
06/05/2023	PRESENT	Associate Professor IV	Visayas State University	71,511.00	22-1	Permanent	Y
06/05/2023		Associate Professor IV	Visayas State University	71,511.00	22-1	Permanent	Y
01/01/2023		Associate Professor IV	Visayas State University	71,511.00	22-1	Temporary	Y
01/01/2023		Associate Professor IV	Visayas State University	71,511.00	22-1	Temporary	Y
01/01/2023		Associate Professor IV	Visayas State University	71,511.00	22-1	Temporary	Y
09/01/2022	07/31/2023	Associate Professor IV	Visayas State University	69,963.00	22-1	Temporary	Y

(Continue on separate sheet if necessary)

SIGNATURE		***DATE***	06/04/2024

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

29. NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
	From	To		
Bantay Kita Quezon City	12/28/2018	PRESENT	1	Visayas CSO representative
Philippine Extractive Industries Transparency Initiative(PH-EITI) Department of Finance, Manila	06/08/2018		1	CSO -MSG Representative
Sectoral Transparency Alliance on Natural Resource Governance in Cebu Inc (STANCE) Sibonga, Cebu	06/08/2018		1	Chair

(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)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
	From	To			
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. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	06/04/2024

34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to the chief of bureau or office or to the person who has immediate supervision over you in the Office, Bureau or Department where you will be apppointed, a. within the third degree? b. within the fourth degree (for Local Government Unit - Career Employees)?	☐ YES ☐ NO ☐ YES ☐ NO If YES, give details: _____
35. a. Have you ever been found guilty of any administrative offense?	☐ YES ☐ NO If YES, give details: _____
b. Have you been criminally charged before any court?	☐ YES ☐ NO If YES, give details: Date Filed: _____ Status of Case/s: _____
36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?	☐ YES ☐ NO If YES, give details: _____
37. Have you ever been separated from the service in any of the following modes: resignation, retirement, dropped from the rolls, dismissal, termination, end of term, finished contract or phased out (abolition) in the public or private sector?	☐ YES ☐ NO If YES, give details: _____
38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?	☐ YES ☐ NO If YES, give details: _____
b. Have you resigned from the government service during the three (3)-month period before the last election to promote/actively campaign for a national or local candidate?	☐ YES ☐ NO If YES, give details: _____
39. Have you acquired the status of an immigrant or permanent resident of another country?	☐ YES ☐ NO If YES, give details (country): _____
40. Pursuant to: (a) Indigenous People\'s Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), please answer the following items: a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent?	 ☐ YES ☐ NO If YES, please specify: _____ ☐ YES ☐ NO If YES, please specify ID No _____ ☐ YES ☐ NO If YES, please specify ID No _____

41. REFERENCES (Person not related by consanguinity or affinity to 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

Computer generated or photocopied picture is not acceptable

PHOTO

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.

Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver\'s License, etc.) *PLEASE INDICATE ID Number and Date of Issuance*
Government Issued ID: **DL**
ID/License/Passport No.: **H0399031852**
Date/Place of Issuance: 07/30/2019 / Cebu City

Signature (Sign inside the box)
06/04/2024
Date Accomplished

Right Thumbmark

SUBSCRIBED AND SWORN to before me this _____ , affiant exhibiting his/her validly issued government ID as indicated above.

Person Administering Oath