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	1. CS ID No.		/Da not fill T	CCC	
Print legibly. Tick appropriate boxes I. PERSONAL INFORMATIO		ate N/A ii not applicable. DO	NOI ABBREVIA	AIE.	1. CS ID NO.		(Do not till up. F	or CSC use only	
2. SURNAME	Pausanos								
FIRST NAME	Emelita		NAME EXTENSION (JR., SR) N/A						
MIDDLE NAME	Sagaral								
3. DATE OF BIRTH		16. CITIZENSHIP				1			
(mm/dd/yyyy)	10/23/1981	io. omeenom	Filipino Dual Citizenship by birth by naturalization						
4. PLACE OF BIRTH	Loay, Bohol	If holder of dual citize							
5. SEX	☐ Male ✓ Female	please indicate the details.		Philippines					
6. CIVIL STATUS	☐ Single ✓ Married	17. RESIDENTIAL ADDRESS							
	Widowed Separated		Hou	House/Block/Lot No.			Street Pangasungan		
	Other/s:		Sub	bdivision/Villag	е		Pangasungan Barangay		
7. HEIGHT (m)	1.56			BAYBAY ity/Municipality	,		LEYTE Province		
8. WEIGHT (kg)	56.00	ZIP CODE				6521			
9. BLOOD TYPE	A+	18. PERMANENT ADDRESS		1113		A	Andres Abella St		
10. GSIS ID NO.	N/A			House/Block/Lot No. Veloso Compound			Street Guadalupe		
			Subdivision/Village CEBU CITY (Capital)			Barangay CEBU			
11. PAG-IBIG ID NO.	164001888588		City/Municipality			Province			
12. PHILHEALTH NO.	120504798068	ZIP CODE				6000			
13. SSS NO.	3377808190	19. TELEPHONE NO.				N/A			
14. TIN NO.	225085344000	20. MOBILE NO.		906-614-6730					
15. AGENCY EMPLOYEE NO.	5. AGENCY EMPLOYEE NO. V02093 21. E-MAIL ADDRESS (if any) emelita.pausanos@vsu.edu.ph								
II. FAMILY BACKGROUND									
22. SPOUSE\'S SURNAME	Pausanos			HILDREN (Write full name and list all)			DATE OF BIRTH (mm/dd/yyyy)		
FIRST NAME	Mike	NAME EXTENSION (JR., SR)		Mikaela Vergell S. Pausanos			03/22	2/2006	
MIDDLE NAME	Behasa			Mikael Vianey S. Pausanos			05/17	7/2014	
OCCUPATION	Driver								
EMPLOYER/BUSINESS NAME	Visayas State Univer	rsity							
BUSINESS ADDRESS	Visca, Baybay City, L	eyte							
TELEPHONE NO.	09351857759								
24. FATHER\'S SURNAME	Sagaral	IAME EXTENSION (ID. OD)							
FIRST NAME	Francisco	NAME EXTENSION (JR., SR)							
MIDDLE NAME	Avelino								
25. MOTHER\'S MAIDEN NAME	Shirley Ilogon Api	t							
SURNAME	Sagaral								
FIRST NAME	Shirley								
MIDDLE NAME	Apit		(Continue on separate sheet if necessary)						
III. EDUCATIONAL BACKG	ROUND					HIGHEST		SCHOLARSHIP/	
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)		From	To	LEVEL/UNITS EARNED (if not graduated)	YEAR GRADUATED	ACADEMIC HONORS RECEIVED	
ELEMENTARY	Loay Central Elem. School	Elementary		1988	1994		1994	N/A	
SECONDARY	HOLY TRINITY ACADEMY	IY High Schoo		1994	1998		1998	N/A	
VOCATIONAL/ TRADE COURSE	N/A	Dankelov (Cody 1 C	erce (Major in						
COLLEGE	Holy Name University	Bachelor of Science in Comme Management)	erce (Major In	1998	2002		2002	N/A	
GRADUATE STUDIES	N/A								
	(0	Continue on separate sheet if nece	essary)	1					
SIGNATURE				DA	\TE		06/11/2025		

IV. CIVIL :	SERVICE I	ELIGIBILITY								
27 CADEED SEDVICE/ DA 1000 /DOADD/ DADVINDED				DATE OF				LICENSE (if applicable)		
SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE			RATING (If Applicable)	EXAMINATION / PLACE OF EXAMINATION / CONFERMENT CONFERMENT			RMENT	NUMBER	Date of Validity	
CSC Sub-Professional			83.96	08/07/2022	Maa		N/A	N/A		
				(Continue on separate she	eet if necessary)					
	EXPERIEI	NCE nent. Start from your recent	t work) Descripti	ion of duties should h	ne indicated in the attached	l Work Exper	ience sheet			
28. INCLU	SIVE DATES m/dd/yyyy)	POSITION TITI (Write in full/Do not ab	LE	DEPARTMENT / AG	ENCY / OFFICE / COMPANY I/Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format"00-0")/	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/N)	
From	From To		de IV	Visaves	Otata Hairranite	40,000,00	INCREMENT	Darmanant		
01/01/2025	PRESENT	Administrative Ai			State University State University	16,833.00 16,209.00	4-1 4-1	Permanent	Y	
04/03/2023	12/13/2023				State University State University	15,586.00	4-1 4-1	Permanent Permanent	Y	
01/01/2023	03/31/2023	Administrative Aide IV Administrative Aide III		Visayas	603.40	-	Job Order	Y		
06/27/2017	03/31/2020	Purchaser/Buy		Rell and Renn T	17,800.00	-	Permanent	N N		
04/23/2010	06/26/2017	Purchasing St		Blue Ocean Holding	12,500.00	-	Permanent	N		
05/29/2003	04/22/2010	PHARMACY ASSISTANT CHARGE		ROSE P	10,500.00	-	Permanent	N		
		СПАКСЕ								
				(Continue on separate she	eet if necessary)					
SIGNATURE					DATE		06/11/	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 ORGANIZATION (Write in full)			INCLUSIVE DATES (mm/dd/yyyy) From To			POSITION / NATURE OF WORK		
N/A	N/A	N/A	N/A		N/A			
VII. LEARNING AND DEVELOPMENT (L&D)			e sheet if necessary, S ATTENDE					
(Start from the most recent L&D/training program and include		the last five (5) ye	ears for Division C		agerial positions)			
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)			INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy) From To		Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)		
Working Towards Personal Effec	ctiveness	09/24/2024	09/27/2024	32	Technical	Personnel Officers Association of the Philippines, Inc. (POAP)		
Basic Records and Archives Mar	nagement	07/30/2024	07/31/2024	16	Technical	HRMO, Visayas State University		
Orientation of Guidelines and procedures on Process/Services of	the Offices underAdministrative Services	02/23/2024	03/23/2024	8	Technical	"Visayas State University (VSU), Visca, Baybay City, Leyte "		
Attended the ISO 9001:2015 Awareness/Re	-awareness Webinar	08/29/2023	08/29/2023	8	Technical	Office of the Quality Assurance Center		
GPPB Basic Course Training on the RA 9184 and its Revised Im 2016	plementing Rules and Regulations Act of	08/22/2023	08/24/2023	24	Technical	"Visayas State University (VSU), Visca, Baybay City, Leyte "		
Orientation/Re-Orientation of Duties and Responsibi	lities of dDRCs and AdDRCs	09/07/2022	09/07/2022	4	Instruction	PAMELA P. ORAÑO - University Document and Records Controller ALELI A. VILLOCINO - Quality Management Representative		
HANDS ONLY CARDIOPULMONARY R	ESUSCITATION	07/21/2022	07/22/2022	4	Technical	Department of Heath- Eastern Visayas Center for Health Development		
TYPHOON AWARENESS & CALAMIT	Y READINESS	06/09/2022	06/09/2022	4	Technical	Department of Meteorology		
Virtual Data Privacy Act of 2012 Awareness Seminar			04/07/2022	8	Technical	"Visayas State University (VSU), Visca, Baybay City, Leyte "		
WEBINAR ON MENOPAUSE AND OTHER COMMON GYNECOLOGIC PROBLEMS			03/31/2022	8	Technical	GENDER RESOURCE CENTER		
WOMEN INSPIRING WON	IEN	03/07/2022	03/07/2022	8	Technical	GENDER RESOURCE CENTER		
ISO 9001:2015 Awareness/Re-aware	ness Webinar	11/27/2020	11/27/2020	8	Technical	Quality Assurance Center, Visayas State University		
VIII. OTHER INFORMATION	(Continue on separat	l e sheet if necessary,					
31. SPECIAL SKILLS and HOBBIES	32. NC		TINCTIONS / RECO	OGNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION		
N/A		Write in full)			N/A (Write in full)			
N/A						***		
	((Continue on separate sheet if necessary)						
SIGNATURE				DA	ITE	06/11/2025		
	ı					CS FORM 212 (Revised 2017), Page 3 of 4		

34	Are you related by consanguinity or affinity to the app the chief of bureau or office or to the person who has Office, Bureau or Department where you will be appp	imn	nediate supervision over you in the						
a. within the third degree?					YES	✓ NO			
b. within the fourth degree (for Local Government Unit - Career Employees)?					YES	✓ NO			
	Ů	If Y	ES, give details:						
35	a. Have you ever been found guilty of any administrat	ive	offense?		YES	✓ NO			
	a. Have you ever been lound gainly of any daminional		ononoo.	If YE	ES, give details:				
	b. Have you been criminally charged before any cour	12			YES	✓ NO			
	b. have you been criminally charged belore any cour	 If YE	ES, give details:	<u> </u>					
			Date Filed:						
				s	tatus of Case/s:				
36.	Have you ever been convicted of any crime or violation	n o	any law, decree, ordinance or	□YES ✓NO					
	regulation by any court or tribunal?		•	If YE	ES, give details:				
37.	Have you ever been separated from the service in an	v of	the following modes: resignation.		✓ YES	NO			
	retirement, dropped from the rolls, dismissal, terminal			If YES, give details:					
	phased out (abolition) in the public or private sector?				Res	ignea tr	om private company		
38.		cal e	election held within the last year	١.,	YES	✓ NO			
	(except Barangay election)?			†	YES, give details				
	b. Have you resigned from the government service du			١,	☐YES ✓NO				
	last election to promote/actively campaign for a nation	naı c	or local candidate?	l It	YES, give details	3: 			
39.	Have you acquired the status of an immigrant or pern	nane	ent resident of another country?		YES	✓ NO			
				It YI	ES, give details (country):			
40	Pursuant to: (a) Indigenous People\'s Act (RA 8371);	(h) I	Magna Carta for Disabled Persons (PA						
10	7277); and (c) Solo Parents Welfare Act (RA 6371),								
a.	a. Are you a member of any indigenous group?				YES	✓ NO			
h	Are you a narrow with disability?			If YE	ES, please specif	y: ✓NO			
D.	b. Are you a person with disability?				т⊑5 ES, please specif				
c.	c. Are you a solo parent?				YES	✓ NO			
				If Y	ES, please specif	y ID No			
41	. REFERENCES (Person not related by consanguinity or affinity to a	pplic	ant /appointee)						
	NAME		ADDRESS		TEL. NO.		ID picture taken within		
	Ariel Angus		Cebu Clty				the last 6 months 3.5 cm x 4.5 cm		
H	Suzette B. Lina		Visco Paybay City Loyto		09196913922		(passport size)		
Suzette B. Lilla		Visca, Baybay City, Leyte			J9 1909 13922		With full and handwritten name tag and signature over		
Noelyn Q. Taghoy Mand			Mandaue City				printed name		
42	I declare under oath that I have personally accomplished the provisions of						Computer generated or photocopied picture		
	complete statement pursuant to the provisions of portion Philippines. I authorize the agency head/authorized no						is not acceptable		
	agree that any misrepresentation made in this d	se tl	ne filing of		PHOTO				
	administrative/criminal case/s against me.					_			
	Covernment legical ID # . p								
	Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance								
	Government Issued ID: SSS								
	ID/License/Passport No.: 3377808190		0:	h a : .)					
	O6/11/2025								
[Date/Place of Issuance: 11/30/-0001 / cebu City Date Accomplished						Right Thumbmark		
SUBSCRIBED AND SWORN to before me this, affiant exh					g his/her validly iss	ued gove	rnment ID as indicated above.		
	1								
	Person Administering Oa								
reison Auministering Oat									