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 CHING TO FILLING OUT THE PERSONAL DATA SHEET (PDS) REFORE ACCOMPLISHING THE PDS FORM

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 INFORMATIC		ate N/A ii not applicable. DO	NOT ABBREVI	AIE.	1. CS ID NO.		(Do not illi up. F	or CSC use only)	
2. SURNAME	Agad								
FIRST NAME	Noreve Jean Name Extension (JR., SR) N/A								
MIDDLE NAME	Malacora								
3. DATE OF BIRTH	07/07/4005	16. CITIZENSHIP			.:	Dual Citianahi			
(mm/dd/yyyy)	07/27/1995	Tilipino Dual Citizenship				o by natura	alization		
4. PLACE OF BIRTH	Baybay, Leyte	If holder of dual citize	enship,	Pls. indicate cour					
5. SEX	☐ Male ✓ Female	please indicate the d	Philippines						
6. CIVIL STATUS	Single Married	17. RESIDENTIAL ADDRESS	SIDENTIAL ADDRESS Hot					Purok 2	
	Widowed Separated				lo.		Street Santa Cruz		
	Other/s:		Sul	bdivision/Village			Barangay		
7. HEIGHT (m)	1.52		Ci	BAYBAY ity/Municipality	,	LEYTE Province			
8. WEIGHT (kg)	51.00	ZIP CODE			6521				
9. BLOOD TYPE	A+	18. PERMANENT ADDRESS				Purok 2			
10. GSIS ID NO.	N/A		House/Block/Lot No.			Street Santa Cruz			
11. PAG-IBIG ID NO.	121170993677		Sul	bdivision/Villag BAYBAY	ie	Barangay LEYTE			
			Ci	ity/Municipality	,		Province		
12. PHILHEALTH NO.	130254047164	ZIP CODE	CODE		6521				
13. SSS NO.	N/A	19. TELEPHONE NO.		N/A					
14. TIN NO.	3420239870000	928-313-0662							
15. AGENCY EMPLOYEE NO.	V02206	21. E-MAIL ADDRESS (if any)	RESS (if any) noreve.agad@vsu.edu.ph						
II. FAMILY BACKGROUND									
22. SPOUSE\'S SURNAME	AGAD		23. NAME of CHILDREN (Write full name and list all)				DATE OF BIRTH (mm/dd/yyyy)		
FIRST NAME	JERDAN NAME EXTENSION (JR., SR)		AMARA EVERDANE M. AGAD			11/24/2019			
MIDDLE NAME	LIBRES	LIBRES							
OCCUPATION	ACCREDITED ELECTR								
EMPLOYER/BUSINESS NAME	LEYECO IV	LEYECO IV							
BUSINESS ADDRESS	HILONGOS, LEYT	NGOS, LEYTE							
TELEPHONE NO.									
24. FATHER\'S SURNAME	MALACORA								
FIRST NAME	NELSON	NAME EXTENSION (JR., SR)							
MIDDLE NAME	SINDAY								
25. MOTHER\'S MAIDEN NAME	CARMELITA CASTILLO C	DRACION							
SURNAME	MALACORA								
FIRST NAME	CARMELITA								
MIDDLE NAME	ORACION	(Continue on separate sheet if necessary)							
III. EDUCATIONAL BACKG	ROUND					HIGHEST		SCHOLARSHIP/	
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGR (Write in full)	EE/COURSE	PERIOD OF A	To	LEVEL/UNITS EARNED (if not graduated)	YEAR GRADUATED	ACADEMIC HONORS RECEIVED	
ELEMENTARY	Sta.Cruz Elementary School	Primary Education	1	2002	2008		2008	Salutatorian	
SECONDARY	Visayas State University Laboratory High School	Secondary Education	on	2008	2012		2012	N/A	
VOCATIONAL/ TRADE COURSE	N/A								
COLLEGE	VISAYAS STATE UNIVERSITY	Bachelor of Science in Cl	nemistry	2012	2016		2016	N/A	
GRADUATE STUDIES	N/A								
(Continue on separate sheet if necessary)									
SIGNATURE				DA.	ATE		02/19/2025		

IV. CIVIL SERVICE ELIGIBILITY									
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER			RATING	RATING DATE OF				LICENSE (if applicable)	
ВА	SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE		(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMIN	ATION / CONFER	MENT	NUMBER	Date of Validity
	Chemical Technician		80.00	10/11/2018	CEE	CEBU CITY			07/27/2027
				(Continue on separate she	eet if necessary)				
	EXPERIEI	NCE ent. Start from your recent	t work) Descripti	on of duties should b	ne indicated in the attache	d Work Exper	ience sheet.		
28. INCLU	SIVE DATES m/dd/yyyy)	POSITION TITI (Write in full/Do not ab	.E	DEPARTMENT / AG	ENCY / OFFICE / COMPANY II/Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format"00-0")/	STATUS OF APPOINTMENT	GOV'T SERVICE
From	То						INCREMENT		(Y/ N)
01/01/2025	PRESENT	Science Research A			State University	23,226.00	9-1	Contractual	Y
11/04/2024 03/04/2019	06/30/2025	Science Research A		THE FIRST ANAL	State University YTICAL SERVICES AND	22,219.00	9-1	Contractual	Y
06/06/2016	03/01/2019				AL COOPERATIVE	15,200.00 9,500.00	-	Permanent Permanent	N N
00/00/2010	03/01/2019	Quality Assurance	Analyst	SC GLOBAL CI	SC GLOBAL COCO PRODUCTS INC.		-	Permanent	IN
				(Continue on separate she	eet if necessary)				
SIGNA	ATURE				DATE		02/19/2		047) P- 0 1
							CS	FORM 212 (Revised 20	יוו), 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		/E DATES d/yyyy) To	NUMBER OF HOURS	POSITION / NATURE OF WORK		
STA. CRUZ ELEMENTARY SCHOOL ALU BRGY. STA. CRUZ, BAYBAY CI		04/26/2023	04/26/2025	1		PRESIDENT	
VII. LEARNING AND DEVELOPMENT (L&D)			te sheet if necessary)				
(Start from the most recent L&D/training program and include					agerial positions)		
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)			DATES OF IDANCE Id/yyyy)	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
PHILIPPINE TEXTILE CONGRE	SSS 2023	11/07/2023	11/24/2023	48	Research	PHILIPPINE TEXTILE RESEARCH INSTITUTE	
Attended the ISO 9001:2015 Awareness/Re	-awareness Seminar	08/29/2023	08/29/2023	4	Technical	"Visayas State University (VSU), Visca, Baybay City, Leyte "	
PHILIPPINE TEXTILE CONGRE	SS 2022	11/21/2022	11/28/2022	48	Research	PHILIPPINE TEXTILE RESEARCH INSTITUTE	
(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)	
Reading non-fiction books		STA. CRUZ ELEMENTARY SCHOOL ALUMNI ASSOCIATION					
Conduct field and laboratory works							
INTERNET BROWSING							
OIONATURE.		Continue on separat	te sheet if necessary)		TE	00/40/0005	
SIGNATURE				DA	\TE	02/19/2025	

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						
a. within the third degree?	YES VN	0				
b. within the fourth degree (for Local Government Un	YES VN					
	If YES, give details:					
35. a. Have you ever been found guilty of any administra	tivo offenso?	YES VN	0			
a. Have you ever been found guilty of any autilitistia	uve onerise :	If YES, give details:				
b. Have you been criminally charged before any cour	t?	☐YES ✓N If YES, give details:	0			
	Date Filed:					
	Status of Case/s:					
26						
36. Have you ever been convicted of any crime or violation regulation by any court or tribunal?	on of any law, decree, ordinance or	☐YES ✓NO If YES, give details:				
l		in 120, give detaile.				
37. Have you ever been separated from the service in an retirement, dropped from the rolls, dismissal, termina		✓YES □NO If YES, give details:				
phased out (abolition) in the public or private sector?	tion, end of term, imistied contract of	RESIGNATION				
38. a. Have you ever been a candidate in a national or lo	cal election held within the last year	YES N	0			
(except Barangay election)?	cal election field within the last year	If YES, give details:	•			
b. Have you resigned from the government service do	uring the three (3) month period before the	YES ✓N	0			
last election to promote/actively campaign for a nation		If YES, give details:				
39. Have you acquired the status of an immigrant or perr	and the side of another country of	YES VN				
39. Have you acquired the status of an immigrant or perr	nament resident of another country?	If YES, give details (countr				
		jii i zo, giro dotano (dodina	<i>)</i> /·			
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						
a. Are you a member of any indigenous group?	☐YES ✓N If YES, please specify:	0				
b. Are you a person with disability?		YES VN				
, no you a poroon wan aloubing.		If YES, please specify ID N				
c. Are you a solo parent?		YES VN				
		If YES, please specify ID N	NO			
41. REFERENCES (Person not related by consanguinity or affinity to	applicant /appointee)					
NAME	ADDRESS	TEL. NO.	ID picture taken within			
MARIA ROBELYN A. INSIK	VISAYAS STATE UNIVERSITY	0917-964-0037	the last 6 months 3.5 cm x 4.5 cm			
			(passport size)			
ELIZABETH S. QUEVEDO	VISAYAS STATE UNIVERSITY	0917-890-5565	With full and handwritten name tag and signature over			
FELIX M. SALAS	VISAYAS STATE UNIVERSITY	0939-282-2794	printed name			
42. I declare under oath that I have personally accompli	shed this Personal Data Sheet which is a t	rue, correct and	Computer generated or photocopied picture			
complete statement pursuant to the provisions of p			is not acceptable			
Philippines. I authorize the agency head/authorized r agree that any misrepresentation made in this of			РНОТО			
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.: H1224001087	box)					
Date/Place of Issuance: 03/25/2024 / Baybay City, Leyte	Right Thumbmark					
SUBSCRIBED AND SWORN to before me this	nibiting his/her validly issued go	overnment ID as indicated above.				
	ath					