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 INFORMATIO		ate N/A ii not applicable. BO	NOT ADDICEVIA	AIL.	1. C3 ID NO.		(Do not nii up. r	or CSC use only,	
2. SURNAME	Juntilla								
FIRST NAME	Rafael Rosario NAME EXTENSION (JR., SR) N/A								
MIDDLE NAME	Alvarado								
3. DATE OF BIRTH (mm/dd/yyyy)	10/08/1967 16. CITIZENSHIP  Filipino Dual Citizenship						lization		
4. PLACE OF BIRTH	City of Baybay	If holder of dual citize	nship,	by birth by natu				inzacion	
5. SEX	✓ Male ☐ Female	please indicate the d	the details.  Philippines						
6. CIVIL STATUS	Single Married Widowed Separated Other/s:	17. RESIDENTIAL ADDRESS		219 se/Block/Lot N		M.L. Quezon St.  Street  roblacion Zone 8  Barangay			
7. HEIGHT (m)	1.65			BAYBAY ity/Municipality		LEYTE			
8. WEIGHT (kg)	80.00	ZIP CODE	City/Municipality Province 6521			TTOVINCE			
9. BLOOD TYPE	A-	18. PERMANENT ADDRESS				M.L. Quezon St			
10. GSIS ID NO.	N/A			odivision/Villag		Po	oblacion Zone 8  Barangay	lacion Zone 8	
11. PAG-IBIG ID NO.	170000069286		BAYBAY  City/Municipa				LEYTE  Province		
12. PHILHEALTH NO.	130000729176	ZIP CODE		<u>iyimamoipamy</u>		Province			
13. SSS NO.	0614558003	19. TELEPHONE NO.		N/A					
14. TIN NO.	167958366000		926-454-2768						
15. AGENCY EMPLOYEE NO.	VJO00445 21. E-MAIL ADDRESS (if any) rafael.juntilla@vsu.edu.ph								
II. FAMILY BACKGROUND									
22. SPOUSE\'S SURNAME	Juntilla	,	23. NAME of CH	23. NAME of CHILDREN (Write full name and list all)  DATE					
FIRST NAME	Rosalina NAME EXTENSION (JR., SR)			Bellvicky Rose C. Juntilla				10/22/1988	
MIDDLE NAME	Caranzo	Caranzo			ert C. Junti	05/08/1996			
OCCUPATION	NA	NA							
EMPLOYER/BUSINESS NAME	NA								
BUSINESS ADDRESS	NA								
TELEPHONE NO.									
24. FATHER\'S SURNAME	Juntilla	,							
FIRST NAME	Silveriano	NAME EXTENSION (JR., SR)							
MIDDLE NAME	Derecho								
25. MOTHER\'S MAIDEN NAME	Victoria Mantua Alvai	rado							
SURNAME	Juntilla	Juntilla							
FIRST NAME	Victoria								
MIDDLE NAME	Alvarado		(Continue on separate sheet if necessary)						
III. EDUCATIONAL BACKGI	ROUND					HIGHEST		SCHOLARSHIP/	
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGR (Write in full)	EE/COURSE	PERIOD OF A	To To	LEVEL/UNITS EARNED (if not graduated)	YEAR GRADUATED	ACADEMIC HONORS RECEIVED	
ELEMENTARY	Franciscan College of Immaculate Conception	Elementary		1974	1980	Elementary	1980	N/A	
SECONDARY	Franciscan College of Immaculate Conception	High School		1980	1984	High School	1984	N/A	
VOCATIONAL/ TRADE COURSE	N/A								
COLLEGE	University of the Visayas	Bachelor of Science in Electrica	al Engineering	1985	1991		1991	N/A	
GRADUATE STUDIES	N/A								
0/2007	(0	Continue on separate sheet if nece	essary)				04/00/005		
SIGNATURE	1			D/	\TE	·	01/02/2024		

IV. CIVIL SERVICE ELIGIBILITY									
27 CADEED SEDVICE/ DA 1080 /DOADD/ DADVINDED			DATINO	DATE OF			LICENSE (if applicable)		
ODECIAL LAWIST CEST CSEE		RATING (If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMIN	NUMBER	Date of Validity			
El	ectrical Enginee	rs Licensure Exam	70.00	04/20/1991	Manila			17047	10/22/1991
				(Continue on separate she	eet if necessary)				
	EXPERIEI		t work) Dogovint	ion of dution about d	as indicated in the attache	d Mark Evner	ionos obost		
28. INCLU	(mm/dd/ssss)   DOCITION TITLE   DEDADTMENT / ACENCY / GEGGE / COMPANY   MONTHLY   PAY GRADE (II				SALARY/ JOB/	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/N)		
From	To	Opportunities () Maintage		D/I	Name to Day the Oarm	4,000,00	INCREMENT	T	
07/15/1999	01/02/2003	Construction & Maintena	nice roieman	JV Loreto C	Const. & Dev't Corp.	4,000.00	-	Temporary	N
				(Continue on separate she	eet if necessary)				
SIGNATURE DATE 01/02/20				2024					
		<u>I</u>					CS	FORM 212 (Revised 2	017), Page 2 of 4

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S								
29. NAME & ADDRESS OF 0 (Write in fu			VE DATES Id/yyyy) To	NUMBER OF HOURS	POSITION / NATURE OF WORK			
Philippine Jaycees Inco Manila, Philippine	rporated	06/06/1994	12/31/1998	8		Voluntary		
37 17	-							
VII. LEARNING AND DEVELOPMENT (L&			te sheet if necessary)					
(Start from the most recent L&D/training program and inclu					agerial positions)			
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)		ATTEN	DATES OF IDANCE Id/yyyy)	NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)		
5S Revolution for Clerks &	k Heads	11/29/2023	11/29/2023	3	Instruction	Office of the Vice-President for Administration and Finance, Visayas State University		
ISO 9001:2015 Awareness & Re-av	vareness Webinar	08/29/2023	08/29/2023	4	Instruction	"Visayas State University (VSU), Visca, Baybay City, Leyte "		
(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)		
Driving two/four wheels vehicles		N	/A			N/A		
ELECTRICAL INSTALLATION								
Electrician								
SIGNATURE		(Continue on separa	te sheet if necessary)		ATE	01/02/2024		
5.5						00 FORM 040 (Particul 0047) Part 2 of		

the chief of bureau or office or to the person who has in Office, Bureau or Department where you will be apppo a. within the third degree?  b. within the fourth degree (for Local Government Unit	☐YES ☐YES If YES, give details:	✓ NO		
35. a. Have you ever been found guilty of any administrative	YES lf YES, give details:	<b>✓</b> NO		
b. Have you been criminally charged before any court?	TYES  If YES, give details:  Date Filed:  Status of Case/s:	✓ NO		
36. Have you ever been convicted of any crime or violation regulation by any court or tribunal?	YES If YES, give details:	<b>✓</b> NO		
37. Have you ever been separated from the service in any retirement, dropped from the rolls, dismissal, termination phased out (abolition) in the public or private sector?	YES If YES, give details:	<b>✓</b> NO		
38. a. Have you ever been a candidate in a national or loca (except Barangay election)?	YES If YES, give details	✓NO :		
b. Have you resigned from the government service dur last election to promote/actively campaign for a national	YES If YES, give details	✓ NO :		
39. Have you acquired the status of an immigrant or perma	YES If YES, give details (c	✓ NO country):		
<ul> <li>40. Pursuant to: (a) Indigenous People\'s Act (RA 8371); (the 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8 a. Are you a member of any indigenous group?</li> <li>b. Are you a person with disability?</li> <li>c. Are you a solo parent?</li> </ul>	☐YES  If YES, please specify ☐YES  If YES, please specify ☐YES  If YES, please specify	✓NO / ID No ✓NO		
41. REFERENCES (Person not related by consanguinity or affinity to ap	plicant /appointee)			
NAME	ADDRESS	TEL. NO.	[	ID picture taken within
Jose Bacusmo	VSU, City Of Baybay	09283496536		the last 6 months 3.5 cm x 4.5 cm (passport size)
Honey Sofia V. Colis	Brgy. Guadalupe, City of Baybay			With full and handwritten name tag and signature over
Meriam M. Dela Torre	Brgy. Hipusngo, City of Baybay, Leyte			printed name
42. I declare under oath that I have personally accomplish complete statement pursuant to the provisions of per Philippines. I authorize the agency head/authorized rep agree that any misrepresentation made in this do administrative/criminal case/s against me.	Republic of the stated herein. I		Computer generated or photocopied picture is not acceptable  PHOTO	
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance  Government Issued ID: TIN  ID/License/Passport No.: 167958366000	Signature (Sign inside the	box)		
Date/Place of Issuance: 06/27/1994 / Baybay,Leyte			Right Thumbmark	
SUBSCRIBED AND SWORN to before me this	, affiant ext Person Administering Oa		ued govern	nment ID as indicated above.