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 INFORMATIC		ate N/A ii not applicable. BO	NOT ABBREVI	AIL.	I. CO ID NO.		(Do not nii up. r	or CSC use only,	
2. SURNAME	Caña								
FIRST NAME	Randy	NAME EXTENSION (JR., SR) N/A							
MIDDLE NAME	Gatchalian								
3. DATE OF BIRTH (mm/dd/yyyy)	04/15/1982	Filipino Dual Citizenship by birth by naturalization					lization		
4. PLACE OF BIRTH	Baybay, Leyte	If holder of dual citize	enship,						
5. SEX	✓ Male Female	please indicate the details.		Philippines					
6. CIVIL STATUS	Single Married Widowed Separated Other/s:			use/Block/Lot No. Gubdivision/Village			Street Guadalupe (Utod) Barangay		
7. HEIGHT (m)	1.62			BAYBAY ity/Municipality			LEYTE Province		
8. WEIGHT (kg)	65.00	ZIP CODE		ty/Municipality 6521			1 TOVINCE		
9. BLOOD TYPE	N/A	18. PERMANENT ADDRESS	Hou	se/Block/Lot No.			Chroat		
10. GSIS ID NO.	N/A						Street		
11. PAG-IBIG ID NO.	N/A			bdivision/Villag		Barangay			
12. PHILHEALTH NO.	N/A	ZIP CODE	C	ity/Municipality			Province		
13. SSS NO.	N/A	19. TELEPHONE NO.		N/A					
14. TIN NO.	N/A		963-052-2832						
15. AGENCY EMPLOYEE NO.	VJO01378	21. E-MAIL ADDRESS (if any)	SS (if any) randy.cana@vsu.edu.ph						
II. FAMILY BACKGROUND									
22. SPOUSE\'S SURNAME	MORENO		23. NAME of CH	IILDREN (Writ	e full name an	d list all)	DATE OF BIRT	H (mm/dd/yyyy)	
FIRST NAME	HANCEY ISABEL NAME EXTENSION (JR., SR)		RANCEY JULIA M. CAÑA			07/20/2005			
MIDDLE NAME	AMIHAN	AMIHAN			JO-ANN LI M. CAÑA				
OCCUPATION			PRINCESS XIANNA M. CAÑA				07/04/2010		
EMPLOYER/BUSINESS NAME			F	FRANCE ISABELA M. CAÑA			09/02/2015		
BUSINESS ADDRESS									
TELEPHONE NO.									
24. FATHER\'S SURNAME	CAÑA								
FIRST NAME	LOLITO	NAME EXTENSION (JR., SR)							
MIDDLE NAME	DELA CRUZ	DELA CRUZ							
25. MOTHER\'S MAIDEN NAME	BABY EMILIANA DIAZ								
SURNAME	CAÑA								
FIRST NAME	BABY EMILIANA								
MIDDLE NAME	DIAZ	(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	N/A								
SECONDARY	N/A								
VOCATIONAL/ TRADE COURSE	N/A								
COLLEGE	N/A								
GRADUATE STUDIES	N/A								
SIGNATURE	(C	Continue on separate sheet if nece	essary)		\TE		01/26/2023		
	1					1			

IV. CIVIL SERVICE ELIGIBILITY									
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER		RATING	DATE OF		LICENSE (if applicable)				
ВА	SPECIAL LAWS/ CES/ CSEE (If Applicable) EXAMINATION		CONFERMENT	PLACE OF EXAMIN	RMENI	NUMBER	Date of Validity		
	N	//A	N/A	N/A	N/A		N/A	N/A	
V WORK	(Continue on separate sheet if necessary) V. WORK EXPERIENCE								
		ent. Start from your recent	t work) Descripti	on of duties should l	be indicated in the attached	d Work Exper			
28. INCLU (mi	JSIVE DATES m/dd/yyyy)	POSITION TITI (Write in full/Do not ab			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	(Willow Hitaliy 50 Hot dis	brovidio			O/L/WY	(Format"00-0")/ INCREMENT	ALT ORTHILLY	(Y/ N)
01/01/2022	PRESENT	Job Order		Visayas	Visayas State University		-	Job Order	Y
				(Continue on separate she	eet if necessary)				
SIGNATURE				DATE		01/26/			
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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)	NUMBER OF HOURS	POSITION / NATURE OF WORK		
N/A		N/A	N/A	N/A		N/A	
		(Continue on separat	e sheet if necessary)				
VII. LEARNING AND DEVELOPMENT (L&D, (Start from the most recent L&D/training program and include	INTERVENTIONS/TRAINING	G PROGRAM	IS ATTENDE	D	agerial positions)		
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)			DATES OF DANCE d/yyyy)	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
5S TRAINING-SEMINAR FOR UTILITY AND ME	SSENGER PERSONNEL	11/24/2022	11/24/2022	8	Managerial	OFFICE OF THE HEAD FOR GENERAL SERVICES	
TESDA- (SMALL ENGINE I	NC2)	08/01/2017	12/30/2017	120	Technical	TESDA BAYBAY	
(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)	
Printing Services	N/A N/A						
Binding Services							
	 	(Continue on separat	e sheet if necessary)				
SIGNATURE				DA	ATE 01/26/2023		

the chief of bureau or office or to the person who has Office, Bureau or Department where you will be appped a. within the third degree? b. within the fourth degree (for Local Government Unit	_	✓NO ✓NO	
^{35.} a. Have you ever been found guilty of any administrati	YES If YES, give details:	✓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 violatio 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, terminati 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)?			
b. Have you resigned from the government service du last election to promote/actively campaign for a nation	YES If YES, give details:	✓ NO	
39. Have you acquired the status of an immigrant or perm	YES If YES, give details (co	☑NO puntry):	
 40. Pursuant to: (a) Indigenous People\'s Act (RA 8371); (7277); and (c) Solo Parents Welfare Act of 2000 (RA 8 a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? 	☐YES If YES, please specify ☐YES If YES, please specify	V NO V NO	
41. REFERENCES (Person not related by consanguinity or affinity to a	pplicant /appointee)		
NAME	ADDRESS	TEL. NO.	ID picture taken within
ULDERICO ALVIOLA	VSU BAYBAY	09778512000	the last 6 months 3.5 cm x 4.5 cm (passport size)
EDITHA G. CAGASAN	VSU BAYBAY		With full and handwritten
JED ASAPH D. CORTES	VSU BAYBAY		name tag and signature over printed name
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 deadministrative/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, Drivert's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: N/A ID/License/Passport No.: N/A Date/Place of Issuance: N/A	Signature (Sign inside the 01/26/2023 Date Accomplished	box)	Right Thumbmark
SUBSCRIBED AND SWORN to before me this	nibiting his/her validly issu	ed government ID as indicated above.	
COSCONDED AND CHIONNY TO DETOIG THE UNIS	Person Administering Oa		ou government ib as indicated above.