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	Castillon
FIRST NAME	Reymar
NAME EXTENSION (JR., SR)	N/A
MIDDLE NAME	Granada
3. DATE OF BIRTH (mm/dd/yyyy)	07/11/1999
4. PLACE OF BIRTH	Brgy. Guadalupe Baybay Leyte
5. SEX	☑ Male ☐ Female
6. CIVIL STATUS	☑ Single ☐ Married ☐ Widowed ☐ Separated ☐ Other/s:
7. HEIGHT (m)	1.68
8. WEIGHT (kg)	65.00
9. BLOOD TYPE	O
10. GSIS ID NO.	N/A
11. PAG-IBIG ID NO.	121295692487
12. PHILHEALTH NO.	130255887115
13. SSS NO.	N/A
14. TIN NO.	6066898720000
15. AGENCY EMPLOYEE NO.	VJO02137
16. CITIZENSHIP	☑ Filipino ☐ Dual Citizenship ☐ by birth ☐ by naturalization
If holder of dual citizenship, please indicate the details.	Pls. indicate country: **Philippines**
17. RESIDENTIAL ADDRESS	00000 (House/Block/Lot No.) Brgy. Guadalupe Baybay City Leyte (Street); UTOD (Subdivision/Village) Guadalupe (Utod) (Barangay); BAYBAY (City/Municipality) LEYTE (Province)
ZIP CODE	6521
18. PERMANENT ADDRESS	Brgy. Guadalupe Baybay City Leyte (Street); UTOD (Subdivision/Village) Guadalupe (Utod) (Barangay); BAYBAY (City/Municipality) LEYTE (Province)
ZIP CODE	6521
19. TELEPHONE NO.	N/A
20. MOBILE NO.	997-256-1857
21. E-MAIL ADDRESS (if any)	reymar.castillon@vsu.edu.ph

II. FAMILY BACKGROUND

22. SPOUSE\'S SURNAME	N/A		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	N/A	NAME EXTENSION (JR., SR) N/A	N/A	N/A
MIDDLE NAME	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER\'S SURNAME	Castillon			
FIRST NAME	Reynaldo	NAME EXTENSION (JR., SR)		
MIDDLE NAME	Granada			
25. MOTHER\'S MAIDEN NAME	Maria Victoriana C. Granada			
SURNAME	Castillon			
FIRST NAME	Maria Victoriana			
MIDDLE NAME	Granada		*(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	To	HIGHEST LEVEL/UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
ELEMENTARY	N/A						
SECONDARY	Baybay High School	High School	2018	2019		2019	N/A
VOCATIONAL/ TRADE COURSE	N/A						
COLLEGE	N/A						
GRADUATE STUDIES	N/A						

(Continue on separate sheet if necessary)

SIGNATURE		***DATE***	03/10/2025

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
N/A	N/A	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						
03/01/2022	PRESENT	Cabler	ICTMC, Visayas State University	568.00	-	Job Order	N
09/26/2020	07/22/2021	Technical Support	Globelines Telecom	5.00	33-	Job Order	N

(Continue on separate sheet if necessary)

SIGNATURE		DATE	03/10/2025

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		
Kabalikat Civicom Baybay City	06/29/2022	PRESENT	1	Watchman

(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			
Basic Life Support-CPR 2020 Guidelines with AED, FBAO for Healthcare Workers, and Standard First Aid Training.	03/04/2024	03/06/2024	24	Technical	"Visayas State University (VSU), Visca, Baybay City, Leyte "
5S Revolution for Clerks & Heads	11/28/2023	11/29/2023	24	Technical	"Visayas State University (VSU), Visca, Baybay City, Leyte "
Paralegal-Training for Fishery Law Enforcement Team	08/01/2023	08/01/2023	22	Technical	Baybay City Division

(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***	03/10/2025

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.
Reymar G. Castillon	Brgy. Guadalupe Baybay City Leyte	09972561857

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: **TIN**
ID/License/Passport No.: **6066898720000**
Date/Place of Issuance: 03/21/2022 / BAYBAY LEYTE

Signature (Sign inside the box)
03/10/2025
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