CS Form No. 212 Revised 2025

## **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.

	ILLING OUT THE PERSONAL DATA SHEET (PDS) BE			ATE	1. CS ID No.		/De not fill F	CCC		
Print legibly. Tick appropriate boxe  I. PERSONAL INFORMATION		ate N/A ii not applicable. DO	NOI ABBREVI	AIE.	1. CS ID NO.		(Do not fill up. F	or CSC use only		
2. SURNAME	MANAGBANAG									
FIRST NAME	MARLO		NAME EXTENSION (JR., SR) N/A							
MIDDLE NAME	LAPINIG									
3. DATE OF BIRTH (mm/dd/yyyy)	08/13/1977	Filipino Dual Citizenship by birth by naturalization								
4. PLACE OF BIRTH	Brgy. Pangasugan Baybay City, Leyte If holder of dual citizen			Pls. indicate country:						
5. SEX AT BIRTH	✓ Male Female	please indicate the d	etails.	Philippines						
6. CIVIL STATUS	☐ Single ☑ Married ☐ Separated ☐ Other/s:	17. RESIDENTIAL ADDRESS	House/Block/Lot No. PUROK 4 Subdivision/Village				Street Pangasungan Barangay			
7. HEIGHT (m)	3.00		BAYBAY  City/Municipality			LEYTE  Province				
8. WEIGHT (kg)	85.00	ZIP CODE		у, татораку		6521	7.70111100			
9. BLOOD TYPE	0+	18. PERMANENT ADDRESS	Hou	House/Block/Lot No.			Street			
10. UMID ID NO.			PUROK 4 Subdivision/Village		Pangasungan <i>Barangay</i>					
11. PAG-IBIG ID NO.	121201331755		BAYBAY  City/Municipality			LEYTE  Province				
12. PHILHEALTH NO.	132002411222	ZIP CODE				6521				
13. PHilSys NO. (PSN)		19. TELEPHONE NO.			N/A					
14. TIN NO.	280808693000		926-800-4272							
15. AGENCY EMPLOYEE NO.	V02209 21. E-MAIL ADDRESS (if			mario.managbanag@vsu.edu.ph						
II. FAMILY BACKGROUND										
22. SPOUSE\'S SURNAME	Managbanag		23. NAME of CH	f CHILDREN (Write full name and list all)  DATE OF BIRTH (mm/dd/yyyyy)						
FIRST NAME	Rowena	NAME EXTENSION (JR., SR)		Chelsea I. Managbanag 11/01/200				1/2003		
MIDDLE NAME	lyana		Kean Marl I. Managbanag 06				1/2005			
OCCUPATION	OFW									
EMPLOYER/BUSINESS NAME										
BUSINESS ADDRESS										
TELEPHONE NO.										
24. FATHER\'S SURNAME	Managbanag									
FIRST NAME	Mario	IVAINE EXTENSION (U.S., OIL)								
MIDDLE NAME	P.									
25. MOTHER\'S MAIDEN NAME	Lucena L. Lapinig									
SURNAME	Managbanag									
FIRST NAME	Lucena									
MIDDLE NAME	Lapinig			(Continue on separate sheet if necessary)						
III. EDUCATIONAL BACKG	1 -									
00	GROUND			I		HIGHEST		SCHOLARSHIP/		
26. LEVEL	1 -	BASIC EDUCATION/DEGR (Write in full)	EE/COURSE	PERIOD OF A	ATTENDANCE To	HIGHEST LEVEL/UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED		
26. LEVEL ELEMENTARY	ROUND NAME OF SCHOOL		EE/COURSE			LEVEL/UNITS EARNED		ACADEMIC HONORS		
LEVEL	NAME OF SCHOOL (Write in full)		EE/COURSE			LEVEL/UNITS EARNED		ACADEMIC HONORS		
ELEMENTARY	NAME OF SCHOOL (Write in full)	(Write in full)	EE/COURSE	From	То	LEVEL/UNITS EARNED	GRADUATED	ACADEMIC HONORS RECEIVED		
ELEMENTARY SECONDARY	NAME OF SCHOOL (Write in full)  N/A  Bunga National High School	(Write in full)	EE/COURSE	From	То	LEVEL/UNITS EARNED	GRADUATED	ACADEMIC HONORS RECEIVED		
ELEMENTARY  SECONDARY  VOCATIONAL/ TRADE COURSE	NAME OF SCHOOL (Write in full)  N/A  Bunga National High School  N/A  N/A  N/A	(Write in full)		From	То	LEVEL/UNITS EARNED	GRADUATED	ACADEMIC HONORS RECEIVED		

IV. CIVIL	SERVICE I	ELIGIBILITY							
27. CES/CSEE/CAREER SERVICE/RA 1080 (BOARD/ BAR)/UNDER SPECIAL LAWS/CATEGORY II/ IV ELIGIBILITY and ELIGIBILITIES FOR UNIFORMED PERSONNEL		RATING DATE OF EXAMINATION / CONFERMENT			DI AOS OS SYAMBLE	LICENSE (if a	LICENSE (if applicable)		
					PLACE OF EXAMINA	ATION / CONFERMENT	NUMBER	Valid Until	
NC II – Driving			N/A		1	N/A	N/A	N/A	
V. WORK	EXPERIEI	NCE		(Continue on	separate she	eet if necessary)			
		ent. Start from your recent	work) Descriptio	n of dutie:	s should	be indicated in the attache	d Work Experience sheet.	_	
28. INCLU	SIVE DATES m/dd/yyyy)	POSITIO (Write in full/Do			DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)			STATUS OF APPOINTMENT	GOV'T SERVICE
From	То	(White iii idiii)	not abbreviate)			(Wille III Idii/Do Hot t	abbreviate)	ALT ONVIWENT	(Y/ N)
07/01/2025	12/31/2025	Drive	er II			Visayas State U	niversity	Contractual	Y
01/01/2025		Drive	er II			Visayas State U	niversity	Contractual	Y
01/01/2025		Drive	er II			Visayas State U	niversity	Contractual	Y
11/04/2024	06/30/2025	Driver II				Visayas State U	Contractual	Y	
				(Continue on	separate sh	eet if necessary)			
SIGNA	ATURE			and on		DATE	12/0	9/2025	
0.0							CS FORM 212 (Revised 2	017). Page 2 of 4	

I. 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		
N/A		N/A	N/A	N/A		N/A		
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)		ATTEN (mm/d	DATES OF IDANCE d/yyyy)	NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)		
PRODUCTION OF BOIFU	ELS	05/22/2019	To 05/22/2019	8	Technical	"Visayas State University (VSU), Visca, Baybay City, Leyte "		
Stress and Stress Manager	nent	09/24/2014	09/24/2014	8	Technical	"Visayas State University (VSU), Visca, Baybay City, Leyte "		
Seminar on Fire Preventi	on	03/30/2012	03/30/2012	8	Technical	"Visayas State University (VSU), Visca, Baybay City, Leyte "		
		0						
VIII. OTHER INFORMATION		Continue on separat	te sheet if necessary)					
31. SPECIAL SKILLS and HOBBIES	32. NC	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)						
Carpentry		GUARDIANS BROTHERHOOD INCORPORATED						
Driving								
Cooking								
SIGNATURE		Continue on separat	te sheet if necessary)		NTE	12/09/2025		
						00 F0RM 040 (Paris of 0047). Page 2 of		

34	Are you related by consanguinity or affinity to the appoin the chief of bureau or office or to the person who has important or Department where you will be apppoint the chief of the person who has important to the person where the person who has important to the person where the person					
	a. within the third degree? b. within the fourth degree (for Local Government Unit - 0	☐YES ☐YES  If YES, give details:	✓ NO			
35	a. Have you ever been found guilty of any administrative	YES If YES, give details:	✓NO			
	b. Have you been criminally charged before any court?	☐YES  If YES, give details:  Date Filed:  Status of Case/s:	NO		<u> </u>	
36.	Have you ever been convicted of any crime or violation or regulation by any court or tribunal?	YES If YES, give details:	✓ NO			
37.	Have you ever been separated from the service in any or retirement, dropped from the rolls, dismissal, termination 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 local (except Barangay election)?	YES If YES, give detail	✓ NO S:		_	
	b. Have you resigned from the government service durin last election to promote/actively campaign for a national	YES If YES, give detail	<b>✓</b> NO S:		_	
39.	Have you acquired the status of an immigrant or perman	YES If YES, give details (	✓NO country):		_	
40	Pursuant to: (a) Indigenous People\'s Act (RA 8371); (b) 7277); and (c) Solo Parents Welfare Act of 2000 (RA 897)					
a.	Are you a member of any indigenous group?		YES	<b>✓</b> NO		
b.	Are you a person with disability?	If YES, please speci YES If YES, please speci	<b>✓</b> NO		_	
C.	Are you a solo parent?	YES If YES, please speci	✓ NO fy ID No		_	
41	. REFERENCES (Person not related by consanguinity or affinity to appli	cant /appointee)				
	NAME	OFFICE / RESIDENTIAL ADDRESS	CONTACT NO. AND/OR EMAIL			
	Marlon G. Burlas	Director, GSO	09176341527			
	Alicia M. Flores	Head, Budgeting Office	09064987422		Passport-sized unfiltered digital picture taken within	
	Elwin Jay V. Yu	09604492733		the last 6 months 4.5 cm. X 3.5 cm		
42	I declare under oath that I have personally accomplishe complete statement pursuant to the provisions of pertiin Philippines. I authorize the agency head/authorized representation made in this doct administrative/criminal case/s against me.	Republic of the stated herein. I		РНОТО		
						٦
	Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Drivert's License, ttc.) PLEASE INDICATE ID Number and Date of Issuance					
╽┟	Government Issued ID: DL					
H	D/License/Passport No.: H1209000194	box)				
	Date/Place of Issuance: 08/13/2022 / Baybay City			Right Thumbmark		
	SUBSCRIBED AND SWORN to before me this	, affiant ext	nibiting his/her validly iss	sued gove	rnment ID as indicated above.	
		ath				