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.

1	LLING OUT THE PERSONAL DATA SHEET (PDS) BE								
Print legibly. Tick appropriate boxes I. PERSONAL INFORMATIO		ate N/A if not applicable. DO I	NOT ABBREVI	ATE.	1. CS ID No.		(Do not fill up. F	or CSC use only	
2. SURNAME	Bandalan								
FIRST NAME	Lito Antonio					NAME EXTENSION (J	R., SR) N/A		
MIDDLE NAME	Bayno						1071		
3. DATE OF BIRTH (mm/dd/yyyy)	05/12/1996	16. CITIZENSHIP		✓ Filip	oino _	Dual Citizenshi	p		
		-				by birth	by natura	alization	
4. PLACE OF BIRTH	Baybay, Leyte	If holder of dual citize	•			Pls. indicate of	country:		
5. SEX AT BIRTH	✓ Male Female	please indicate the de	etails. Philippines						
6. CIVIL STATUS	✓ Single			ise/Block/Lot No. bdivision/Village			Street San Isidro Barangay		
7. HEIGHT (m)	1.62			BAYBAY			LEYTE		
8. WEIGHT (kg)	66.00	ZIP CODE	Ci	ity/Municipality	<u> </u>	6521	Province		
9. BLOOD TYPE	N/A	18. PERMANENT ADDRESS							
	, was	_	Hou	se/Block/Lot N	lo.		Street		
10. UMID ID NO.		-	Subdivision/Village			Barangay			
11. PAG-IBIG ID NO.	N/A		Ci	ity/Municipality	/		Province		
12. PHILHEALTH NO.	N/A	ZIP CODE							
13. PHilSys NO. (PSN)	3791320697258602	19. TELEPHONE NO.				N/A			
14. TIN NO.	758739111	20. MOBILE NO.			961-750-1866				
15. AGENCY EMPLOYEE NO.	V02967	21. E-MAIL ADDRESS (if any)			anton.band	dalan@vsu.edu.p	oh		
II. FAMILY BACKGROUND									
22. SPOUSE\'S SURNAME	N/A		23. NAME of CH	IILDREN (Wri	te full name an	d list all)	DATE OF BIRT	ΓΗ (mm/dd/yyyy)	
FIRST NAME	N/A	NAME EXTENSION (JR., SR) N/A			N/A		١	I/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	Bandalan	NAME EXTENSION (JR., SR)							
FIRST NAME	Lito	NAME EXTENSION (JR., SR)							
MIDDLE NAME	Perez								
25. MOTHER\'S MAIDEN NAME	Bayno								
SURNAME	Bandalan								
FIRST NAME	Bienvenida								
MIDDLE NAME				(0	Continue on se _l	parate sheet if neces	ssary)		
III. EDUCATIONAL BACKG. 26.				DEBIOD OF	ATTENDANCE	HIGHEST		SCHOLARSHIP/	
LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGRI (Write in full)	EE/COURSE	From	To	LEVEL/UNITS EARNED (if not graduated)	YEAR GRADUATED	ACADEMIC HONORS RECEIVED	
ELEMENTARY	Candadam Elementary School	Elementary		2002	2008	Graduated	2008	N/A	
SECONDARY	Visayas State University Laboratory High School	High School		2008	2012	Graduated	2012	N/A	
VOCATIONAL/ TRADE COURSE	N/A								
COLLEGE	Visayas State University	Bachelor of Science in Agr	ibusiness	2012	2019	Graduated	2019	N/A	
GRADUATE STUDIES	N/A				<u></u>	<u> </u>	<u>L</u> _		
	Į(Continue on separate sheet if nece	essary)			Γ			
SIGNATURE	I			DA	ATE	1	11/14/2025		

IV. CIVIL SERVICE ELIGIBILITY									
27. CES/CSEE/CAREER SERVICE/RA 1080 (BOARD/ BAR)/UNDER SPECIAL LAWS/CATEGORY II/ IV ELIGIBILITY and ELIGIBILITIES FOR UNIFORMED PERSONNEL		RATING DATE EXAMINA CONFER					LICENSE (if applicable)		
								Valid Until	
CSC Professional		80.06	03/13/2022		LNU Ta	cloban City	N/A	N/A	
				(Continue on	separate sh	eet if necessary)			
	EXPERIEI	NCE nent. Start from your recent	work) Description	on of dutie	s should	he indicated in the attache	d Work Evnerience sheet		
28. INCLU	ISIVE DATES			ni oi dalle.	3 Siloulu			071710 05	GOV'T
From	m/dd/yyyy) To	POSITIO (Write in full/Do				DEPARTMENT / AGENCY / C (Write in full/Do not a		STATUS OF APPOINTMENT	SERVICE (Y/N)
07/01/2025	PRESENT	Administrat	ive Aide III			Visayas State U	niversity	Permanent	Y
07/01/2025		Administrat	ive Aide III			Visayas State U		Permanent	Y
01/01/2023	06/30/2023	Administrat	ive Aide III			Visayas State U	niversity	Job Order	Υ
01/01/2023	06/30/2023	Administrat	ive Aide III			Visayas State U	niversity	Job Order	Y
SIGN	ATURE			(Continue on	separate sh	eet if necessary) DATE	11/14	2025	
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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) To	NUMBER OF HOURS	POSITION / NATURE OF WORK			
N/A		N/A	N/A	N/A		N/A		
		(Continue on separat	te 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)	agerial positions)			
		INCLUSIVE	DATES OF		Type of LD	CONDUCTED/ CDONCODED BY		
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)			IDANCE d/yyyy) 	NUMBER OF HOURS	(Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)		
N/A		From N/A	To N/A	N/A	N/A	N/A		
		Continue on separa	te sheet if necessary)					
VIII. OTHER INFORMATION								
31. SPECIAL SKILLS and HOBBIES	32. NC	(W	TINCTIONS / RECO	OGNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)		
N/A		N.	/A			N/A		
_								
		(Continue on separa	te sheet if necessary)					
SIGNATURE				DA	DATE 11/14/2025			

34. Are you related by consanguinity or affinity to the appoint the chief of bureau or office or to the person who has imr Office, Bureau or Department where you will be apppoint	nediate supervision over you in the			
a. within the third degree?	YES	NO		
b. within the fourth degree (for Local Government Unit - 0	YES If YES, give details:	NO		
		II TES, give details.		
35. a. Have you ever been found guilty of any administrative	offense?	YES	NO	
a. Have you ever been found guilty of any autilinistrative	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 Hayayayayayahaan aan istad af any siina ay islatian a	f any law dagger and name on	YES	NO	
36. Have you ever been convicted of any crime or violation o regulation by any court or tribunal?	f any law, decree, ordinance or	If YES, give details:	Шио	
37. Have you ever been separated from the service in any of	the following modes: resignation.	YES	NO	
retirement, dropped from the rolls, dismissal, termination,		If YES, give details:	_	
phased out (abolition) in the public or private sector?				
38. a. Have you ever been a candidate in a national or local (except Barangay election)?	election held within the last year	YES If YES, give detail	NO s:	
b. Have you resigned from the government service during	the three (3)-month period before the	YES	NO	
	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?			
39. Have you acquired the status of an immigrant or permane	ent 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 Parsons (PA			
7277); and (c) Solo Parents Welfare Act of 2000 (RA 897				
a. Are you a member of any indigenous group?		YES places eneci	No	
b. Are you a person with disability?	If YES, please speci YES If YES, please speci	NO		
	, no jeu a posesi mai alcazimij.			
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 applie	cant /appointee)			
NAME	OFFICE / RESIDENTIAL ADDRESS	CONTACT NO.		
IVAIVIE	OFFICE / RESIDENTIAL ADDRESS	AND/OR EMAIL		
Honey Sofia V. Colis	Guadalupe, Baybay City, Leyte			
Miriam M. De La Torre	Hipusngo, Baybay City, Leyte			Passport-sized unfiltered digital picture taken within
				the last 6 months 4.5 cm. X 3.5 cm
42. I declare under oath that I have personally accomplished	Language Language	rue, correct and		
complete statement pursuant to the provisions of pertir Philippines. I authorize the agency head/authorized representations.				
agree that any misrepresentation made in this docu				РНОТО
administrative/criminal case/s against me.				
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driverl's License,				
etc.) PLEASE INDICATE ID Number and Date of Issuance				
Government Issued ID: DL				
ID/License/Passport No.: H1219003701	box)			
Date/Place of Issuance: 05/12/2024 / LTO Baybay City, Leyte	Right Thumbmark			
SUBSCRIBED AND SWORN to before me this	affiant ov	nihiting his/hor validly iss	ruod govo	rnment ID as indicated above.
CODOCIVIDED AIAD CAACULA (O DEIGLE LIIE (LIIS	, aniant exi	morning morner validity is	ueu yove	mment id as indicated above.
	ath			