PERSONAL DATA SHEET

concerned.	TO SULUDO OUT THE REPORTED DATA OF	Sec. 1.07.110				immai casars ag	junist the per	3011
	TO FILLING OUT THE PERSONAL DATA SHOWS () 1 use separate sheet if necessary. Indicate				1. CS ID No.	Mattach Riner	(Do not fill up. I	For CSC use only)
I. PERSONAL INFORMATIO								
2. SURNAME	BARBOSA							
FIRST NAME	MARISSA					NAME EXTENSION (JR	, SR)	
MIDDLE NAME	BAAY							
DATE OF BIRTH (mm/dd/yyyy)	12/12/1994	16. CITIZENSHIP		✓ Filip	pino [Dual Citizenship		
4. PLACE OF BIRTH	BAYBAY, LEYTE	If holder of dual citizenship,		by birth Pls. indicate		Pls. indicate of	by naturalization country:	
5. SEX	Maie Female	please indicate the details.						
6 CIVIL STATUS	✓ Single Married Widowed Separated Other/s:	17. RESIDENTIAL ADDRESS	Но	ouse/Block/Lot N	Vo.		Street Guadalupe	
7. HEIGHT (m)	1.53m	er in dissel freezionia.	Subdivision/Village Baybay City		Barangay Leyte			
		710,0005		City/Municipality	ality		Province	
8. WEIGHT (kg)	44Kg	ZIP CODE 18. PERMANENT ADDRESS		657		6521-A		
9. BLOOD TYPE	A	16. I ENWAVERT ADDITESS	House/Block/Lot No.			Street		
10. GSIS ID NO.	BP No. 2005073257	Indicate answer	S	ubdivision/Villag	ge	Guadalupe Barangay		
11. PAG-IBIG ID NO.	916337615760	Ned page Apace Trans		Baybay City/Municipality	CONTRACTOR OF THE PARTY OF THE	Leyte .		
12. PHILHEALTH NO.	1300-0122-0641	ZIP CODE	6521-A					
13. SSS NO.	NA	19. TELEPHONE NO.		NA				
14. TIN NO.	332-828-929	20. MOBILE NO.		09504489505				
15. AGENCY EMPLOYEE NO.	V00931	21. E-MAIL ADDRESS (if any)		marissa.barbosa@vsu.edu.ph				
II. FAMILY BACKGROUND								
22. SPOUSE'S SURNAME	NA		23. NAME of C	HILDREN (Wr	ite full name and	d list all)	DATE OF BIR	TH (mm/dd/yyyy)
FIRST NAME	NA	NAME EXTENSION (JR., SR)			NA			NA
MIDDLE NAME	NA							
OCCUPATION	NA				***************************************			***************************************
EMPLOYER/BUSINESS NAME	NA							
BUSINESS ADDRESS	NA							
TELEPHONE NO.	NA							
24. FATHER'S SURNAME	Barbosa							
FIRST NAME	Marcelino	SR.						
MIDDLE NAME	Mendez							
25. MOTHER'S MAIDEN NAME								
SURNAME	Baay							
FIRST NAME	Eleuteria							
MIDDLE NAME	Paangay			(C	ontinue on ser	parate sheet if neces	earyl	
III. EDUCATIONAL BACKS				· ·	onande on sej		.cary)	
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	Guadalupe Elemetary School	Primary		6/16/2003	3/30/2008		2008	Valedictorian
SECONDARY	VSU- Laoratory High School	Secondary		6/6/2008	4/4/2012		2012	With High Honor
VOCATIONAL / TRADE COURSE	N/A	N/A		N/A	N/A		N/A	N/A
COLLEGE	Visayas State University	BS. Agriculture major in Plant Breeding		6/8/2012	4/11/2016		2016	Magna Cum
GRADUATE STUDIES	Swedish University of Agricultural Sciencesand Ege University	Master of Science in Plan	t Breeding	8/1/2018	On-going		On-going	Laude
3 80		Continue on separate sheet if nec	and the second		9		33	
SIGNATURE	(hees/a-	t de la composition della comp		Di	ATE	A	ıgust 2, 2019)
	- J F					CS	FORM 212 (Revise	ed 2017), Page 1 of 4

7. CAF	REER SERVICE/ RA 10	80 (BOARD/ BAR) UNDER	RATING	DATE OF	10 72 30 0300 Aug	· ·		LICENSE (if a	pplicable)
E	SPECIAL LAW BARANGAY ELIGIBILIT	'S/ CES/ CSEE Y / DRIVER'S LICENSE	(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMIN	ATION / CONFE	RMENT	NUMBER	Date o
	Career Service Eligibility N/A		N/A	4/11/2016	Visayas State Univer	sity, Byabay	N/A	N/A	
Agriculturist Licensure Examination		83.5	Nov 27-29, 2018	oan, Leyte		N/A	N/A		
							1809-1		
	EXPERIENCE	Stand from Louis Process		ntinue on separate sheet					
INC	CLUSIVE DATES (mm/dd/yyyy)	POSITION T (Write in full/Do not	ITLE	DEPARTMENT / AGE	indicated in the attached ENCY / OFFICE / COMPANY //Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/	STATUS OF APPOINTMENT	GOV'T SERVIC
From	То			Dept of Plant Br	eeding and Genetics,	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	INCREMENT		(Y/N)
5/2016 B/2016	Present	Instructo		Visayas S Dept of Plant Br	State University reeding and Genetics,	22, 938.00	12	Temporary	Y
1/2016	9/5/2016	Plant Microns		Visayas S	State University	11, 700.00	12	Partime	Y
12010	0/31/2016	Plant Micropro	pagator	National Abac	ca Research Center	6000.00	3	Job-Order	Y
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		the state of the state of				3 7			
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-6,200) -6,000					10000	800.0	2		
i Ri e				3.412.027					
4/3/			fire	Control of the contro					
SIGN	NATURE		1	ntinue on separate sheet			August 2 201	9	
SIGN	NATURE		And A		DATE		August 2, 201	9 FORM 212 (Revised 2)	017) /

. 7	•	_					
VI. VOLUNTARY	WORK OR INVOLVEMENT IN	CIVIC/GOVERNMEN	T/PEOPLE/	VOLUNTARY	ORGANIZATIL		
29.	NAME & ADDRESS OF ORGA (Write in full)	NIZATION		SIVE DATES n/dd/yyyy) To	NUMBER OF HOURS		POSITION / NATURE OF WORK
	NONE						
					2 7		
				1			
VII. LEARNING A	ND DEVELOPMENT (L&D) IN	(C TERVENTIONS/TRAINING I	continue on separa PROGRAMS A	te sheet if necession	ary)		
Start from the most rec	ent L&D/training program and include on	ly the relevant L&D/training taken for			nief/Executive/Manage	rial positions)	
30. TITLE OF	TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAI (Write in full)		INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/	CONDUCTED/ SPONSORED BY (Write in full)
			From	То		Technical/etc)	(Find a ron)
	ling of Newly Hired Regular and Pari	-time Faculty	3/9/2017	3/10/2017	16.0	Technical	Office of the President (VSU)
Money and Manageri	al and Leadership Training		1/31/2015	1/31/2015	8.0	Technical	University Student Services Office
			-	-			
	****		Para.				
		1					
1							
		99 1					
			7 7 7				
		(Continue on separa	nte sheet if necess	ary)		
VIII. OTHER INF	ORMATION		NON-ACADEMIC DIS	STINCTIONS / REC	COGNITION		MEMBERSHIP IN ASSOCIATION/ORGANIZATION
31. SPE	CIAL SKILLS and HOBBIES	32.	(V	Vrite in full)		Note the second second	33. (Write in full)
	omputer Skills		N	ONE			VSU Faculty Association Erasmus Mundus Alumni Association-Phi
	Communication Skills Schedule Management				Erasmus Mundus Association-SEA Chapte		
	dule Management Poetry Writing						The state of the s
	gorizing Records						
5410			Al-				
			9				
	NOMATIES.		(Continue on sepa	rate sheet if neces		DATE	August 2, 2019
	SIGNATURE		60/1	30 100			CS FORM 212 (Revised 2017), Page 3

				7 E		
chie	you related by consanguinity or affinity to the inting of for bureau or office or to the person who has immediate seau or Department where you will be apppointed,					
	ithin the third degree?		YES NO	•		
b. w	ithin the fourth degree (for Local Government Unit - Care	YES NO				
		If YES, give details:				
35. a. H	ave you ever been found guilty of any administrative offer	YES NO If YES, give details:				
b. H	ave you been criminally charged before any court?		YES VO			
			If YES, give details:			
			Date Filed: Status of Case/s:			
as Hou	re you ever been convicted of any crime or violation of any	Jaw decree ordinance or regulation by				
	court or tribunal?	riaw, decree, ordinance of regulation by	☐ YES ☑ NO If YES, give details:)		
dro	re you ever been separated from the service in any of the oped from the rolls, dismissal, termination, end of term, fin public or private sector?	following modes: resignation, retirement, ished contract or phased out (abolition) in	YES)		
	lave you ever been a candidate in a national or local elect	ion held within the last year (except	☐ YES ✓	NO		
Bar	angay election)?		If YES, give details:			
	lave you resigned from the government service during the ction to promote/actively campaign for a national or local c	If YES, give details:	NO			
39. Hav	ve you acquired the status of an immigrant or permanent r	YES If YES, give details (country				
40. Pur	suant to: (a) Indigenous People's Act (RA 8371); (b) Magn I (c) Solo Parents Welfare Act of 2000 (RA 8972), please	na Carta for Disabled Persons (RA 7277);				
	you a member of any indigenous group?	answer the following terms.	☐ YES ☑	NO		
			If YES, please specify:	-		
b. Are	you a person with disability?		☐ YES ☑ If YES, please specify ID No:	NO		
c. Are	you a solo parent?	YES VID NO				
44 . DEE	FORMER OF		IT YES, please specify ID No:			
41. REF	ERENCES (Person not related by consanguinity or affinity to applicant. NAME		T- 10			
	Dilberto O. Ferraren	ADDRESS Visca, Baybay City, Leyte	9266111455			
	Luz O. Moreno	Visca, Baybay City, Leyte	9164239381			
	Patricio P. Prieto					
42 1 de	eclare under oath that I have personally accomplished	Brgy. Patag, Baybay City, Leyte	9053492241			
com Phil agre	applete statement pursuant to the provisions of pertine ippines. I authorize the agency head/authorized represented that any misrepresentation made in this documents in the interval of the i	ent laws, rules and regulations of the ntative to verify/validate the contents state	Republic of the ed herein.	BARBOSH MINISSH PHOTO		
Govern PLEAS	iment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) E INDICATE ID Number and Date of Issuance			er Sterre Sterre Agent also Stefre		
Govern	ment Issued ID: VSU ID	d'A				
ID/Licen	se/Passport No.: V00931	Signature (Sign inside the b	nx)	4.		
Date/Pla	ace of Issuance: 9/6/16 VSU, Baybay City, Leyte	ANG. S. 2019 Date Accomplished	un)	Right Thumbmark		
	SUBSCRIBED AND SWORN to before me this	AUG 7010	iting his/her validly issued governr			
		A /	g marror validly looded govern			
		ATTY. RYSAN C JUINOCOR				
		VSU LEGALerson Administering Oath				