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	GONZAGA
FIRST NAME	JOHN WILFRED G. GONZAGA
NAME EXTENSION (JR., SR)	
MIDDLE NAME	GLORIA
3. DATE OF BIRTH (mm/dd/yyyy)	Sept. 15,1988
4. PLACE OF BIRTH	SAN AGUSTIN BAYBAY LEYTE
5. SEX	☑ Male ☐ Female
6 CIVIL STATUS	☑ Single ☐ Married ☐ Widowed ☐ Separated ☐ Other/s:
7. HEIGHT (m)	5'2
8. WEIGHT (kg)	50kl
9. BLOOD TYPE	N/A
10. GSIS ID NO.	N/A
11. PAG-IBIG ID NO.	1212-0544-0495
12. PHILHEALTH NO.	13-025212375-0
13. SSS NO.	N/A
14. TIN NO.	763-696-959
15. AGENCY EMPLOYEE NO.	

16. CITIZENSHIP	☑ Filipino ☐ Dual Citizenship ☐ by birth ☐ by naturalization
If holder of dual citizenship, please indicate the details.	Pls. indicate country:
17. RESIDENTIAL ADDRESS	ZONE 02 / House/Block/Lot No. / Street: PATAG / Subdivision/Village / Barangay: LEYTE / City/Municipality / Province
ZIP CODE	
18. PERMANENT ADDRESS	ZONE 02 / House/Block/Lot No. / Street: PATAG / Subdivision/Village / Barangay: LEYTE / City/Municipality / Province
ZIP CODE	6521
19. TELEPHONE NO.	N/A
20. MOBILE NO.	09702643813
21. E-MAIL ADDRESS (if any)	john.gonzaga@vsu.edu.ph

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	NAME EXTENSION (JR., SR)	GREY JOHN AIZEN S. GONZAGA	July 31,2017
MIDDLE NAME		FLINT JOHN ZELDRIS S. GONZAGA	May 2,2020
OCCUPATION			
EMPLOYER/BUSINESS NAME			
BUSINESS ADDRESS			
TELEPHONE NO.			
24. FATHER'S SURNAME	GONZAGA		
FIRST NAME	WILFREDO / NAME EXTENSION (JR., SR)		
MIDDLE NAME	BORRI		
25. MOTHER'S MAIDEN NAME			
SURNAME	CASTAÑARES		
FIRST NAME	ROSALINA		
MIDDLE NAME	GLORIA	(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	PERIOD OF ATTENDANCE To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
ELEMENTARY	SAN AGUSTIN ELEMENTARY SCHOOL	PRIMARY SCHOOL			GRADUATE	2001	N/A
SECONDARY	BUNGA NATIONAI HIGH SCHOOL	SECONDARY SCHOOL			GRADUATE	2005	N/A
VOCATIONAL / TRADE COURSE	ATI BAYBAY CITY	(TESDA) NCII HOUSEKEEPING			GRADUATE	2019	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BS HRTM			4th yr College	Undergrad	N/A
GRADUATE STUDIES	N/A						

(Continue on separate sheet if necessary)

SIGNATURE		DATE	NOV. 29, 2022

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

(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						
July 5,2011	Nov.3,2013	**Waiter**	**Captains Grill & Restobar**	**1,800 per mons.**		**j.o**	**N**
May 3,2014	Jan. 15,2022	**Room Attendant & Utilitty Messenger**	**VSU Hostel**	**5,600 per mons.**		**j.o**	**N**
Feb. 2,2022	Present	**Laboratory Aide & Utility Messenger**	**College of Nursing**	**9,961.2 per mons.**		**j.o**	**Y**

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		

(Continue on separate sheet if necessary)

VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

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			
Re-Orientation of Employee's Duties and Responsibilities and Good Customer Service	**Sept.23,2021**	**Sept.23,2021**	**4 hrs**	**Managerial**	**ODAHRM**
Re-Orientation on Front Office and Housekeeping Service	**Oct.10,2018**	**Oct.10,2018**	**8 hrs**	**Managerial**	**IGP**
INFINITE ESCAPES REBOOT:Reenforcing Competencies of Eastern Visayas Tourism Players	**July 28,2020**	**July 29,2020**	**16 hrs**	**Managerial**	**DOT**

(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)
Basic computer document processing		
Basic Plumbing		
Landscaping		
Housekeeping		
Messengerial		
utility work		

(Continue on separate sheet if necessary)

SIGNATURE		DATE	NOV. 29, 2022

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.
JOEL REY U. ACOB	**Albuera Leyte**	**9569161146**
JESUSA M. MAGNO	**Carigara Leyte**	**9351912182**
PHOEBE LYNN B. CALUNGSOD	**VSU Asean Houses**	**9325339007**

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:	**763-696-959**
ID/License/Passport No.:	
Date/Place of Issuance:	**BIR ORMOC 02/20/2020**

Signature (Sign inside the box)
Nov. 29, 2022
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