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	MODINA
FIRST NAME	HENRY
NAME EXTENSION (JR., SR)	N/A
MIDDLE NAME	POSAS
3. DATE OF BIRTH (mm/dd/yyyy)	DECEMBER 19, 1961
4. PLACE OF BIRTH	BO. MARCOS BAYBAY CITY, LEYTE
5. SEX	☑ Male ☐ Female
6. CIVIL STATUS	☐ Single ☑ Married ☐ Widowed ☐ Separated ☐ Other/s:
7. HEIGHT (m)	1.73
8. WEIGHT (kg)	67 kg.
9. BLOOD TYPE	"A"
10. GSIS ID NO.	LP 61121902507
11. PAG-IBIG ID NO.	1780 - 0025 - 1378
12. PHILHEALTH NO.	13 - 000067688-1
13. SSS NO.	N/A
14. TIN NO.	116 - 625 - 748
15. AGENCY EMPLOYEE NO.	100 - 346
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	BO. MARCOS BAYBAY CITY, LEYTE (House/Block/Lot No. / Street) N/A (Subdivision/Village / Barangay) N/A (City/Municipality / Province)
ZIP CODE	6521-A
18. PERMANENT ADDRESS	BO. MARCOS BAYBAY CITY, LEYTE (House/Block/Lot No. / Street) N/A (Subdivision/Village / Barangay) N/A (City/Municipality / Province)
ZIP CODE	6521-A
19. TELEPHONE NO.	N/A
20. MOBILE NO.	09077171808
21. E-MAIL ADDRESS (if any)	N/A

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	MODINA	23. NAME of CHILDREN (Write full name and list all) / DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	CONCHITA	CHERRILYN E. MODINA — NOV. 9, 1983
NAME EXTENSION (JR., SR)	N/A	RIZALINE E. MODINA — FEB. 19, 1987
MIDDLE NAME	ECHAVEZ	RICKY E. MODINA — SEPT. 16, 1987
OCCUPATION	SALES GIRL	
EMPLOYER/BUSINESS NAME	PAVILION	
BUSINESS ADDRESS	VSM	
TELEPHONE NO.	N/A	
24. FATHER'S SURNAME	MODINA	
FIRST NAME	LEONCIO	
NAME EXTENSION (JR., SR)	N/A	
MIDDLE NAME	PALOMA	
25. MOTHER'S MAIDEN NAME		
SURNAME	POSAS	
FIRST NAME	MARCELA	
MIDDLE NAME	BAGARINAO	

(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	N/A	1971	1977	CERTIFICATED	1977	N/A
SECONDARY	DAMULA-AN NATIONAL HIGH SCHOOL	N/A	1976	2000	CERTIFICATED	2000	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A					
COLLEGE	N/A	N/A					
GRADUATE STUDIES	N/A	N/A					

(Continue on separate sheet if necessary)

SIGNATURE		DATE	OCTOBER 5 2018

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	GOVT SERVICE (Y/ N)
From	To						
JUNE 17, 2010	PRESENT	ADMINISTRATIVE AIDE 1	DEPT. CONSUMER HOSPITALITY MANAGEMENT (DCHM)	10,164.10	SG 1 STE 2	REGULAR	YES
JAN. 2, 2004	2010	ADMINISTRATIVE AIDE 1	DEPT. OF POST MANAGEMENT (DPM)	231.17		CASUAL	YES
JAN. 3, 2000	2003	UTILITY	GUEST HOUSE	90.00		MCOE	YES
JUNE 1, 1983	1984	LABORER	DEPT. PLANT PROTECTION (DPP)	14.17		CASUAL	YES
JAN. 2, 1979	1981	LABORER	PHYSICAL PLANT OFFICE (PPO)	10.00		CASUAL	YES
DEC. 12, 1974	1978	LABORER	OFFICE OF STUDENT AFFAIRS (OSA)	9.17		CASUAL	YES

(Continue on separate sheet if necessary)

SIGNATURE		DATE	OCTOBER 5 2018

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATIONS

29. NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
	From	To		
N/A	N/A	N/A	N/A	N/A

(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			
LSA CDC	AUG 26, 1999	AUG 27, 1999	8		VISSCO
OCCCI	AUG 17, 2011	AUG 17, 2011	8		OCCCI

(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)
BASKETBALL	N/A	N/A
DECORATION	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	OCTOBER 5, 2018

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 appointed,

a. within the third degree? ☐ YES ☑ NO

b. within the fourth degree (for Local Government Unit - Career Employees)? ☐ 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? ☐ YES ☑ NO

If YES, please specify: _____

b. Are you a person with disability? ☐ YES ☑ NO

If YES, please specify ID No: _____

c. Are you a solo parent? ☐ YES ☑ NO

If YES, please specify ID No: _____

41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)

NAME	ADDRESS	TEL. NO.
DR. NELEN P. LAMBERT	VSU VISCA BAYBAY CITY, LEYTE	
DR. LUALHATI M. NIDIEL	VSU VISCA BAYBAY CITY, LEYTE	
DR. OSCAR B. POSAS	PO MARCOS BAYBAY CITY, LEYTE	

HENRY P. MODINA

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:	VOO - 3Ale
ID/License/Passport No.:	H12-13-000777
Date/Place of Issuance:	BAYBAY CITY, LEYTE

Signature (Sign inside the box)

Date Accomplished

Right Thumbmark

SUBSCRIBED AND SWORN to before me this OCT 15 2018, affiant exhibiting his/her validly issued government ID as indicated above.

ATTY. RYSAN C. GUINOCOR
VSU LEGAL OFFICER

Person Administering Oath