CS Form No. 212 Revised 3017

PERSONAL DATA SHEET

WARNING: Any misrepresenta	ntion made in the Personal Data Sheet and the	Work Experience Sheet shall cau				ninal case/s again	st the persor		
READ THE ATTACHED GUIDE Print legibly. Tick appropriate boxes	TO FILLING OUT THE PERSONAL DATA SHE	EET (PDS) BEFORE ACCOMPLIS N/A if not applicable. DO NOT ABBRI	HING THE I	PDS FORM.	1, CS ID No.	AM AM	(Do not fill up.	For CSC use only	
I. PERSONAL INFORMATIO	NC								
2 SURNAME	CUMBA	reach separate phases to early	trio()					and the second	
FIRST NAME	BERTULFO					NAME EXTENSION (JF	R, SR) N/A		
MIDDLE NAME	MORENO								
3. DATE OF BIRTH (mm/dd/yyyy)	9/2/1960 191 YALAMAN YALAMAN EDITAR	HO. OTHERWIP		 ☑ Filip	ino Ĺ		by natura	lization	
4. PLACE OF BIRTH	CARIDAD, BAYBAY, LEYTE	If holder of dual citizenshi		240.95 (CSF 60)	CRUT RESERVE	Pls. indicate of		Facan	
5. SEX	Male Female	proteo araouto ate social		1751U±137	OH - 08	i in the	8639 J	1.000 P	
b CIVIL STATUS	Single Married Separated Separated	17 RESIDENTIAL ADDRESS		1327 ise/Block/Lot N CALIPAYAN		PU	Street GUADALUPE	·	
7. HEIGHT (m)	1.58	ho a first to	Sui	bdivision/Village Baybay City	,	4 1 020	Tab-ang Leyte		
		Harrist L	C	ity/Municipality	TO VENNERAL O		Province		
8. WEIGHT (kg)	52.2	ZIP CODE	6521-A						
9. BLOOD TYPE	"O" STEERINGS SAN SAN SAN SAN SAN SAN SAN SAN SAN SA	18. PERMANENT ADDRESS	Hou	se/Block/Lot N	1327	1	insa i l	CONSTRU	
10. GSIS ID NO.	B0052BM6011	The second at the second		CALIPAYAN bdivision/Village		1 7505	GUADALUPE Tab-ang	INPART.	
11. PAG-IBIG ID NO.	1700-0035-1363	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Baybay City City/Municipality			Company of the Compan			
12. PHILHEALTH NO.	13-000015624-8	ZIP CODE		1871 S. S. S. S. S.	ng ang ang manakan mana	6521-A			
13. SSS NO.	NA BIGIL SEGREN VIEWS	19. TELEPHONE NO.			NONE				
44. TIN NO.	106-014-762	20. MODILE NO.		0026000072					
15 AGENCY EMPLOYEE NO	V000611	21 F-MAIL ADDRESS (if any)			bertguml	oa@yahoo.co	<u>om</u>		
II. FAMILY BACKGROUND									
22. SPOUSE'S SURNAME	GUMBA	an december send asportable 23.	NAME of CH	ILDREN (Write	e full name and	l list all)	DATE OF BIR	RTH (mm/dd/yyyy)	
FIRST NAME	LUCIA	NAME EXTENSION (JR., SR) N/A		JAYO	GLIMRA		514	1/1991 /	
MIDDLE NAME	CALIPAYAN	A CONTRACTOR OF THE CONTRACTOR	11.45	JASON	C. GUMBA		7/5	5/1992	
OCCUPATION	HOUSEKEEPE		TI MAL	JENEBET	H C. GUMI	BA		30/1995	
EMPLOYER/BUSINESS NAME	N/A				where the entire part of				
BUSINESS ADDRESS	AWA	and viriges and deposit andrew		OCKA, DUI	100	1000		H021 11 (V	
TELEPHONE NO.	N/A								
24. FATHER'S SURNAME	GUMBA							-13-13-13-13-13-13-13-13-13-13-13-13-13-	
FIRST NAME	ZOSIMO (DECEASEI	D) SR						and the state of t	
MIDDLE NAME									
25. MOTHER'S MAIDEN NAME									
SURNAME	MORENO			TE ST					
FIRST NAME	SOFIA (DECEAS	ED)	andres de la com	en Titte en yeit en titte ville.	and a second control of the second			The second secon	
MIDDLE NAME	LEONES		(Continue on seg		parate sheet if neces	sarv)			
III. EDUCATIONAL BACKS									
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/C	COURSE	PERIOD OF A	ATTENDANCE To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	ACADEMIC HONORS	
ELEMENTARY	CARIDAD ELEMENTARY SCHOOL	Primary Education		1968	1975	Diploma	1975	Diploma	
SECONDARY	CARIDAD RURAL HIGH SCHOOL	High School		1980	1984	Diploma	1984	Diploma	
VOCATIONAL / TRADE COURSE	None	None		No. of Contract of	TOTAL SECTION AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON ADDRESS OF THE PERSON ADDRESS OF THE P	None	No. Case Citization of the	None	
COLLEGE	Visayas State College of Agriculture	BACHELOR OF HOME ECONOMICS AND EXTENSION		1985	1989	Diploma	1989	Diploma	
GRADUATE STUDIES	None	None				None		None	
		(Continue on separate sheet if necessa	агу)						
SIGNATURE	Sman	•		DA	TE	10-2	-74		

CAREE		(BOARD/ BAR) LINDER	 Rating	DATE OF	DI ACE CE EVANILLETICO	OONEED! ***	. l	LICENSE (if a	1
BARA	SPECIAL LAWS	/ CES/ CSEE / DRIVER'S LICENSE	(If Applicable)	CONFERMENT	PLACE OF EXAMINATION /	CE OF EXAMINATION / CONFERMENT		NUMBER	Date o
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			(Contin	ue on separate sheet i	f necessary)			Lactor to by Agonna of	
	XPERIENCE ite employment	Start from your rece	nt work) Desi	crintion of duties	should be indicated in the	attached V	Vork	Experience sh	eet.
INCLU (mr	SIVE DATES n/dd/yyyy)	POSITION TIT (Write in full/Do not al	LE	DEPARTMENT/AG	GENCY / OFFICE / COMPANY ull/Do not abbreviate)	MONTHLY SALARY	SA I A RY /	STATUS OF APPOINTMENT	GUV I SERVIC
From 1/1/2024	To Present	LABORATORY TECH	INICIAN 1	National Ahaca Re	ecearch Center-Vicayas State	829.77/day	B/ 54	Casual	Yes
7/1/2023	12/31/2023	LABORATORY TECH		National Abaca Re	University esearch Center-Visayas State		6	The second second second	Yes
	and the de	I and the		National Abaca Re	University esearch Center-Visayas State	797.86/day	0	Casual	
1/1/2023	6/30/2023	LABORATORY TECH	NICIAN 1		University	797.86/day		Casual	Yes
//1/2022	12/31/2022	LABORATORY TECH	NICIAN 1		University	767.14/day	11	Casual	Yes
1/1/2022	6/30/2022	LABORATORY TECH	NICIAN 1		esearch Center-Visayas State University	767.14/day		Casual	Yes
7/1/2021	12/31/2021	LABORATORY TECH	NICIAN 1	National Abaca Re	esearch Center-Visayas State University	736.36/day	6	Casual	Yes
1/1/2021	6/30/2021	LABORATORY TECH	NICIAN 1	National Abaoa Co	oscarch Center Visayas State University	736.36/day	6	Casual	Yes
1/1/2020	12/31/2020	LABORATORY TECH	NICIAN 1	National Abaca Re	eseach Center -Visayas State University	705.64/day	6	Casual	Yes
1/1/2019	12/31/2019	LABORATORY TECH	NICIAN 1	National Abaca Re	eseach Center -Visayas State University	674.86/day	6	Casual	Yes
1/1/2010	12/31/2018	LABORATORY TECH	NICIAN 1	National Abaca Re	eseach Center -Visavas State University	จับจั.บั <i>9/</i> day	Ö	Casuai	Yes
1/1/2017	12/31/2017	LABORATORY TECH	NICIAN 1	National Abaca Re	eseach Center -Visayas State University	608.09/day	6	Casual	Yes
1/1/2016	12/31/2016	LABORATORY TECH	NICIAN 1	University		608.09/day	6	Casual	Yes
1/1/2012	12/31/2015	LABORATORY TECH	NICIAN 1	National Abaca Re	eseach Center -Visayas State University	507.32/day	C	Casual	Yes
1/1/2000	12/31/2011	LABORATORY TECH	NICIAN 1	National Abaca Re	eseach Center -Visayas State University	545.09/day	6	Casual	Yes
7/1/1989	12/31/1990	Science Aide		National Abaca Resea	ch Center -Leyte State University	102.27/day	H	Contractual	Yes
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NAME & ADDRESS OF ORGAN (Write in full)	NIZATION		/E DATES d/yyyy)	MUMBER OF HOURS		POSITION / NATURE OF WORK
		From	То	w 1	100000000000000000000000000000000000000	The second of th
None None						
	(Continue on se		THE RESERVE OF THE PERSON.	The second second		
II. LEARNING AND DEVELOPMENT (L8						
tart from the most recent L&D/training program and inc	clude only the relevant L&D/fi			ve (5) years	for Division C	hiel/Executive/Managerial positions)
30. TITLE OF LEARNING AND DEVELOPMENT INT	OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING		INCLUSIVE DATES OF ATTENUANCE		Type of LD (Managerial/	CONDUCTED/ SPONSORED BY
PROGRAMS	(Write in full)	(mm/dd/yyyy)		HOURS	Supervisory/	(Write in full)
RAINING ON THE PRODUCTION OF ABACA FIBER, YAF	RN. TWINE AND ITS DERIVED	From	То			National Abaca Research Center, Visayas
RODUCTS		4/14/2016	4/15/2016	16	Technical	State Univeristy/PHILFIDA
KILLS TRAINING ON ABACA WASTE UTILIZATION INTO	DYE PRODUCTS	3/13/2015	3/17/2015	80	Technical	National Abaca Research Center, Visayas State Univeristy
SKILLS TRAINING ON ANACA WASTES COMBINING TAMBO INTO BY-PRODUCTS			1/29/2015	24	Technical	Department ofg Trade Industry and Department of Agriculture (DTI & DA)
IKILLO TRAINING ON ADAGA FIDER MAKING CHRISTMAS DECORS			10/24/2014	10 10	Technical	Department of Environmental and Natural Resources (DENR)
KILLS TRAINING ON ABACA WASTE MAKING BAGS, HA		4/24/2012	4/26/2014	24	Technical	Fiber Industry Development Authority (FIDA) and Department of Agriculture (DA)
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sive pullings bound for so	(Continue on se	parate sheet	if necessary			
IIII. OTHER INFORMATION						
31. SPECIAL SKILLS and HOBBIES	32. NON-A	NON-ACADEMIC DISTINCTIONS / RECOGNITION 32. (Write in full)			MEMBERS HIP IN ASSOCIAT 33. ION/ORGA NIZATION (Write in	
HANDICRAFTS: WEAVING	DISTRIBUTION OF CEF	DISTRIBUTION OF CERTIFICATE				BFGA FOR LIVELIHOOD
DESIGNING BAGS	DISTRIBUTION OF CER	DISTRIBUTION OF CERTIFICATE				BFGA FOR LIVELIHOOD
AMINATION	DISTRIBUTION OF CE	DISTRIBUTION OF CERTIFICATE			BEGA FOR LIVELIHOOD	
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grave Entropezati	NO ALO DELLE				ia TE	10 0 - 21
SIGNATURE	my	TO VIV		L	DAIL	1 12-3-24

24. Are you related by concenquinity or affinity to the any	and the second s				
34. Are you related by consanguinity or affinity to the app chief of bureau or office or to the person who has immage and or Department where you will be apppointed,	mediate supervision over you in the Office,		0		
a. within the third degree?		│ □ YES ☑ NO			
h within the fourth degree (for Local Government Un	it - Career Employees)?	□ YES □ NO			
The second section of the section of th		If YES, give details:	and the same		
a. Have you ever been found guilty of any administral	☐ 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 Cace/s:				
36. Have you ever been convicted of any crime or violatic any court or tribunal?	☐ YES ☑ NO If YES, give details:				
Have you ever been separated from the service in an dropped from the rolls, dismissal, termination, end of in the public or private sector?		☐ YES ☑ NO If YES, give details:			
a. Have you ever been a candidate in a national or loo Barangay election)'?	a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?				
	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 perm	Have you acquired the status of an immigrant or permanent resident of another country?				
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (and (c) Solo Parents Welfare Act of 2000 (RA 8372),	b) Magna Carta for Disabled Persons (RA 7277);				
Are you a member of any indigenous group?	pidase answer the following items.				
		If YES, please specify:	-		
Are you a person with disability?		U VES U MO			
Are you a sole parent?		If YES, please specify ID No: YES If YES, please specify ID No:			
DECEDENCES (Decement related by consequinity or affinity to		II TES, please specify to two.			
REFERENCES (Person not related by consanguinity or affinity to a					
NAME	ADDRESS	TEL. NO.			
JBEN M. GAPASIN	VSU-CAMPUS, BAYBAY CITY, LEYTE	9176336571			
ELICIANO G. SINON	VSU-CAMPUS, BAYBAY CITY, LEYTE	653-7598	0		
JZ O. MURENO	VSU-CAMPUS, BAYBAY CITY, LEYTE	653-7598			
complete statement pursuant to the provisions of Philippines. I authorize the agency head/authorized reagree that any misrepresentation made in this administrative/eriminal case/e against me.	pertinent laws, rules and regulations of the Ferresentative to verify/validate the contents stated document and its attachments shall cause	Republic of the	A ·		
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: V000611	1 / Am				
ID/License/Passport No.: H12-14-001798	Signature (Sign inside the box	And the same of th			
Uate/Place of Issuance: 8/28/2017 - BAYBAY CITY	/ Signature (sign inside the box /2 ~ 3 ~ 2 4 Date Accomplished	Right Thumbmark			
SUBSCRIBED AND SWORN to before me this	0.2 JAN 2025 affiant exhibiting	ng his/her validly issued government ID as indicated above.			
	Person Martini Ving Cett				

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WORK EXPERIENCE SHEET

Instructions: 1. Include only the work experiences relevant to the position being applied to.

 Theduration should include start and finish dates, if known, month in abbreviated form, if known, and year in full. For the current position, use the word Present, e.g., 1998-Present. Work experience should be listed from most recent first.

Sample: If applying to Supervising Administrative Officer

- Duration: January 1, 2000 Present
- Position: Laboratory TechnicianName of Office/Unit: National Abaca Research Center
- Immediate Supervisor: Romel B. Armecin
- Name of Agency/Organization and Location: Visayas State University
 - List of Accomplishments and Contributions (if any)
 - Summary of Actual Duties
 Develops new designs of handicraft from abaca waste.
 - Conducts/serves as resource person for skills training on abaca handicraft
 - Makes handicraft products from abaca wastes and other novel abaca-based products for display/exhibits.
 - Assesses/evaluates the quality of the trainees, weavers' finished products
 - Assesses/evaluates the quanty of the trainees, weavers finished products
 Records all finished products and issues log slip to the weavers.
 - Others: Briefs walk-in visitors at the handicraft/workshop area and performs other duties assigned by the immediate supervisor/director

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BERTULFO M. GUMBA
(Signature over Printed Name of Employee/Applicant)
Date: _______