

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	POSAS				
FIRST NAME	JUBEMARIE			NAME EXTENSION (JR., SR) N/A	
MIDDLE NAME	ESPERANZA				
3. DATE OF BIRTH (mm/dd/yyyy)	04/17/1993	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:		
4. PLACE OF BIRTH	BAYBAY LEYTE	If holder of dual citizenship, please indicate the details.	Philippines		
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female				
6. CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	N/A SITIO CAABING		
7. HEIGHT (m)	1.62 m	ZIP CODE	House/Block/Lot No. Street		
8. WEIGHT (kg)	55 kg		N/A POMPONAN		
9. BLOOD TYPE	A		Subdivision/Village Barangay		
10. GSIS ID NO.	N/A		BAYBAY LEYTE		
11. PAG-IBIG ID NO.	121201349538		City/Municipality Province		
12. PHILHEALTH NO.	13-025339539-8	18. PERMANENT ADDRESS	N/A SITIO CAABING		
13. SSS NO.	06-3677409-8	ZIP CODE	House/Block/Lot No. Street		
14. TIN NO.	474-954-315		N/A POMPONAN		
15. AGENCY EMPLOYEE NO.	N/A		Subdivision/Village Barangay		
			BAYBAY LEYTE		
			City/Municipality Province		
		19. TELEPHONE NO.	N/A		
		20. MOBILE NO.	09384156664		
		21. E-MAIL ADDRESS (if any)	jubemarie.posas@vsu.edu.ph		

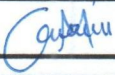
II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	N/A		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	N/A	NAME EXTENSION (JR., SR)	N/A	N/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	POSAS			
FIRST NAME	RENARIO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	PENETRADO			
25. MOTHER'S MAIDEN NAME				
SURNAME	ESPERANZA			
FIRST NAME	JULIETA			
MIDDLE NAME	LLONES		(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		HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	BAYBAY NORTH CENTRAL SCHOOL	PRIMARY EDUCATION	2000	2006	Graduated	2006	N/A
SECONDARY	FRANCISCAN COLLEGE OF THE IMMACULATE CONCEPTION (FCIC)	HIGH SCHOOL	2006	2010	Graduated	2010	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN NURSING	2010	2011	UNITS EARNED	N/A	N/A
		BACHELOR OF SCIENCE IN AGRIBUSINESS	2011	2015	Graduated	2015	N/A
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY	MASTER OF MANAGEMENT - MAJOR IN AGRIBUSINESS MANAGEMENT	2017	2018	40 UNITS	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	7/21/2023
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[illegible]

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

[illegible]

(Continue on separate sheet if necessary)

gph

7/21/2023

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		
	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)

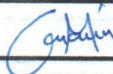
30.	TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
		From	To			
	Mental Health Wellness Seminar	04/25/2023	04/25/2023	8	Soft Skills Development	Visayas State Univerity
	ISO 9001:2015 Awareness/Re-awareness Seminar	08/31/2022	08/31/2022	8	Quality Training	Visayas State Univerity
	Hands-Only Cardiopulmonary Resuscitation	07/21/2022	07/22/2022	16	Safety Training	Department of Health
	KAALAM: Creative Forms and Narratives of the Contemporary (Zoom)	03/09/2022	03/09/2022	8	Team Training	Institute of Human Kinetics, Visayas State Univerity
	Webinar RA 11313 Safe Spaces Act	12/10/2020	12/10/2020	3	Safety Training	Visayas State Univerity
	Webinar " Seminar on Financial Management"	12/2/2020	12/3/2020	16	Team Training	VICARP-DOST-PCAARRD Los Baños Laguna
	ISO 9001:2015 Awareness/Re-awareness Webinar	11/27/2020	11/27/2020	4	Quality Training	Visayas State Univerity
	Orientation Workshop Among JO Clerks & Laboratory Technicians	15/01/2019	15/01/2019	8	Orientation	Visayas State Univerity
	Target Setting Workshop	20/08/2018	21/08/2018	16	Team Training	Visayas State Univerity
	"ISO 9001-2008 Orientation & Writeshop Among Clerk & Secretaries"	15/01/2018	15/01/2018	8	Quality Training	Visayas State Univerity







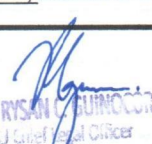
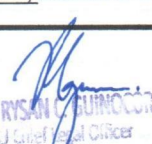
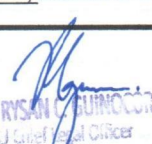
(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	TECHNICAL SKILLS (MICROSOFT OFFICE)		N/A		N/A
	INTERPERSONAL SKILLS		N/A		N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	7/21/2023
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<p>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,</p> <p>a. within the third degree?</p> <p>b. within the fourth degree (for Local Government Unit - Career Employees)?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>														
<p>35. a. Have you ever been found guilty of any administrative offense?</p> <p>b. Have you been criminally charged before any court?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p>Date Filed: _____</p> <p>Status of Case/s: _____</p>														
<p>36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>														
<p>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?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>														
<p>38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?</p> <p>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?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>														
<p>39. Have you acquired the status of an immigrant or permanent resident of another country?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details (country): _____</p>														
<p>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:</p> <p>a. Are you a member of any indigenous group?</p> <p>b. Are you a person with disability?</p> <p>c. Are you a solo parent?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p>														
<p>41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 40%;">NAME</th> <th style="width: 40%;">ADDRESS</th> <th style="width: 20%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>NICK FREDDY R. BELLO</td> <td>Visayas State University</td> <td>09353256803</td> </tr> <tr> <td>NORIETA B. BUSTILLO</td> <td>Visayas State University</td> <td>09152329310</td> </tr> <tr> <td>WILMA V. NAPIERE</td> <td>Visayas State University</td> <td>09359633220</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	NICK FREDDY R. BELLO	Visayas State University	09353256803	NORIETA B. BUSTILLO	Visayas State University	09152329310	WILMA V. NAPIERE	Visayas State University	09359633220		
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<p>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.</p>															
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)</td> </tr> <tr> <td colspan="2">PLEASE INDICATE ID Number and Date of Issuance</td> </tr> <tr> <td>Government Issued ID:</td> <td>Philhealth</td> </tr> <tr> <td>ID/License/Passport No.:</td> <td>13-025339539-8</td> </tr> <tr> <td>Date/Place of Issuance:</td> <td>BAYBAY CITY</td> </tr> </table>	Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)		PLEASE INDICATE ID Number and Date of Issuance		Government Issued ID:	Philhealth	ID/License/Passport No.:	13-025339539-8	Date/Place of Issuance:	BAYBAY CITY	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center; height: 100px;">  </td> </tr> <tr> <td style="text-align: center;">Signature (Sign inside the box)</td> </tr> <tr> <td style="text-align: center;">7/21/2023</td> </tr> <tr> <td style="text-align: center;">Date Accomplished</td> </tr> </table>		Signature (Sign inside the box)	7/21/2023	Date Accomplished
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<p>SUBSCRIBED AND SWORN to before me this <u>02 AUG 2023</u>, affiant exhibiting his/her validly issued government ID as indicated above.</p>															
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WORK EXPERIENCE SHEET

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

2. The duration 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.

- Duration: July 31, 2015 – Present
- Position: Administrative Aide III
- Name of Office/Unit: VSU-ACCOUNTING OFFICE
- Immediate Supervisor: Nick Freddy R. Bello
- Name of Agency/Organization and Location: VISAYAS STATE UNIVERSITY

- List of Accomplishments and Contributions (if any)

- Summary of Actual Duties
 - Responsible for preparing journal entries, vouchers for 101 Trust projects, control earmarks PR's, and appointments under 101 Trust projects, Obligate and liquidates vouchers, payrolls and PO's under 101 Trust projects and prepares quarterly, semi-annual, annual/terminal Financial Report on each projects.
 - Posting of Job Order payrolls under PCC, STF, IGP and 101T projects, Posting of Student assistants payrolls, scholars and GTA and Prepare monthly list of Job order tax deduction for remittance.
 - Prepares mandatory remittances to government agencies (GSIS, Philhealth, Pag-ibig Fund, BIR) and other agencies, Prepares consolidated withholding tax report, Prepares breakdown of Tax Remittance Advice monthly report (Main Campus and External Campus) and Prepares yearly report to BIR and monthly remittance online.
 - Prepares summary of Monthly disbursements for MDS/LDDAP-ADA and Generates MDS and LDDAP-ADA in cash BAOM for the monthly disbursement report.

- Duration: June 15, 2015 – July 15, 2015
- Position: Emergency Clerk
- Name of Office/Unit: Department of Business & Management, Visayas State University
- Immediate Supervisor: Antonio P. Abamo
- Name of Agency/Organization and Location: VISAYAS STATE UNIVERSITY

- List of Accomplishments and Contributions (if any)

- Summary of Actual Duties

- Types and cut stencils of exams, manuals, handouts, syllabi, exercises, course outlines and other teaching materials, communications and reports; Collates handouts, exams, exercises, course outlines, communications & reports; Files/retrieve communications, memos and other official records; Prepares and types Certificate of Service Rendered, Travel Order, Purchase Request, reimbursement, letter requests and payrolls. Entertain students and visitors and Distributes manuals and exercises


JUBEMARIE E. POSAS

(Signature over Printed Name
of Employee/Applicant)

Date: 07/21/2023