CS Form No. 212 Revised 2017

PERSONAL DATA SHEET

WARNING: Any misinterpretation 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 SHE	ET (PDS) BEFORE ACCOM	PLISHING THE	PDS FORI	DESCRIPTIONS OF PROPERTY OF PRO	2 250		
Print legibly. Tick appropriate boxe. PERSONAL INFORMATION	s (and use separate sheet if necessary. Indicate N	I/A if not applicable. DO NOT A	BBREVIATE.		1. CS ID No		(Do not fill up.	For CSC use on
2 SURNAME	BRAGA							
FIRST NAME	NAME DITTIONAL OF A PARTY OF A PA							
	ROMMEL NAME EXTENSION (JR., SR)						,,	
MIDDLE NAME	DUMAMDAN							
3. DATE OF BIRTH (mm/dd/yyyy)	08/06/1970	08/06/1970 16. CITIZENSHIP Filipino Dual Citizens			Dual Citizenshi	by naturalization		
4. PLACE OF BIRTH	BAYBAY CITY	If holder of dual citiz	zenship, Pls. indicate			country:		
5. SEX	✓ Male Female	please indicate the	details.				•	
6 CIVIL STATUS	Single	17. RESIDENTIAL ADDRESS	House/Block/Lot No. Subdivision/Village			Street GUADALUPE Barangay		
7. HEIGHT (m)	5'7"FT.	Year in the Automorphism		BAYBAY CIT	Υ		LEYTE	
8. WEIGHT (kg)	70 KLS.	ZIP CODE	City/Municipality			Province		
9. BLOOD TYPE	"0"	18. PERMANENT ADDRESS					VIII.	
10. GSIS ID NO.	70080601393	MSAYAS STATE UNIVE		ouse/Block/Lot	14 1714		Street	\$1.692012
11. PAG-IBIG ID NO.	170000243601	NAME STATE SAYARI	5	The Control of the Co	Y CITY		Barangay LEYTE	
2. PHILHEALTH NO.	13-0000145018	ZIP CODE	City/Municipality		Province			
13. SSS NO.	N/A N/A	19. TELEPHONE NO.		reitn.	Day's Etc		Kennama	P#C 1 (1)
4. TIN NO.	116-623-326	20. MOBILE NO.				166 - 1 BEST 2011		
5. AGENCY EMPLOYEE NO.	V000114	21. E-MAIL ADDRESS (if any)						
I. FAMILY BACKGROUND								
2. SPOUSE'S SURNAME	BRAGA		23. NAME of C	HILDREN (WI	rite full name an	d list all)	DATE OF BIR	TH (mm/dd/yyyy
FIRST NAME	FLORES	NAME EXTENSION (JR., SR) JHEMELYN		YN B. BRAGA			07/24/1990	
MIDDLE NAME	BALMES		FLOREMEL	B. BRAGA	4		10/17/1992	
OCCUPATION	HOUSEWIFE		JENNY B. BRAGA			04/04/2002		
EMPLOYER/BUSINESS NAME	N/A	ROMMEL J		JAMES B. BRAGA JR,			04/04/2002	
BUSINESS ADDRESS	N/A	RONALD J		JAMEB BRAGA			11/20/2009	
TELEPHONE NO.	N/A			-			1112	0/2009
4. FATHER'S SURNAME	RAYMUNDO (DECEA	ASEDI						
FIRST NAME	HONDEZ	NAME EXTENSION (JR., SR)						
MIDDLE NAME 5. MOTHER'S MAIDEN NAME	DUMANDAN							
SURNAME	ADELA							
FIRST NAME								
MIDDLE NAME	- T. IVELUIA	STA. IGLESIA						
I. EDUCATIONAL BACKG	ROUND			(Continue on se	eparate sheet if neces	ssary)	
								coup exam
6. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGR (Write in full)	EE/COURSE	PERIOD OF	To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
ELEMENTARY	BAYBAY CITY CENTRAL SCHOOL	PRIMARY LEVEL		1976	1982	GRADUATED	1982	N/A
SECONDARY	BUNGA NATIONAL HIGH SCHOOL	SECONDARY LEVEL		1982	1986	GRADUATED		N/A
VOCATIONAL / TRADE COURSE	N/A	N/A		N/A	N/A	N/A		N/A
COLLEGE	N/A	N/A		N/A	N/A	N/A		N/A
GRADUATE STUDIES	N/A	N/A		N/A	N/A	N/A		N/A
SIGNATURE	20 mm Birs	Continue on separate sheet if nec	essary)	2/294	1000000			

IV. CIVIL	SERVICE ELIGIB	ILITY				,			
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LANGUCES COSE RATING		RATING	DATE OF			LICENSE (if applicable)			
В	ARANGAY ELIGIBILITY		(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT			NUMBER	Date of Validity
	N/A		N/A	N/A	N/A			N/A	N/A
Ş	**************************************					3/2	and Ci		
	EXPERIENCE			ontinue on separate sheet i					
	vate employment. LUSIVE DATES	Start from your recei	nt work) Descripti	on of duties should b	e indicated in the attach	ed Work Exp	SALARY/ JOB/ PAY	et.	
	mm/dd/yyyy)	POSITION T (Write in full/Do not			NCY / OFFICE / COMPANY Do not abbreviate)	MONTHLY SALARY	GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/N)
01/01/2017	PRESENT	ADMIN. AIL)E - III	VISAYAS STATE	UNIVERSITY-LIBRARY	12,513.00	NBC568	PERMANENT	Υ
01/06/2012	01/07/2013	ADMIN. AII	DE - III	VISAYAS STATE	UNIVERSITY-LIBRARY	10,985.00	JNTCSCDB	PERMANENT	Υ
01/06/2012	06/30/2013	ADMIN AII	DE-I	VISAYAS STATE	UNIVERSITY-LIBRARY	9,380.00	M1 NBC 540	PERMANENT	Υ
01/06/2011	01/06/2012	ADMIN. AI	DE-I		NIVERSITY-LIBRARY	9,365.00	NBC530	PERMANENT	Υ
06/12/1999	11/30/2004	UTILITYWO			7,947.00	JNTCSCDB	PERMANENT	Y	
01/06/1989	01/01/1994	LABOR		VISAYAS STATE COLLEGE OF		30.8.1	M1		-
01/00/1909	01/01/1994	LABOR		AGRICULTURE		127.26/DAY	N/A	DAILY	Υ
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SIGN	IATURE	20 minus	lige	DATE	Sear Jul		CS FORM	212 (Revised 2017), P	age 2 of 4

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNM	IENT / PEOPLE / \	OLUNTARY	ORGANIZATIO	ON/S	And the second second		
29. NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUS	INCLUSIVE DATES (mm/dd/yyyy)		POSITION / NATURE OF WORK			
N/A		From To		N/A			
N/A	NA	INA	N/A		N/A		
			a greefe anders	substitute sense	1 ANN 10 100 100 100 100 100 100 100 100 10		
				me noble	kosti, vensky nejdyny avch u		
	(Continue on separate	shoot if norassa	nd)				
VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAININ	IG PROGRAMS A	TTENDED					
(Start from the most recent L&D/training program and include only the relevant L&D/training tak		ears for Division	Chief Executive Mar				
 TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full) 	ATTE	ATTENDANCE (mm/dd/yyyy)		Type of LD (Managerial/ Supervisory/	CONDUCTED/ SPONSORED BY (Write in full)		
	From	То		Technical/etc)	ELECTRONIC INFORMATION SOLUTIONS, INC. &		
RFID LIBRARY SYSTEMS START-UP TRAINING	05/03/2018	1 1 1 1 1 1 1 1 1	8 HOURS	TECHNICAL	VSU LIBRARY STAFF		
FIRE PREVENTION SEMINAR AND TRAINING ON MASS CASUALTY INCOENT RESPO	ONSE 03/27/2015	10000000	8 HOURS	TECHNICAL	BUREAU OF FIRE PROTECTION		
		See 5					
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VIIII DAY S. DO CO S. C.							
	27		B B B B B B B B B B B B B B B B B B B	1000	2015 - 102 102 102 102 102 102 102 102 102 102		
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	(Continue on separate	sheet if necessa	nry)	3			
VIII. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES 32.	NON-ACADEMIC DIST (Win	INCTIONS / REC te in full)	OGNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)		
BASKETBALL, VOLLEYBALL AND SINGING	N/	N/A			N/A		
Proposition Collision Coll	American Re	Rink	James Carrier				
untige had stated as it is not also supplied as the spiritual of children	xe richt.			2-17 (10) 2-151	SATION & COATEGO SOLO		
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	(Continue on separate	MADELLE	7				
SIGNATURE ROMANIA	A STATE OF THE OWNER, WHEN PARTY OF THE OWNER,	DATE	7/121	2079	CS FORM 212 (Revised 2017), Page 3 of		

			7				
34.	Are you related by consanguinity or affinity to the appointin						
Project 1	chief of bureau or office or to the person who has immediate	e supervision over you in the Office,	*				
	Bureau or Department where you will be apppointed,						
	a. within the third degree?	YES VO					
	b. within the fourth degree (for Local Government Unit - Ca	reer Employees)?	YES V NO				
		If YES, give details:					
35.	a. Have you ever been found guilty of any administrative of	fense?	YES NO				
			If YES, give details:				
			ii i zo, givo dotallo.				
	b. Have you been criminally charged before any court?		YES VO				
			If YES, give details:				
		and the second s	Date Fil	led:			
			Status of Case	e/s:			
36.	Have you ever been convicted of any crime or violation of a	YES NO					
	any court or tribunal?		If YES, give details:				
			Lo, give detaile.				
37.	Have you ever been separated from the service in any of the		YES NO				
	retirement, dropped from the rolls, dismissal, termination, e (abolition) in the public or private sector?	nd of term, finished contract or phased out	If YES, give details:				
		potion hold within the 1-stars of					
38.	a. Have you ever been a candidate in a national or local ele Barangay election)?	ection held within the last year (except	YES VO				
	Dalangay Goodon;	DHA ALEMBER BANGERS	If YES, give details:				
	b. Have you resigned from the government service during	the three (3)-month period before the last	YES NO				
	election to promote/actively campaign for a national or local	l candidate?	If YES, give details:				
39	Have you acquired the status of an immigrant or permanen	t resident of another country?					
00.	, , , , , , , , , , , , , , , , , , , ,	,	YES VICE Since details (sounts				
			If YES, give details (country).			
40	D	0 1 6 5 11 15 (5)					
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972	#####################################					
9	A SECTION AND A	, please answer the following items.					
a.	Are you a member of any indigenous group?		YES VES NO	0			
b.	Are you a person with disability?		If YES, please specify:	Management of the Control of the Con			
	Are you a person with disability?		☐ YES ☑ NO If YES, please specify ID No:	0			
C.	Are you a solo parent?		and the same of th				
	The Journal of the Control of the Co		☐ YES ☑ NO If YES, please specify ID No:	O .			
41.	REFERENCES (Person not related by consanguinity or affinity to applica	nt /appointee)	and the second s				
	NAME	ADDRESS	TEL. NO.				
AND	RELI D. PARDALES	BRGY. GUADALUPE, BAYBAY CITY	563-7512				
71112	TILLI D. I ANDALLO	BROT. GUADALUFE, BATBAT CITT	303-7312				
MS.	SHEIRA MAY T. CAMACHO	VSU, BAYBAY CITY	563-7512				
MC	IOVELVALU MARIJAN						
	JOVELYN H. MABUAN	VSU, BAYBAY CITY	563-7512				
42.	I declare under oath that I have personally accomplished t						
	statement pursuant to the provisions of pertinent laws,			7			
	authorize the agency head / authorized representative to misrepresentation made in this document and its attach						
	against me.	Tionto oriali oduoo tro ming or aurimiotiat	VC/CHITIII di Casc/S				
			11 FA TO 12 FO				
G	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)						
	EASE INDICATE ID Number and Date of Issuance						
G	overnment Issued ID: V508//4/	DE 06					
5		KO WIMEX BOTTEX					
10	/License/Passport No.:	Signature (Sign inside the bo	x)				
Da	ate/Place of Issuance:		Right Thumbmark				
上	18	Date Accomplished					
	SUBSCRIBED AND SWORN to before me this	, affiant exhibiting	his/her validly issued government	t ID as indicated above.			
		21					
		2// .					
		VSU LE Person Administering Oath	and the second s				
9.69	and the sail a local of the sail of the sa		CSF	FORM 212 (Revised 2017), Page 4 of 4			