CS Form No. 212

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. 1. CS ID No. Print legibly. Tick appropriate boxes () 📑 use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. (Do not fill up. For CSC use only 2. SURNAME CAÑA NAME EXTENSION (JR., SR) N/A FIRST NAME RANDY MIDDLE NAME GATCHALIAN 3. DATE OF BIRTH 4/15/1982 16. CITIZENSHIP ☑ Filipino ☐ Dual Citizenship (mm/dd/yyyy) by birth □ by naturalization 4. PLACE OF BIRTH MANILA CITY If holder of dual citizenship, Pls. indicate country: please indicate the details 5. SEX ☑ Male ☐ Female W ☐ Single ☑ Married 17. RESIDENTIAL ADDRESS ZONE-4 6 CIVIL STATUS House/Block/Lot No. ☐ Widowed Stree Separated GUADALUPE (UTOD) ☐ Other/s: Subdivision/Village Barangay CITY OF BAYBAY LEYTE 7. HEIGHT (m) 5'4 City/Municipality Province 6621 8. WEIGHT (kg) 62KL ZIP CODE 18. PERMANENT ADDRESS ZONE-4 9. BLOOD TYPE A+ House/Block/Lot No. Street GUADALUPE (UTOD) 10. GSIS ID NO. N/A Subdivision/Village Barangay CITY OF BAYBAY LEYTE 11. PAG-IBIG ID NO. 121273018018 City/Municipality Province 6521 12. PHILHEALTH NO 13-050045896-9 ZIP CODE 13. SSS NO. 0625022874 19. TELEPHONE NO. N/A 14. TIN NO. 940-595-386 09514027140 20 MOBILE NO V 02203 15. AGENCY EMPLOYEE NO 21. E-MAIL ADDRESS (if any) randy.cana@vsu.edu.ph MILY BACKGROUN MORENO 22. SPOUSE'S SURNAME 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) HANCEY ISABEL FIRST NAME RANCEY JULIA M. CAÑA 7/20/2005 AMIHAN MIDDLE NAME JO-ANN LI M. CAÑA 3/30/2007 N/A OCCUPATION PRINCESS VIANNA M. CAÑA 7/14/2010 EMPLOYER/BUSINESS NAME N/A FRANCE ISABELA M. CAÑA 9/2/2015 N/A BUSINESS ADDRESS JINGLE RHADZ I. CAÑA 9/3/2023 TELEPHONE NO. N/A CAÑA 24 FATHER'S SURNAME NAME EXTENSION (JR., SR) FIRST NAME LOLITO **DELA CRUZ** MIDDLE NAME 25. MOTHER'S MAIDEN NAME SURNAME **GATCHALIAN BABY EMILIANA** FIRST NAME DIAZ (Continue on separate sheet if necessary) MIDDLE NAME SCHOLARSHIP HIGHEST LEVEL/ PERIOD OF ATTENDANCE 26. BASIC EDUCATION/DEGREE/COURSE NAME OF SCHOOL YEAR ACADEMIC LEVEL UNITS EARNED GRADUATED HONORS (Write in full) (Write in full) (if not graduated) RECEIVED То From Elementary ELEMENTARY **Guadalupe Elementary School** 1990 1995 N/A 1995 N/A 1999 N/A 1995 1999 N/A **Baybay National High School** High School SECONDARY VOCATIONAL / N/A N/A N/A N/A N/A N/A N/A TRADE COURSE **Bachelor of Animal Science** 1999 2001 41 units N/A N/A Levte State University COLLEGE N/A N/A N/A NIA nla N/A N/A **GRADUATE STUDIES** OCT. 30, 2024 DATE SIGNATURE CS FORM 212 (Revised 2017), Page 1 of 4

CAREE		(BOARD/BAR) UNDER	RATING	DATE OF EXAMINATION /	DI ACE OF EVANINA	TION / CONTER	DMENT	LICENSE (if ap	
CDECIAL LAWSIT ESTUGEE		(If Applicable)	CONFERMENT	PLACE OF EXAMINA	HON / CONFER	RMENI	NUMBER	Date Vali	
N/A N/A			N/A	N/A			N/A	N/A	

				-					
			(Co	ntinue on separate sheet ii	f necessary)				
	XPERIENCE ate employment.	Start from your recen			ndicated in the attached	Work Expe	ience sheet.		
INCLU	JSIVE DATES m/dd/yyyy)	POSITION	TITLE		NCY / OFFICE / COMPANY	MONTHLY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP	STATUS OF	G
From	То	(Write in full/Do no	abbreviate)	(Write in full/Do not abbreviate)		SALARY	(Format "00-0")/ INCREMENT	APPOINTMENT	SEI (1
10/2002	12/31/2022	Crew/Bag	gger	SM Cebu		275/day		Contractual	
/5/2003	3/15/2005	Watchman/	Guard	Cavel C	onstruction	390/day		Emergency	
/1/2005	12/31/2010	Mster C	rew	Mr. Softy Ice Cream Inc.		350/day		Permanent	
1/2011	4/30/2016	Utility/Mess	senger	LSU-VSU, VPP/MMDC Office		275/day		Job Order	
/5/2016	12/31/2016	Crew/Wa	iter	Love Joy Catering		300/day		Emergency	
/3/2017	12/31/2018	Assitant Operati	on Manager	Minahal Kita Restaurant		250/day		Permanent	
3/2018	2/15/2018	Binding/S	orting	VSU Printing Press		600/day		Emergency	
/1/2018	6/25/2020	Operation M	anager	RJ-Pineapple Delight		400/day		Permanent	
/1/2020	PRESENT	Utility/Mess	senger	VSU-UIMC,VPP,MMDC Office		561/day		Job Order	
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			~						

NAME & ADDRESS OF (Write in f	NAME & ADDRESS OF ORGANIZATION (Write in full)		INCLUSIVE DATES (mm/dd/yyyy)		POSITION / NATURE OF WORK	
GUADALUPE ELEMENTARY	SCHOOL (PTCA)	9/1/2014	To 4/30/2016			PRESIDENT
BAYBAY NATIONAL HIGH	7/3/2016 9/15/2017	5/29/2017		TREASURER PRESIDENT		
GUADALUPE ELEMENTARY						
GUADALUPE ELEMENTARY	SCHOOL (ALUMNI)	10/30/2024	PRESENT			VICE-PRESIDENT
. LEARNING AND DEVELOPMENT (L&L xt from the most recent L&D/training program and inc	D) INTERVENTIONS/TRAINING F		TENDED		gerial positions)	
TITLE OF LEARNING AND DEVELOPMENT IN (Write in f		INCLUSIVE ATTENI (mm/do	DANCE	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
Mr. Softy Ice Cre	am Inc.	4/5/2005	5/2/2005	120	Technical	Mr. Softy Ice Cream Inc.
Utility Messenger Work	shop/Seminar	8/10/2011	8/10/2011	16	Technical	PRPEO-Sir Tudtud
Small Engir	ne	9/5/2016	12/15/2016	72	Technical	TESDA BAYBAY CITY
5S Training-Seminar for Utility an	d Messenger Personnel	11/24/2022	11/24/2022	8	Technical	ODAS-PRPEO
Landscape Tra		6/14/2023	6/14/2023	8	Technical	GSO-ATTY. R.C.GUINOCOR
	(Co	ontinue on separate s	sheet if necessar	y)		
OTHER INFORMATION SPECIAL SKILLS and HOBBIES	32. NC	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)				33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
Printing Services N/A						N/A
Binding Services						
Messengerial Services						
Carpentry		***************************************				
Driving						
Waiter					*	
	\$.60	entinue on separate :	sheet if necessar		ATE	OCT. BO, 2024

chie Bur	you related by consanguinity or attinity to the appointing of of of bureau or office or to the person who has immediate a eau or Department where you will be apppointed, within the third degree?	☐ YES [☑ NO				
	b. within the fourth degree (for Local Government Unit - Career Employees)?			□ NO			
35. a. F	lave you ever been found guilty of any administrative offe	☐ YES ☑ NO If YES, give details:					
b. F	Have you been criminally charged before any court?	☐ YES ☑ NO If YES, give details: Date Filed: Status of Case/s:					
any	ve you ever been convicted of any crime or violation of an r court or tribunal?	YES ☑ NO If YES, give details:					
dro	ve you ever been separated from the service in any of the pped from the rolls, dismissal, termination, end of term, fir he public or private sector?	yes ☑ NO If YES, give details:					
	Have you ever been a candidate in a national or local electrangay election)?	☐ YES ☑ NO If YES, give details:					
	Have you resigned from the government service during the ction to promote/actively campaign for a national or local or	☐ YES ☑ NO If YES, give details:					
39. Hav	39. Have you acquired the status of an immigrant or permanent resident of another country?			☐ YES ☑ NO If YES, give details (country):			
	rsuant to: (a) Indigenous People's Act (RA 8371); (b) Magi	[18] [18] [18] [18] [18] [18] [18] [18]					
	77); and (c) Solo Parents Welfare Act of 2000 (RA 8972), peryou a member of any indigenous group?	☑ YES ☐ NO If YES, please specify:					
b. Are	you a person with disability?	☐ YES If YES, please specify	✓ NO				
c. Are	you a solo parent?	☐ YES ☑ NO If YES, please specify ID No:					
41. REF	ERENCES (Person not related by consanguinity or affinity to applicant /	appointee)					
	NAME	ADDRESS	TEL. NO.				
	ROTACIO S. GRAVOSO	VSU VISCA BAYBAY CITY, LEYTE	565-0600-1003	25			
	CHRISTINA A. GABRILLO	VSU VISCA BAYBAY CITY, LEYTE	565-0600-1070				
	ULDERICO B. ALVIOLA	VSU VISCA BAYBAY CITY, LEYTE	565-0600-1023				
cor Phi agr	eclare under oath that I have personally accomplished implete statement pursuant to the provisions of pertine illippines. I authorize the agency head/authorized represer if the terms of the terms of the provisions of pertine in this document of the terms of the personal persona	ent laws, rules and regulations of the ntative to verify/validate the contents state	Republic of the ed herein.	RANDY G. CANA			
PLEAS	nment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) SE INDICATE ID Number and Date of Issuance Iment Issued ID: PHILHEALTH	Ø. €					
-	nse/Passport No.: 13-050045896-9	0: /0: : : : : : : : : : : : : : : : : :					
\vdash	lace of issuance: N/A	Signature (Sign inside the b	Name and Address of the Owner, where the Owner, which is the Owner, which the Owner, which is	Right Thumbmark			
	SUBSCRIBED AND SWORN to before me this	NOV 2024 , affiant exhibiti	ng his/her validly issued	government ID as indicated above.			
		Person Administering Oat	th	CS FORM 212 (Revised 2017), Page 4 of			

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 1, 2011- October 31, 2024
- Position: Messenger/Utility Worker
- Name of Office/Unit: VSU Printing Press/UIMC/MMDC
- Immediate Supervisor: Dr. Ulderico B. Alvola
- Name of Agency/Organization and Location:
 - List of Accomplishments and Contributions (if any)
- Messengerial services for the center (UIMC, Printing Press & MMDC Office)
- Maintain cleanliness & Beautification of MMDC, Printing Press & VSU Campus.
- Do routinary minor repairs of MMDC, Printing Press facilities and assist AV Technician fot the maintenance of airconditioning units, equipment, etc.
- Sorting of printed instructional modules/materials for the (MMDC, Printing Press) to ease production
- Bookbinding (hardbound & Softbound) in VSU Printing Press
 - Summary of Actual Duties

Provide messengerial services for UIMC, VSU Printing Press, and MMDC; maintain cleanliness, perform minor repairs; assist in equipment maintenance; and organize printed materials to streamline production, as well as manage bookbinding at VSU Printing Press.

Attachment to CS Form No. 212

RANDY G. CAÑA

(Signature over Printed Name of Employee/Applicant)

Date: 007, 90, 2004