

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 () ☐ 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	BONCALON		
FIRST NAME	JOSHUA MHEL	NAME EXTENSION (JR., SR)	
MIDDLE NAME	N/A		
3. DATE OF BIRTH (mm/dd/yyyy)	02/17/1993	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship
4. PLACE OF BIRTH	ALBUERA, LEYTE	If holder of dual citizenship, please indicate the details.	<input type="checkbox"/> by birth <input type="checkbox"/> by naturalization
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		Pls. indicate country:
6. CIVIL STATUS	<input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	
7. HEIGHT (m)	1.70	ZIP CODE	House/Block/Lot No. Street
8. WEIGHT (kg)	65		GK VILLAGE POBLACION
9. BLOOD TYPE	O+		Subdivision/Village Barangay
10. GSIS ID NO.	N/A		ALBUERA LEYTE
11. PAG-IBIG ID NO.	121186036223		City/Municipality Province
12. PHILHEALTH NO.	13-025228972-1	ZIP CODE	6542
13. SSS NO.	06-3790309-1	18. PERMANENT ADDRESS	
14. TIN NO.	484-599-315-000	ZIP CODE	House/Block/Lot No. Street
15. AGENCY EMPLOYEE NO.	N/A		SEGUINON
			Subdivision/Village Barangay
			ALBUERA LEYTE
			City/Municipality Province
		ZIP CODE	6542
		19. TELEPHONE NO.	N/A
		20. MOBILE NO.	+639199552829
		21. E-MAIL ADDRESS (if any)	boncalonjm@gmail.com

II. FAMILY BACKGROUND

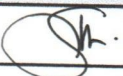
22. SPOUSE'S SURNAME	BONCALON		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	EUSHEBELLE	NAME EXTENSION (JR., SR)	ELIAN FAUSTINE L. BONCALON	09/05/2019
MIDDLE NAME	LAURENTE			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	MORALES			
FIRST NAME	ELVERO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	PONGASI			
25. MOTHER'S MAIDEN NAME				
SURNAME	BONCALON			
FIRST NAME	MA. FATIMA			
MIDDLE NAME	CALUB			

(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	SEGUINON ELEMENTARY SCHOOL	PRIMARY EDUCATION	1999	2005		2005	
SECONDARY	DR. GERONIMO B. ZALDIVAR MEMORIAL SCHOOL O FISHERIES	HIGH SCHOOL	2005	2009		2009	
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A		N/A	
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN COMPUTER SCIENCE (BSCS)	2010	2014		2014	
GRADUATE STUDIES	CEBU INSTITUTE OF TECHNOLOGY-UNIVERSITY	MASTER IN COMPUTER SCIENCE	2016	2018	33 units		

(Continue on separate sheet if necessary)

SIGNATURE		DATE	January 17, 2020	CS FORM 212 (Revised 2017), Page 1 of 4
-----------	---	------	------------------	---

[illegible]

V. WORK EXPERIENCE

[illegible]

SIGNATURE

DATE _____

January 17, 2020

V. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

[illegible]

(Continue on separate sheet if necessary)

VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

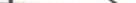
[illegible]




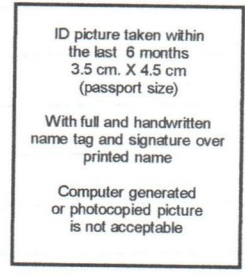

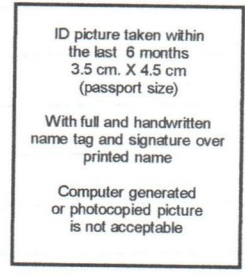

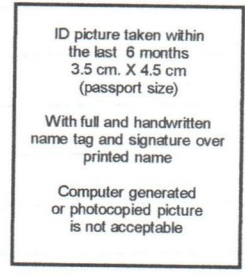

(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE		DATE	January 17, 2020	CS FORM 212 (Revised 2017), Page 3 of 4
-----------	---	------	------------------	---

<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 checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p>Resigned from my job at Kyocera to transfer in academe</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: 33%;">NAME</th><th style="width: 33%;">ADDRESS</th><th style="width: 33%;">TEL. NO.</th></tr></thead><tbody><tr><td>JONAH FLOR V. ORANO</td><td>Visayas State University</td><td>563-7068</td></tr><tr><td>MAGDALENE C. UNAJOAN</td><td>Visayas State University</td><td>563-7068</td></tr><tr><td>WINSTON M. TABADA</td><td>Visayas State University</td><td>563-7068</td></tr></tbody></table>		NAME	ADDRESS	TEL. NO.	JONAH FLOR V. ORANO	Visayas State University	563-7068	MAGDALENE C. UNAJOAN	Visayas State University	563-7068	WINSTON M. TABADA	Visayas State University	563-7068		
NAME	ADDRESS	TEL. NO.													
JONAH FLOR V. ORANO	Visayas State University	563-7068													
MAGDALENE C. UNAJOAN	Visayas State University	563-7068													
WINSTON M. TABADA	Visayas State University	563-7068													
<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>13-025228972</td></tr><tr><td>Date/Place of Issuance:</td><td>Ormoc City, Leyte</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.:	13-025228972	Date/Place of Issuance:	Ormoc City, Leyte	<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;">January 17, 2020</td></tr><tr><td style="text-align: center;">Date Accomplished</td></tr></table>		Signature (Sign inside the box)	January 17, 2020	Date Accomplished
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.:	13-025228972														
Date/Place of Issuance:	Ormoc City, Leyte														
															
Signature (Sign inside the box)															
January 17, 2020															
Date Accomplished															
<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 50%; text-align: center; vertical-align: middle;"><p>PHOTO</p></td><td style="width: 50%; text-align: center; vertical-align: middle;"><p>Right Thumbmark</p></td></tr></table>		<p>PHOTO</p> 	<p>Right Thumbmark</p> 												
<p>PHOTO</p> 	<p>Right Thumbmark</p> 														
<p>SUBSCRIBED AND SWORN to before me this <u>03 FEB 2020</u> affiant exhibiting his/her validly issued government ID as indicated above.</p> <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="text-align: center; padding: 10px;"><p>ATTY. RYSAN C. QUINOCOR</p><p>VSU LEGAL OFFICER</p><p>Person Administering Oath</p></td></tr></table>		<p>ATTY. RYSAN C. QUINOCOR</p> <p>VSU LEGAL OFFICER</p> <p>Person Administering Oath</p>													
<p>ATTY. RYSAN C. QUINOCOR</p> <p>VSU LEGAL OFFICER</p> <p>Person Administering Oath</p>															