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. 1. CS ID No. (Do not fill up. For CSC use only Print legibly. Tick appropriate boxes (and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. 2 SURNAME **GIOMAN** NAME EXTENSION (JR., SR) SR FIRST NAME RANILO MIDDLE NAME VITUALLA 3. DATE OF BIRTH 2/7/1979 16. CITIZENSHIP ✓ Filipino Dual Citizenship (mm/dd/yyyy) by birth by naturalization Pls. indicate country: BAYBAY, LEYTE If holder of dual citizenship. 4 PLACE OF BIRTH please indicate the details Female 5. SEX ✓ Male Married ✓ Single 17. RESIDENTIAL ADDRESS 6 CIVIL STATUS House/Block/Lot No. Widowed Street Separated Zone 7 Other/s: Subdivision/Village Barangay **Baybay City** Leyte 1.67m 7. HEIGHT (m) City/Municipality Province 82 ZIP CODE 6521 8. WEIGHT (kg) 18. PERMANENT ADDRESS 9. BLOOD TYPE Type O House/Block/Lot No. Street Zone 7 10. GSIS ID NO NONE Subdivision/Village Barangay **Baybay City** Leyte 11. PAG-IBIG ID NO. 121-0500-7447 12. PHILHEALTH NO 13-025153297-5 ZIP CODE 6521 13. SSS NO. NONE 19. TELEPHONE NO NONE 14 TIN NO 215 041 922 20. MOBILE NO. 09365327730 15. AGENCY EMPLOYEE NO 21. E-MAIL ADDRESS (if any) N/A FAMILY BACKGROUND DATE OF BIRTH (mm/dd/yyyy) 22. SPOUSE'S SURNAME 23. NAME of CHILDREN (Write full name and list all) NAME EXTENSION (JR., SR) NOT APPLICABLE 12/8/2004 Marylene M. Gioman FIRST NAME Ranilo M. Gioman, Jr. 10/8/2009 MIDDLE NAME Ranil M. Gioman 9/15/2013 NOT APPLICABLE OCCUPATION EMPLOYER/BUSINESS NAME NOT APPLICABLE BUSINESS ADDRESS TELEPHONE NO. GIOMAN 24. FATHER'S SURNAME NAME EXTENSION (JR., SR) FIRST NAME LUCIANO MONTECILLO MIDDLE NAME 25. MOTHER'S MAIDEN NAME SURNAME Vitualla FIRST NAME Elena MIDDLE NAME Caintio (Continue on separate sheet if necessary) HIGHEST LEVEL SCHOLARSHIP/ PERIOD OF ATTENDANCE NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE YEAR LEVEL ACADEMIC HONORS UNITS EARNED (Write in full) (Write in full) GRADUATED (if not graduated) RECEIVED From То **Gacat Elementary School Primary Education** NONE FLEMENTARY 1984 1993 1993 Franciscan College of Immaculate SECONDARY Fourth Year (but not graduated) 1994 1997 NA NONE Conception VOCATIONAL / **NOT APPLICABLE** TRADE COURSE **NOT APPLICABLE** COLLEGE **GRADUATE STUDIES NOT APPLICABLE** SIGNATURE DATE Feb. 22, 2021

IV. CIVIL:	SERVICE ELIGI	BILITY						77-	
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER RATI				DATE OF	March 1879		LICENSE (if applicable)		
SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE			(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT			NUMBER	Date of Validity
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				Continue on separate sh	eet if necessary)	279	14 8265 15		
	EXPERIENCE	Chart from your rooms	week) Oceanie		15 : 15 - 6 - 15 - 16 - 16				
	USIVE DATES	. Start nom your recent	work) Descrip	otion of duties should be indicated in the attack		enieje VVOYA EXI	SALARY/ JOB/ PAY		
(mm/dd/yyyy) From To		POSITION TITLE (Write in full/Do not abbreviate)		DEPARTMENT / AGE (Write in full/	MONTHLY SALARY	GRADE (if applicable)& STEP (Format "00-0")/	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/N)	
	37.1	5. 6		National Coconut Research Center, VSU,		100	INCREMENT		
5/3/2012	2/28/2021	Driver/Chainsaw O	perator		City, Leyte	553.05/day	NA	Contractual	Yes
9/15/2005	2/28/2007	Driver		Bellevue Hon	8800.00	NA	Contractual	Private	
Oct. 2003	7/1/2005	Bus Driver		LOPFA Bus Liner, Kilim, Baybay City			NA	Contractual	Private
3/1/2002	10/18/2003	Tractor Drive	ər	First Forwarder, Co	10000.00	NA	Contractual	Private	
1/1/2002	12/30/2002	Trailer Drive	r	First Forwarder, Co	10000.00	NA	Contractual	Private	
8/1/2000	9/30/2002	Driver		First Forwarder	10000.00	NA	Contractual	Private	
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SIGN	ATURE	my	/		DATE		Feb. 22	, 2021	- North
		000		OS COMPANIES OF ALAP				FORM 212 (Revised 20	17) Page 2 of #

VI, VOLG. TARLWORK OR INVOLVEME	NT IN CIVIC / NON-GOVERNMEN	T / PEOPLE / V	OLUNTARY (ORGANIZATIOI	V/S		
29. NAME & ADDRESS OF ORGANIZATION (Write in full)		INCLUSE	IVE DATES (dd/yyyy)	NUMBER OF HOURS		POSITION / NATURE OF WORK	
NOT APPLIC	:ABLE		Server.		The people		
VII. LEARNING AND DEVELOPMENT (L&	&D) INTERVENTIONS/TRAINING F	onlinue on separale. PROGRAMS AT	TENDED		ial positions)		
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)		INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy) From To		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
NATIONAL CERTIFICATE II (Driving)		4/1/2017	4/1/2017	8		TESDA	
NATIONAL CERTIFICATE II (Shielded Mei	tal Arc Welding - SMAW)	3/18/2020	3/18/2020	8	drama	TESDA	
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by a second	(Cou	ntinue on separate si	heet if necessary)			25.0	
VIII. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)					33. MEMBERSHIP IN ASSOCIATION/ORGANIZATIO (Write in full)	
Driving, Welding Carpentry, Plumbing	NOT APPLICABLE					NOT APPLICABLE	
	Assessment of the contract of					A CONTRACTOR OF THE CONTRACTOR	
	(Con	rânue on separate sh	if nevercary)				
SIGNATURE	I Max	Marie Control of the	ett ii iloondam j	DATE		Feb. 22, 2021	

34. Are you related by consanguinity or affinity to the appointing chief of bureau or office or to the person who has immedia Bureau or Department where you will be apppointed, a. within the third degree?	ng or recommending authority, or to the te supervision over you in the Office,			
b. within the fourth degree (for Local Government Unit - Ca	areer Employees)?	YES NO YES NO If YES, dive details:		
a. Have you ever been found guilty of any administrative of	ffense?	☐ 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 Case/s:		
66. Have you ever been convicted of any crime or violation of a by any court or tribunal?	lave you ever been convicted of any crime or violation of any law, decree, ordinance or regulation y any court or tribunal?			
77. Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, e out (abolition) in the public or private sector?	YES NO If YES, give details:			
38. a. Have you ever been a candidate in a national or local ele 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 election to promote/actively campaign for a national or local	YES INO If YES, give details:			
 Have you acquired the status of an immigrant or permanent 	YES NO If YES, give details (country):			
O. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972). Are you a member of any indigenous group? Are you a person with disability? Are you a solo parent?	gna Carta for Disabled Persons (RA , please answer the following items:	☐ YES ☑ NO If YES, please specify: ☐ YES ☑ NO If YES, please specify ID No: ☐ YES ☑ NO If YES, please specify ID No:	_	
REFERENCES (Person not related by consanguinity or affinity to applicar	it /appointee)			
DR. JOSE L. BACUSMO	ADDRESS	TEL. NO.		
DR. EUTIQUIO E. SUDARIA	VSU, Baybay City, Leyte VSU, Baybay City, Leyte	9192136283 09173065 331		
DR. MARIA JULIET C. CENIZA	VSU, Baybay City, Leyte	0917 309 5016		
I declare under oath that I have personally accomplished this Personal D the provisions of pertinent laws, rules and regulations of the Republic of the verify/validate the contents stated herein. I agree that any misreprofiling of administrative/criminal case/s against me.	ata Sheet which is a true, correct and complete s	latement pursuant to		
icense, etc.) PLEASE INDICATE ID Number and		astikasum.	Management of the last	
overnment Issued ID: Driver's License	Many		-	
O/License/Passport No.: N04-99-440696	Signature (Sign inside the	DOX)	Manager Stranger	
ate/Place of Issuance: June 07, 2007 , Baybay City, Leyte	Feb. 22, 2021 Date Accomplished	Right Thumbmark	_	
SUBSCRIBED AND SWORN to before me this		oiting his/her validly issued government ID as indicated above.		
	Person Administering Oa	th		
	25.6			
	15 M	CS FORM 212 (Revised 201	71 /2	