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.

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) PERSONAL INFORMATION 2 SURNAME BATIDOR NAME EXTENSION (JR SR) FIRST NAME PAULO MIDDLE NAME GONZAGA 3. DATE OF BIRTH 04/30/1995 16. CITIZENSHIP (mm/dd/yyyy) ✓ Filipino Dual Citizenship by birth by naturalization 4. PLACE OF BIRTH Isabel, Leyte If holder of dual citizenship, Pls. indicate country: 5. SEX please indicate the details ✓ Male Female ✓ Single ☐ Married 6 CIVIL STATUS 17 RESIDENTIAL ADDRESS Pasil ☐ Widowed ☐ Separated House/Block/Lot No Street Other/s: Bilwang Subdivision/Village Barangay 7. HEIGHT (m) 1.60 Isabel Levte City/Municipality Province 8. WEIGHT (kg) 59.7 ZIP CODE 6539 9. BLOOD TYPE 18. PERMANENT ADDRESS 0 Pasil House/Block/Lot No. Street 10 GSIS ID NO 2005283365 Bilwana Subdivision/Village Barangay 11 PAG-IBIG ID NO 121207172875 Isabel Levte City/Municipality Province 12. PHILHEALTH NO 130001237102 ZIP CODE 6539 13. SSS NO. None 19. TELEPHONE NO. None 14 TIN NO 340570878 20. MOBILE NO. 09065442887 V00934 15. AGENCY EMPLOYEE NO 21. E-MAIL ADDRESS (if any) paulo.batidor@vsu.edu.ph FAMILY BACKGROUND 22. SPOUSE'S SURNAME NA 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) FIRST NAME NAME EXTENSION (JR., SR) NA NA NA MIDDLE NAME NA NA NA OCCUPATION NA NA NA EMPLOYER/BUSINESS NAME NA NA NA **BUSINESS ADDRESS** NA NA NA TELEPHONE NO NA NA NA FATHER'S SURNAME Batidor NA NA FIRST NAME Galicano NAME EXTENSION (JR., SR) NA NA MIDDLE NAME Wenceslao NA NA 25. MOTHER'S MAIDEN NAME NA NA Gonzaga SURNAME NA NA FIRST NAME Desedelia NA NA MIDDLE NAME Camugao e on separate sheet if necessary) EDUCATIONAL BACKGROUND 26 SCHOLARSHIP NAME OF SCHOOL PERIOD OF ATTENDANCE HIGHEST LEVEL BASIC EDUCATION/DEGREE/COURSE LEVEL ACADEMIC HONORS YEAR UNITS EARNED (Write in full) (Write in full) GRADUATED (if not graduated) RECEIVED From To ELEMENTARY Bilwang Elementary School NA 03/31/2009 06/01/2003 Graduated 2009 Valedictorian SECONDARY **Matlang National High School** NA 06/01/2009 03/31/2013 Graduated 2013 Valedictorian VOCATIONAL / NA TRADE COURSE NA DOST-SEI/ COLLEGE Visayas State University Bachelor of Science in Statistics 06/01/2013 06/14/2017 Graduated 2017 Magna cum laude **GRADUATE STUDIES** NA NA NA NA NA NA NA SIGNATURE DATE 06/30/19 CS FORM 212 (Revised 2017), Page 1 of 4

IV. CIVIL SERVICE ELIGIBILITY 27.							LICENSE (if applicable)		
CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE		RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT			MINATION / CONFERMENT		Date of Validity	
									- Vallariy

			(C	ontinue on separate she	et if necessary)				
	EXPERIENCE	nt. Start from your recen				Juca Estado			
28. INCL	USIVE DATES nm/dd/yyyy)	POSITION T (Write in full/Do not	ITLE	DEPARTMENT / AGE	NCY / OFFICE / COMPANY	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP	STATUS OF APPOINTMENT	GOV'T SERVICE
From	m To			(Write in full/Do not abbreviate)			(Format *00-0*)/ INCREMENT		(Y/ N)
08/01/2016	present	Full-time Inst	tructor	Visayas State University		Php22,147	NA	Contractual	Y
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			-						
	2 2	A de maria							
		B	/ (Co	ontinue on separate shee	THE RESERVE OF THE PARTY OF THE				
SIGNA	ATURE		of Min	DATE	06/00)	19	CS FORM 2	12 (Revised 2017), F	Page 2 of 4

29. NAME & ADDRESS OF ORGANIZATION		INCLUSIV		9			
29. NAME & ADDRESS OF ORGANIZATION (Write in full)		(mm/dd/yyyy) From To		NUMBER OF HOURS		POSITION / NATURE OF WORK	
NA		11000	10				
-							
		Continue on separ	rate sheet if nece:	ssary)			
VII. LEARNING AND DEVELOPMENT (L&D) INTER							
Start from the most recent L&D/training program and include only t	he relevant L&D/trainin	taken for the last	five (5) years for	Division Chief Exec	cutive/Managerial p	ositions)	
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/	TRAINING PROGRAMS	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY	
(Write in full)						(Write in full)	
Caminas Wallahan an Cammunity Futus and Nacida Assas		From	То	00		\[\(\frac{1}{2} \cdot \) \[\frac{1}{2} \cdot \]	
Seminar-Workshop on Community Entry and Needs Assess		01/12/2019		8.0		Visayas State University	
Training Workshop on Selected Quantitative Methods for Previous Formula (Control of the Control	roject Impact	01/07/2019	01/11/2019	40.0		Visayas State University	
Train the Trainers Program		01/10/2018	01/13/2018	32.0		Philippine Statistical Research and Training Institute	
Seminar-Workshop on Classification and Regression Trees	12/04/2017	12/06/2017	24.0		University of the Philippines and Philippine Statistical Association Central Visayas, Inc.		
Training-Workshop on Writing Scientific Paper for Peer-Rev	viewed Publication	10/16/2017	10/18/2017	24.0		Visayas State University	
2018 MTAP-TL Annual Convention		07/27/2017	07/29/2017	24.0		Mathematics Teachers Association of the	
						Philippines Tertiary Level, Inc.	
					4 1 1		
		(Continue on sepa	rate sheet if nece	ssary)			
VIII. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES 32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)					33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
Knows how to use statistical softwares (R, STATA, SPSS)		NA				Mathematics Teachers Association of the	
51414, 5755)	ALTS'				Philippines-Tertiary Level VSU Faculty Association		
					Philippine Statistical Association Central		
618.						Visayas, Inc.	
	800 (1 Mag 15 27) - 120 (10 mag 15 27)						
		, roducting					
		(Continue on sepa	arate sheet if nec	essary)			

34.	Are you related by consanguinity or affinity to appoint on the person who has immediately bureau or Department where you will be appointed,					
	a. within the third degree? b. within the fourth degree (for Local Government Unit - Ca	☐ YES ☑ NO☐ YES ☑ NO				
			If YES, give detai	ils:		
35.	a. Have you ever been found guilty of any administrative o	YES V 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:				
36.	Have you ever been convicted of any crime or violation of any court or tribunal?	☐ YES ☑ NO If YES, give details:				
37.	Have you ever been separated from the service in any of t dropped from the rolls, dismissal, termination, end of term, the public or private sector?	☐ YES ☑ NO If YES, give details:				
38.	A. Have you ever been a candidate in a national or local el Barangay election)?	☐ YES ☑ NO If YES, give details:				
	b. Have you resigned from the government service during election to promote/actively campaign for a national or local	☐ YES ☑ NO If YES, give details:				
39.	Have you acquired the status of an immigrant or permaner	☐ YES ☑ NO If YES, give details (country):				
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma and (c) Solo Parents Welfare Act of 2000 (RA 8972), pleas					
a.	Are you a member of any indigenous group?	☐ YES ☑ NO If YES, please specify:				
b.	Are you a person with disability?	YES If YES, please speci	✓ NO			
C.	Are you a solo parent?	YES If YES, please speci	✓ NO ify ID No:			
41.	REFERENCES (Person not related by consanguinity or affinity to applic	ant /appointee)	45			
	NAME	ADDRESS	TEL. NO.			
	Dr. Jacqueline M. Guarte	Visca Baybay City, Leyte	09164057852			
	Dr. Norberto E. Milla	Visca Baybay City, Leyte	09358590890			
42.	I declare under oath that I have personally accomplished statement pursuant to the provisions of pertinent laws, rule the agency head / authorized representative to vermisrepresentation made in this document and its attackagainst me.	es and regulations of the Republic of the Phirifylvalidate the contents stated herein.	lippines. I authorize I agree that any	PAULO S. BATIDOR		
F	Covernment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Sovernment Issued ID: V01020	Bullin				
lŀ	O/License/Passport No.: ate/Place of Issuance: 08/01/17	ox)	Pint Turkerd			
-	SUBSCRIBED AND SWORN to before me this 1 9	Date Accomplished	his/her validly issued go	Right Thumbmark		
		10/10		Not fill of the desired above.		
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		ath				