CS Form No. 212

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 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. PERSONAL INFORMATION 1. CSID No. (Do not fill up. For CSC use only) 2 SURNAME **ORAÑO** FIRST NAME PAMELA NAME EXTENSION (JR., SR) MIDDLE NAME POSAS DATE OF BIRTH (mm/dd/yyyy) 8/12/1975 16. CITIZENSHIP ✓ Filipino Dual Citizenship by birth by naturalization 4. PLACE OF BIRTH BAYBAY CITY, LEYTE If holder of dual citizenship, Pls. indicate country: 5 SEX Male please indicate the details ✓ Female Single 6 CIVIL STATUS ✓ Married 17. RESIDENTIAL ADDRESS PUROK ILANG-ILANG Widowed Separated House/Block/Lot No Street Other/s: BRGY, MARCOS Subdivision/Village 7. HEIGHT (m) Barangay 1.55 m BAYBAY CITY LEYTE 8. WEIGHT (kg) City/Municipality 60 ZIP CODE 6521 9. BLOOD TYPE BAYBAY CITY, LEYTE 18. PERMANENT ADDRESS PUROK ILANG-ILANG House/Block/Lot No 10. GSIS ID NO. Street 000-6258-8764-0 BRGY MARCOS Subdivision/Village 11. PAG-IBIG ID NO. Barangay 1210-1877-5083 BAYBAY CITY LEYTE City/Municipality 12 PHILHEALTH NO. 13-050060519-8 ZIP CODE 6521 13. SSS NO. 06-2588764-0 19. TELEPHONE NO. 053-563-7534 14. TIN NO. 949-072-246 20 MOBILE NO 09167668828 15. AGENCY EMPLOYEE NO. V000785 21. E-MAIL ADDRESS (if any) pagel.060898@gmail.com FAMILY BACKGROUND 22. SPOUSE'S SURNAME ORAÑO 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) FIRST NAME ANGELO NAME EXTENSION (JR., SR) JUNE ANTONELLA P. ORAÑO 6/18/1999 MIDDLE NAME PEDROSA MARIELL NICOLE P. ORAÑO 10/11/2000 OCCUPATION SEAFARER PHOENIELOPE P. ORAÑO 12/11/2006 EMPLOYER/BUSINESS NAME MICHAELMAR PHILIPPINES INCORPORATED MARTINA ANGELA P. ORAÑO 4723 ARELLANO ST.CORNER ZOBEL , ROXAS ST. BRGY PALANAN, 04/082013 BUSINESS ADDRESS MAKATI CITY TELEPHONE NO (02) 403 2480 24. FATHER'S SURNAME POSAS FIRST NAME **OSCAR** NAME EXTENSION (JR., SR) MIDDLE NAME **BAGARINAO** 25. MOTHER'S MAIDEN NAME MARTINA GODINES BAGARINAO SURNAME POSAS FIRST NAME MARTINA MIDDLE NAME BAGARINAO (Continue on separate sheet if necessary) **EDUCATIONAL BACK** NAME OF SCHOOL LEVEL BASIC EDUCATION/DEGREE/COURSE SCHOLARSHIP PERIOD OF ATTENDANCE HIGHEST LEVEL (Write in full) ACADEMIC YEAR (Write in full) GRADUATED (if not graduated) From To RECEIVED ELEMENTARY VISCA FOUNDATION ELEMENTARY SCHOOL 1982 1988 SECONDARY EXPERIMENTAL RURAL HIGHSCHOOL 1988 1992 1992 VOCATIONAL / TRADE COURSE COLLEGE ISAYAS STATE COLLEGE OF AGRICULTURE BACHELOR OF SCIENCE IN STATISTICS 1997 1997 **GRADUATE STUDIES** VISAYAS STATE UNIVERSITY MASTER IN MANAGEMENT 2014 **ONGOING 40 UNITS** SIGNATURE ramo DATE

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27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE			RATING (If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT			LICENSE (if a	Date of Validity
Civil	Service Profe	essional Eligibility	80.00	7/22/2007/	SAINT JOSEPH CO	LLEGE, MAA	SIN CITY		Validity
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			(Contin	nue on separate shee	t if necessary)				
V. WORK EX									
The second second second second	te employment. USIVE DATES	Start from your recent work)	Description of dutie	es should be indicated in	the attached Work Exper	ience sheet.	SALARY/ JOB/		
	nm/dd/yyyy)	POSITION TI		DEPARTMENT / AGE	NCY / OFFICE / COMPANY	MONTHLY	PAY GRADE (if applicable)&		GOVT
From	То	(Write in full/Do not a	abbreviate)	(Write in full/	Do not abbreviate)	SALARY	STEP (Format "00-0")/	APPOINTMENT	SERVICE (Y/N)
1/1/2017	present	ADMINISTRATIVE AIDE I	V	QUALITY ASSURAN	ICE CENTER	12,155.00	INCREMENT 04-01	PERMANENT	Y
12/19/2016	12/31/2016	ADMINISTRATIVE AIDE I	V	QUALITY ASSURAN	ICE CENTER	11,658.00	04-01		100
7/1/2016	12/18/2016	ADMINISTRATIVE AIDE I				A STATE OF THE STA		PERMANENT	Y
				QUALITY ASSURAN		10,985.00	03-02	PERMANENT	Y
6/30/2016	1/1/2016	ADMINISTRATIVE AIDE I	11	QUALITY ASSURAN	ICE CENTER	10,883.00	03-01	PERMANENT	Υ
7/1/2013	12/31/2015	ADMINISTRATIVE AIDE I	1	QUALITY ASSURAN	ICE CENTER	10,401.00	03-01	PERMANENT	Y
5/16/2013	6/30/2013	ADMINISTRATIVE AIDE I	1	QUALITY ASSURAN	ICE CENTER	8,853.90		CASUAL	Υ
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			Tana		DATE	1 4		Revised 2017), I	

29. NAME & ADDRESS OF ORGANIZATION	ANIZATION INCLUSIVE DATES (mm/dd/yyyy) From To		NUMBER OF HOURS	POSITION / NATURE OF WORK		
(Write in full)						
	Floit	10				
				Tuike Service		
None	None	None	None	None		
II. LEARNING AND DEVELOPMENT (L&D) INTE	RVENTIONS/		ROGRAMS ATT		lel/Executive/Managerial positions)	
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
SO 9001:2015 Enhancement Seminar -Workshop on nternal Quality Audit	3/2/2017	3/3/2017	16	Technical	VISAYAS STATE UNIVERSITY	
eminar-Workshop on 5s & Records Management	2/18/2017	2/18/2017	8	Technical	VISAYAS STATE UNIVERSITY	
Vorkshop to Review and Improve Citizen's Charter er CSC MC No. 14, s. 2016	9/1/2016	9/1/2016	8	Technical	VISAYAS STATE UNIVERSITY	
rientation on " Meeting your Horizontal Type" for all State Universitites and Colleges	8/22/2016	8/23/2016	16	Technical	COMMISSION ON HIGHER EDUCATION	
onal Orientation on Simulation Workshop on the evelling of State Universities and Colleges for FY	7/21/2016	7/21/2016	8	Technical	COMMISSION ON HIGHER EDUCATION	
forkshop for AACCUP Institutional Accreditation (2nd Round)	4/10/2016	4/12/2016	24	Technical	VISAYAS STATE UNIVERSITY - QUALITY ASSURANCE CENTER	
eminar Workshop on the Implementation of Outcomes Based Eduaction - Facilitator	4/4/2015	4/5/2015	16	Technical	VISAYAS STATE UNIVERSITY	
AY 2014-2015 HEMIS Data Collection on using the CHED Electronic Collection and Knowledge	8/1/2014	8/1/2014	8	Technical	COMMISSION ON HIGHER EDUCATIO	
nduction Oath Taking and Orientation of Newly lired Promoted Administrative Staff	7/29/2013	7/29/2013	8	Technical	VISAYAS STATE UNIVERSITY -Office the Director for Administration and Human Resource Development	
Planning Workshop for Program Accreditation	2/8/2013	2/8/2013	8	Technical	VISAYAS STATE UNIVERSITY - QUALITY ASSURANCE CENTER	
Personality Development for Frontliners	8/20/2013	8/20/2013	8	Technical	VISAYAS STATE UNIVERSITY -Office the Director for Administration and Human Resource Development	
	1 100 y		1 00 p (100)			
	288					
	(Continu	ue on separate sh	neet if necessary)			
VIII. OTHER INFORMATION 31. SPECIAL SKILLS and HOBBIES 32.	NON-ACADE	EMIC DISTINCTIO	NS / RECOGNITION		MEMBERSHIP IN 33. ASSOCIATION/ORGANIZATION	
2 2 3 3 4 4 4 5 5 5 6 5	12014112	(Write in full) Visayas State University Credit				
NOTARY PUBLIC					Cooperative Leyte State University Administrative Personnel Association	
	TRISTIP 3TV32-VACUAG 0363010 010					
			BOLL OF AT			
	(Contin	nue on separate s	heet If necessary)		l Alimi.	
SIGNATURE	day	to		DATE	4/11/11	

24						
34.	Are you related by consanguinity or affinity to point chief of bureau or office or to the person who has immediately					
	Bureau or Department where you will be apppointed,	ate supervision over you in the Office,				
	a. within the third degree?		☐ YES ☑ NO			
	b. within the fourth degree (for Local Government Unit - C	YES NO				
	b. Walli ale fedial degree (for Eeea Coverniteit elle - C	area Employees):	If YES, give details:			
			II 1E5, give details.			
35	a. Have you ever been found guilty of any administrative	offense?				
۵۰.	and the state of t	onorios:	YES NO			
			If YES, give details:			
	b. Have you been criminally charged before any court?	description	YES NO			
			If YES, give details:			
			Date Filed:			
	Herea years a combined as a superior of the state of the		Status of Case/s:			
36.	Have you ever been convicted of any crime or violation of by any court or tribunal?	any law, decree, ordinance or regulation	YES NO			
		Anna cakera a cham	If YES, give details:			
	Contraction of the second of the second of	entre les comparents de la comparent				
37.	Have you ever been separated from the service in any of	the following modes: resignation,	YES NO			
	retirement, dropped from the rolls, dismissal, termination, out (abolition) in the public or private sector?	end of term, finished contract or phased	If YES, give details:			
38	Have you ever been a candidate in a national or local e	election held within the last year (except				
JU.	Barangay election)?	noodon flore mailif uie last year (except	YES VES IN details:			
			If YES, give details:			
	 b. Have you resigned from the government service during election to promote/actively campaign for a national or loc 	the three (3)-month period before the last	YES NO			
			If YES, give details:			
39.	Have you acquired the status of an immigrant or permane	ent resident of another country?	YES NO			
	Yellowell State 2 Veget - Eastwart		If YES, give details (country):			
40						
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) N	flagna Carta for Disabled Persons (RA				
a.	7277); and (c) Solo Parents Welfare Act of 2000 (RA 897)	2), please answer the following items:	The state of the s			
	Are you a member of any indigenous group?		YES NO			
b.	Are you a person with disability?	. 概 · 数据公司 · 经现金	If YES, please specify:			
	VINE WILL STATE CANADA CAMELY		If YES, please specify ID No:			
C.	Are you a solo parent?		YES V NO			
	A STATE OF THE BUT THE BUT THE STATE OF THE		If YES, please specify ID No:			
41.	REFERENCES (Person not related by consanguinity or affinity to applica	ant /appointee)				
	NAME	ADDRESS	TEL NO.			
	SULPECIO BANTUGAN		IEL NO.			
_	SULFECIO BANTUGAN	MARCOS, BAYBAY CITY, LEYTE	26			
	ANDRELI PARDALES	GUADALUPE, BAYBAY CITY, LEYTE	5			
	CRISANTO A. MAZO					
42.		MARCOS, BAYBAY CITY, LEYTE				
	I declare under oath that I have personally accomplish complete statement pursuant to the provisions of pert	ed this Personal Data Sheet which is a t	rue, correct and			
	rimphiles. I authorize the agency head/authorized rev	presentative to verifylyalidate the content	alated bearing the second seco			
	discourse that any misrepresentation made in this do	ocument and its attachments shall cause	s stated herein.			
	administrative/criminal case/s against me.					
G	Overment Issued ID * 2					
PI	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) LEASE INDICATE ID Number and Date of Issuance		A SAME AND			
	overnment Issued ID: GSIS UMID CARD	man				
-	/License/Passport No.: 000-6258-8764-0	y cora				
-		Signature (Sign inside the bi	DX)			
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	SUBSCRIBED AND SWORN to before me this	APR 1 9 2017 , affiant exhibiting	g his/her validly issued government ID as indicated above.			
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