

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.

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)

I. PERSONAL INFORMATION

2. SURNAME	GORNE		
FIRST NAME	NELLO	NAME EXTENSION (JR., SR)	
MIDDLE NAME	DEGRACIA		
3. DATE OF BIRTH (mm/dd/yyyy)	11/9/1959	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:
4. PLACE OF BIRTH	Santa Fe, Matalom, Leyte	If holder of dual citizenship, please indicate the details.	Philippines
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		
6. CIVIL STATUS	<input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	House No. 2 First Street Extension House/Block/Lot No. Street Visca Pangasugan Subdivision/Village Barangay Baybay City Leyte City/Municipality Province
7. HEIGHT (m)	1.78	ZIP CODE	6521-A
8. WEIGHT (kg)	70		
9. BLOOD TYPE	B	18. PERMANENT ADDRESS	N/A N/A House/Block/Lot No. Street Purok San Francisco Santa Fe Subdivision/Village Barangay Matalom Leyte City/Municipality Province
10. GSIS ID NO.	021-1520-6455-3	ZIP CODE	6526
11. PAG-IBIG ID NO.	1210-2274-1112		
12. PHILHEALTH NO.	180000265223	19. TELEPHONE NO.	053 522 7981
13. SSS NO.	06-0995671-7	20. MOBILE NO.	0997 257 4597
14. TIN NO.	142-089-566	21. E-MAIL ADDRESS (if any)	nello.gorne@vsu.edu.ph
15. AGENCY EMPLOYEE NO.	V00857		

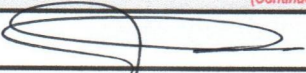
II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	GORNE		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	JOAN	NAME EXTENSION (JR., SR)	DANIEL JONIEL TULIAO GORNE	11/10/1996
MIDDLE NAME	TULIAO		HANNAH KRYSTIL TULIAO GORNE	8/23/2003
OCCUPATION	Homemaker			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	Deceased			
FIRST NAME	N/A	NAME EXTENSION (JR., SR)		
MIDDLE NAME	N/A			
25. MOTHER'S MAIDEN NAME				
SURNAME	DEGRACIA			
FIRST NAME	DOMINGA			
MIDDLE NAME	ABAPO		(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	Santa Fe Community School	Elementary	1967	1973		1973	Valedictorian
SECONDARY	Bato School of Fisheries	High School	1973	1978		1978	N/A
VOCATIONAL / TRADE COURSE							
COLLEGE	Visayas State College of Agriculture	Bachelor of Science in Agriculture major in Agronomy	1978	1983		1983	COCOFED Scholar
GRADUATE STUDIES	Visayas State College of Agriculture	Master of Science major in Agronomy	1983	1988		1988	N/A
	University of the Philippines - Los Baños	Doctor of Philosophy major in Agronomy	1999	2001	Completed Academic Requirements		CHED-FAFE
	Central Mindanao University	Doctor of Philosophy major in Agronomy	2016	2018		2018	VSU/CHEDK12

(Continue on separate sheet if necessary)

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IV. CIVIL SERVICE ELIGIBILITY					
27.	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)
					NUMBER Date of Validity
	Career Service Eligibility: Sub-professional	83.76%	12/6/1981	TACLOBAN CITY	
	Career Service Eligibility: Professional	73.00%	7/17/1983	CEBU CITY	

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE							
(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.							
28. INCLUSIVE DATES (mm/dd/yyyy)		POSITION TITLE (Write in full/Do not abbreviate)	DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable) & STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOVT SERVICE (Y/ N)
From	To						
7/1/2016	Present	Assistant Professor III	Department of Agronomy, Visayas State University			Regular-Permanent	Y
10/1/2015	6/30/2016	Assistant Professor I	Department of Agronomy, Visayas State University			Regular-Temporary	Y
7/1/2014	9/30/2015	Instructor III	Department of Agronomy, Visayas State University			Regular-Temporary	Y
6/24/2013	6/30/2014	Part Time Instructor	Department of Agronomy and Soil Science, Visayas State University			Contractual	Y
10/1/2006	9/30/2012	Soil Scientist	Reforestation Department, Syarikat Samling Timber Sdn Bhd			Contractual	N
11/1/2004	9/30/2006	Assistant Professor I	College of Agricultural Sciences and Natural Resources, Northern Mindanao State Institute of Science and Technology			Permanent	Y
11/1/2001	10/31/2004	Instructor III	College of Agricultural Sciences and Natural Resources, Northern Mindanao State Institute of Science and Technology			Permanent	Y
2/3/1997	10/31/2001	Instructor I	College of Agricultural Sciences and Natural Resources, Northern Mindanao State Institute of Science and Technology			Permanent	Y
11/24/1990	11/15/1996	Researcher III	Resources Planning and Research Generation - Paper Industries Corporation of the Philippines			Permanent	N
2/1/1990	11/15/1990	Municipal Trade and Industry Officer	Department of Trade and Industry - Baybay,			Contractual	Y
6/1/1986	12/31/1988	Science Research Assistant	Department of Agronomy and Soil Science, Visayas State College of Agriculture			Contractual	Y
2/1/1983	5/31/1986	Research Assistant	Department of Agronomy and Soil Science, Visayas State College of Agriculture			Contractual	Y

(Continue on separate sheet if necessary)

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










(Continue on separate sheet if necessary)

	MEMBER OF AN ASSOCIATION OR ORGANIZATION
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(Continue on separate sheet if necessary)

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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, a. within the third degree? b. within the fourth degree (for Local Government Unit - Career Employees)?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details: _____												
35. a. Have you ever been found guilty of any administrative offense? b. Have you been criminally charged before any court?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ Date Filed: _____ Status of Case/s: _____												
36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____												
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?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details: _____ Resigned from NORMISIST as I went to Malaysia to work as Soil Scientist.												
38. 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 three (3)-month period before the last election to promote/actively campaign for a national or local candidate?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details: _____												
39. Have you acquired the status of an immigrant or permanent resident of another country?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details (country): _____												
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: a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____												
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)													
<table><thead><tr><th>NAME</th><th>ADDRESS</th><th>TEL. NO.</th></tr></thead><tbody><tr><td>BERTA C. RATILLA</td><td>DA, VSU, BAYBAY CITY, LEYTE</td><td>563-7636</td></tr><tr><td>TOMAS A. AUSTRAL, JR.</td><td>CASNR, CSU, BUTUAN CITY</td><td>N/A</td></tr><tr><td>SHERWIN N. CONCEPCION</td><td>STA. FE, MATALOM, LEYTE</td><td>N/A</td></tr></tbody></table>		NAME	ADDRESS	TEL. NO.	BERTA C. RATILLA	DA, VSU, BAYBAY CITY, LEYTE	563-7636	TOMAS A. AUSTRAL, JR.	CASNR, CSU, BUTUAN CITY	N/A	SHERWIN N. CONCEPCION	STA. FE, MATALOM, LEYTE	N/A
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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.													
<table><tr><td>Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</td></tr><tr><td>Government Issued ID: UMID</td></tr><tr><td>ID/License/Passport No.: 02038 5140 6973 802</td></tr><tr><td>Date/Place of Issuance: N/A</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: UMID	ID/License/Passport No.: 02038 5140 6973 802	Date/Place of Issuance: N/A	<table><tr><td></td></tr><tr><td>Signature (Sign inside the box)</td></tr><tr><td>November 18, 2019</td></tr><tr><td>Date Accomplished</td></tr></table>		Signature (Sign inside the box)	November 18, 2019	Date Accomplished				
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SUBSCRIBED AND SWORN to before me this <u>20 NOV 2019</u> , affiant exhibiting his/her validly issued government ID as indicated above.													
<table><tr><td> ATTY. RYSAN C. GUINOCOR VSU LEGAL OFFICER</td></tr><tr><td>Person Administering Oath</td></tr></table>		 ATTY. RYSAN C. GUINOCOR VSU LEGAL OFFICER	Person Administering Oath										
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