CS Form No. 212 Revised 2017

## **PERSONAL DATA SHEET**

| concerned.                      | on made in the Personal Data Sheet and the<br>O FILLING OUT THE PERSONAL DATA SHEE |  |                             | DS FORM.   |  |  |                     |  |  |
|---------------------------------|--|--|-----------------------------|--|--|--|---------------------|--|--|
|                                 | and use separate sheet if necessary. Indicate N/                                   |  |                             |  | CS ID No.  | 46   | (Do not fill up. Fo | r CSC use only)                                |  |
| 2. SURNAME                      | BAGARINAO  |  |                             |  |  |  |                     |  |  |
|                                 | NAME EYTENSION ( IR. SP) n/a   |  |                             |  |  |  |                     |  |  |
| FIRST NAME                      | JUNVIC   |  |                             |  |  |  |                     |  |  |
| MIDDLE NAME                     | BANDE  |  |                             |  |  |  |                     |  |  |
| 3. DATE OF BIRTH (mm/dd/yyyy)   | 6/16/1988  | 6/16/1988 16. CITIZENSHIP                |                             |  | ☑ Filipino ☐ Dual Citizenship ☐ by birth ☑ by naturalization |  |                     |  |  |
| 4. PLACE OF BIRTH               | Brgy.Marcos Baybay City Leyte  | If holder of dual citizens               | enship, Pls. indicate co    |  |  | untry:   |                     |  |  |
| 5. SEX                          | ✓ Male ☐ Female  | please indicate the det                  | etails.                     |  |  |  |                     | -  |  |
| 6 CIVIL STATUS                  | ✓ Single   | 17. RESIDENTIAL ADDRESS                  |                             | buse/Block/Lot No.  Street  Marcos  ubdivision/Village  Barangay |  |  |                     |  |  |
| 7. HEIGHT (m)                   | 168 cm   |  | Baybay                      |  |  | Leyte  |                     |  |  |
| 8 WEIGHT (kg)                   | 74.7 kl  | ZIP CODE                                 | City/Municipality 6521      |  |  | Province   |                     |  |  |
| 9. BLOOD TYPE                   | 0+   | 18. PERMANENT ADDRESS                    | 0021                        |  |  |  |                     |  |  |
| 10. GSIS ID NO.                 | 021-1996-6945-8  |  | House/Block/Lo.             |  | M  |  | Street<br>Marcos    | Marcos   |  |
| 11. PAG-IBIG ID NO.             | 121202294955   |  | Subdivision/Village  Baybay |  | Barangay <b>Leyte</b>  |  |                     |  |  |
| 12. PHILHEALTH NO.              | 13-000109044-6   | ZIP CODE                                 |                             | 6521   |  | Province   |                     |  |  |
| 13. SSS NO.                     | n/a  | 19. TELEPHONE NO.                        |                             | 563-7229   |  |  |                     | ·  |  |
| 14. TIN NO.                     | <b>437-579-665</b> 20. MOBILE NO.  |  |                             | 09362778250 / 09392621233  |  |  |                     |  |  |
| 15. AGENCY EMPLOYEE NO.         | V01103 21. E-MAIL ADDRESS (if any)   |  |                             | Ē  | Bandejhu   | n4@gmail.co  | <u>m</u>            |  |  |
| IL FAMILY BACKGROUND            |  |  | respective of the           | Section 1  |  |  |                     | PART CALL                                      |  |
| 22. SPOUSE'S SURNAME FIRST NAME | n/a  | NAME EXTENSION (JR., SR)                 | 23. NAME of Ch              |  | full name and  | list all)  | DATE OF BIRT        | H (mm/dd/yyyy)                                 |  |
| MIDDLE NAME<br>OCCUPATION       |  |  |                             |  | 1/a  |  |                     |  |  |
| EMPLOYER/BUSINESS NAME          |  |  |                             |  |  |  |                     |  |  |
| BUSINESS ADDRESS                |  |  |                             |  |  |  |                     |  |  |
| TELEPHONE NO.                   |  |  |                             |  |  |  |                     |  |  |
| 24. FATHER'S SURNAME            | BAGARINAO  | JR.                                      |                             |  |  |  |                     |  |  |
| FIRST NAME                      | VICENTE  | NAME EXTENSION (JR., SR)                 |                             |  |  |  |                     |  |  |
| MIDDLE NAME                     | TOLERO   |  |                             |  |  |  |                     |  |  |
| 25. MOTHER'S MAIDEN NAME        | MAZO   |  |                             |  |  |  |                     |  |  |
| SURNAME                         | BAGARINAO  |  |                             | ***************************************                          |  |  | V.                  |  |  |
| FIRST NAME                      | AIDA   |  |                             |  |  |  |                     |  |  |
| MIDDLE NAME                     | BANDE  |  |                             | (Co  | ontinue on sej   | parate sheet if neces                                | sary)               |  |  |
| III. EDUCATIONAL BACKGI         | ROUND  |  |                             |  |  |  |                     |  |  |
| 26. LEVEL                       | NAME OF SCHOOL<br>(Write in full)  | BASIC EDUCATION/DEGRE<br>(Write in full) | EE/COURSE                   | PERIOD OF A  | ATTENDANCE To  | HIGHEST LEVEL/<br>UNITS EARNED<br>(if not graduated) | YEAR<br>GRADUATED   | SCHOLARSHIP/<br>ACADEMIC<br>HONORS<br>RECEIVED |  |
| ELEMENTARY                      | San Agustine Elementary school   | Primary                                  |                             | 6/1/1986   | 3/142002   | Graduate   | 2002                | n/a  |  |
| SECONDARY                       | Bunga National High School   | Secondary                                | Secondary                   |  | 3/28/2007  | Graduate   | 2007                | n/a  |  |
| VOCATIONAL /<br>TRADE COURSE    | n/a  |  |                             |  |  |  |                     |  |  |
| COLLEGE                         | Visayas State University   | Bachelor of Animal S                     | Science                     | 6/5/2007   | 3/31/2009  | 2nd year   | n/a                 | n/a  |  |
| GRADUATE STUDIES                | n/a  |  |                             |  |  |  |                     |  |  |
| NOULTUS-                        |  | (Continue on separate sheet if nece      | essary)                     |  | TE   | /  | 10                  |  |  |
| SIGNATURE                       |  |  |                             | DA   | ITE  | 6/1  | 12022               |  |  |

| CAREE     | R SERVICE/ RA 1080 (                     | BOARD/ BAR) UNDER                                 | RATING          | DATE OF                     |   |                   |   | LICENSE (if a               | pplicable)               |
|-----------|--|---|-----------------|-----------------------------|---|-------------------|---|-----------------------------|--------------------------|
|           | SPECIAL LAWS/ C<br>ANGAY ELIGIBILITY / D | ES/CSEE   | (If Applicable) | EXAMINATION /<br>CONFERMENT | PLACE OF EXAMINATION / CONFERMENT       |                   | RMENT   | NUMBER                      | Date of<br>Validity      |
| NON-F     | PROFESSIONAL DRI                         | OFESSIONAL DRIVER LICENSE n/a 7/4/2017 LTO BAYBAY |                 |                             |   |                   | H1217001671   | 6/16/202                    |                          |
|           |  |   | -               |                             |   |                   |   |                             |                          |
|           |  |   |                 |                             |   |                   |   |                             |                          |
| WORK E    | XPERIENCE                                | That from you'r strend                            |                 | ntinue on separate sheet    | if necessary) indicated in the attached | Work Eyno         | for ye should   | 2016<br>2016<br>2016        |                          |
| INCLU     | ISIVE DATES m/dd/yyyy)                   | POSITION TI<br>(Write in full/Do not              | TLE             | DEPARTMENT / AG             | ENCY / OFFICE / COMPANY                 | MONTHLY<br>SALARY | SALARY! JOB! PAY<br>GRADE (if<br>applicable)& STEP<br>(Format *00-0")/<br>INCREMENT | STATUS OF<br>APPOINTMENT    | GOVT<br>SERVIC<br>(Y/ N) |
| 0/1/2018  | PRESENT                                  | Admin. Ai   | de I            | Philrootcron                | os Research Center                      |                   | SG-1  | Casual                      | у                        |
| 7/1/2018  | 9/30/2018                                | Admin.Suppo                                       |                 |                             | os Research Center                      | 12000.00          | n/a   | JO                          | у                        |
| //16/2013 | 6/30/2018                                | Utility Mess                                      |                 |                             | os Research Center                      | 5720.00           | n/a   | JO                          | у                        |
| 6/1/2012  | 6/30/2013                                | Utility Wo  |                 | -                           | nt of Horticulture                      | 5280.00           | n/a   | JO                          | у                        |
| 4/2/2010  | 12/10/2011                               | LandSca   | per             | High                        | Way Garden                              | 2500.00           | n/a   | con                         | N                        |
|           |  |   |                 |                             |   |                   |   |                             |                          |
| SIGN      | ATURE                                    |   | (C              | ontinue on separate shee    | et if necessary)  DATE                  |                   | 6/1/  | 2022<br>CSFORM 212 (Revised |                          |

| VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT /   | PEOPLE / VOL                | UNTARY OR          | GANIZATION/S    |                               |  |  |  |
|---|-----------------------------|--------------------|-----------------|-------------------------------|--|--|--|
| 29. NAME & ADDRESS OF ORGANIZATION (Write in full)  | INCLUSIV<br>(mm/dx          |                    | NUMBER OF HOURS | POSITION / NATURE OF WORK     |  |  |  |
| N/A   |                             |                    |                 |                               |  |  |  |
|   |                             |                    | -               |                               |  |  |  |
|   |                             |                    |                 |                               |  |  |  |
|   |                             |                    |                 |                               |  |  |  |
|   |                             |                    |                 |                               |  |  |  |
|   | -                           |                    |                 |                               |  |  |  |
|   |                             | Court Con          |                 |                               |  |  |  |
| (Co   | ntinue on separate s        | sheet if necessary |                 |                               |  |  |  |
| VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PR   | OGRAMS ATTE                 | ENDED              |                 |                               |  |  |  |
| Start from the most recent L&D/baining program and include only the relevant L&D/baining taken for  |                             | INCLUSIVE DATES OF |                 | Type of LD                    |  |  |  |
| 30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)   | ATTENDANCE<br>(mm/dd/yyyy)  |                    | NUMBER OF HOURS | ( Managerial/<br>Supervisory/ | CONDUCTED/ SPONSORED BY<br>(Write in full)   |  |  |
|   | From                        | То                 |                 | Technical/etc)                |  |  |  |
| Orientation of Newly-Hired Admin Personel   | 9/2/2019                    | 9/2/2019           | 6hours          | Supervisory                   | Dr. Lourdes B. Cano  |  |  |
| Orientation on Basic Custumer Service and Work Value  | 9/6/2017                    | 9/6/2017           | 6hours          | Managerial                    | Dr. Lourdes B. Cano  |  |  |
| Seminar on Defensive Driving  | 10/26/2016                  | 10/26/2016         | 5hours          | Technical                     | Atty. LedwinoR. Macariola  |  |  |
|   | -                           |                    |                 |                               |  |  |  |
|   |                             |                    |                 |                               |  |  |  |
|   |                             |                    |                 |                               |  |  |  |
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| 2 1   |                             |                    |                 |                               |  |  |  |
|   |                             |                    |                 |                               |  |  |  |
| ENNEY TO THE CONTROL OF THE CONTROL | ntinue on separate :        | sheet if necessar  | y)              |                               |  |  |  |
| VIII. OTHER INFORMATION   |                             | 111                |                 |                               | The state of the s |  |  |
| 31. SPECIAL SKILLS and HOBBIES 32. NO   | N-ACADEMIC DISTIN<br>(Write | NCTIONS / RECO     | GNITION         |                               | 33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)   |  |  |
| Driving (2wheels)   |                             |                    |                 |                               |  |  |  |
| Hiking  | N/A                         |                    |                 |                               | N/A  |  |  |
| Basketbali  |                             |                    |                 |                               |  |  |  |
|   |                             |                    |                 |                               |  |  |  |
|   |                             |                    |                 |                               |  |  |  |
|   | ontinuo                     | chant if           | ad.             |                               |  |  |  |
| SIGNATURE 4   | ontinue on separate         | sneet it necessar  |                 | ATE                           | 6/1/2022   |  |  |
|   | _                           |                    |                 |                               | CS FORM 212 (Revised 2017), Page 3 of 4  |  |  |

| 34.             | Are you related by consanguinity or affinity to the appointing chief of bureau or office or to the person who has immediate Bureau or Department where you will be appointed,  |  |  |                |  |  |
|-----------------|--|--|--|----------------|--|--|
|                 | a. within the third degree?  | YES VO   |  |                |  |  |
|                 | b. within the fourth degree (for Local Government Unit - Car   | ☐ YES ☐ NO If YES, give details:   |  |                |  |  |
| 35.             | a. Have you ever been found guilty of any administrative offe  | ☐ YES ☑ NO If YES, give details:   |  |                |  |  |
|                 | b. Have you been criminally charged before any court?  | ☐ YES  |  |                |  |  |
| 36.             | Have you ever been convicted of any crime or violation of an by any court or tribunal?   | ☐ YES ☑ NO If YES, give details:   |  |                |  |  |
| 37.             | Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, er 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<br>Barangay election)?  | YES  |  |                |  |  |
|                 | b. Have you resigned from the government service during the 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 permanent  | ☐ YES ☑ NO If YES, give details (country):   |  |                |  |  |
| 40.<br>a.<br>b. | Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mar 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?   | ☐ YES ☑ NO If YES, please specify: ☐ YES ☑ NO If YES, please specify ID No:        |  |                |  |  |
| · .             | Are you a solo parent?   |  | YES V NO If YES, please specify ID No:       |                |  |  |
| 41.             | REFERENCES (Person not related by consanguinity or affinity to applicant   | /appointee)  |  |                |  |  |
|                 | NAME   | ADDRESS  | TEL. NO.                                     |                |  |  |
|                 | Dr. Erlinda A. Vasquez   | Visca Baybay City Leyte  | 563-7229                                     | 36             |  |  |
|                 | Maria Elsa M. Umpad  | Ormoc City   | 563-7229                                     | 1              |  |  |
|                 | Marcelo A. Quevedo   | Visca Baybay City Leyte (Retired)  | 563-7229                                     |                |  |  |
| 42.             | I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertine Philippines. I authorize the agency head/authorized repre I agree that any misrepresentation made in this doc administrative/criminal case/s against me. | ent laws, rules and regulations of the lesentative to verify/validate the contents | Republic of the                              | L B. PAGARINAO |  |  |
|                 | vernment Issued ID (i.e Passport, GSIS, SSS, PRC, Driver's License, etc.)  EASE INDICATE ID Number and Date of Issuance  |  |  |                |  |  |
| Gov             | ernment Issued ID: V01103  |  |  |                |  |  |
| ID/L            | icense/Passport No.: H1217001671   | box)   |  |                |  |  |
| Date            | //Place of Issuance: 7/4/2017 @ LTO Baybay City  | -022-<br>R   | ight Thumbmark                               |                |  |  |
|                 | SUBSCRIBED AND SWORN to before me this   | 0 4 AUG 2022 , affiant exhibitin  ATTY. RYSAN C. GUINOCOR  VSU/Cycle Legal Officer | g his/her validly issued government ID as in | dicated above. |  |  |
|                 |  | Person Administering Oa  | ath  |                |  |  |

## **WORK EXPERIENCE SHEET**

Instructions: 1. Include only the work experiences relevant to the position being applied to.

- Theduration should include start and finish dates, if known, month in abbreviated form, if known, and year in full. For the current position, use the word Present, e.g., 1998-Present. Work experience should be listed from most recent first.
- Duration: July 16,2013 present
- · Position: Utility Messenger
- · Name of Office/Unit: Philippine Rootcrops and Research Training Center
- Immediate Supervisor: Dr. Erlinda A. Vasquez
- · Name of Agency/Organization and Location: Visayas State University, VSU Baybay City,leyte
  - List of Accomplishments and Contributions (if any)
  - · Summary of Actual Duties
    - Prepare, records and deliver correspondence voucher, PR and payrolls to admin building and other Departments and offices
    - Follow-up the processing of Triptickets and cash advance
    - Clean admin office of PRCRTC
- Duration: June 1,2012-June 30,2013
- · Position: Utility Worker
- · Name of Office/Unit: Department of Horticulture
- Immediate Supervisor: Dr. Antonio Acedo
- Name of Agency/Organization and Location: Visayas State University. VSU, Baybay City
  - List of Accomplishments and Contributions (if any)
  - Summary of Actual Duties
    - Cleaning of classrooms, faculty rooms, CR and loans of the Department
    - o Prepare, records and follow-up processing of vouchers and other documents

JUNVIC B. BAGARINAO

Date: 6/1/2092