

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 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	Bilocura			
FIRST NAME	Cleo	NAME EXTENSION (JR., SR)		
MIDDLE NAME	Sabuero	N/A		
3. DATE OF BIRTH (mm/dd/yyyy)	08/09/1988	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship	
4. PLACE OF BIRTH	Iligan City, Lanao del Norte	If holder of dual citizenship, please indicate the details.	<input type="checkbox"/> by birth <input type="checkbox"/> by naturalization	
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		Pls. indicate country:	
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	N/A	
7. HEIGHT (m)	1.78	ZIP CODE	N/A	
8. WEIGHT (kg)	71		House/Block/Lot No.	Street
9. BLOOD TYPE	O		Tambaling I	Bolo bolo
10. GSIS ID NO.	2005011639		Subdivision/Village	Barangay
11. PAG-IBIG ID NO.	121072181976		El Salvador	Misamis Oriental
12. PHILHEALTH NO.	150502840217	City/Municipality	Province	
13. SSS NO.	0818502774	18. PERMANENT ADDRESS	N/A	
14. TIN NO.	310356285	ZIP CODE	N/A	
15. AGENCY EMPLOYEE NO.			House/Block/Lot No.	Street
			Tambaling I	Bolo bolo
			Subdivision/Village	Barangay
			El Salvador	Misamis Oriental
		City/Municipality	Province	
		19. TELEPHONE NO.	N/A	
		20. MOBILE NO.	0906-524-6055	
		21. E-MAIL ADDRESS (if any)	cleobilocura89@gmail.com	

II. FAMILY BACKGROUND


22. SPOUSE'S SURNAME	Bilocura		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	Vanessa Marie	NAME EXTENSION (JR., SR)	Olive Ysabelle S. Bilocura	10/27/2018
MIDDLE NAME	Solis	N/A		
OCCUPATION	Nurse			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	Bilocura			
FIRST NAME	Adonis	NAME EXTENSION (JR., SR)		
MIDDLE NAME	Reyes	N/A		
25. MOTHER'S MAIDEN NAME				
SURNAME	Sabuero			
FIRST NAME	Alicia			
MIDDLE NAME	Guidaben			

(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	Bais City Pilot School	N/A	1995	2001		2001	
SECONDARY	Bais City High School	N/A	2001	2005		2005	
VOCATIONAL / TRADE COURSE	N/A						
COLLEGE	Mindanao State University - Iligan Institute of Technology	Bachelor of Science in Mechanical Engineering	2005	2010		2010	Cum Laude
GRADUATE STUDIES	Mindanao State University - Iligan Institute of Technology	Master of Science in Mechanical Engineering	2017	2019	24 units		


(Continue on separate sheet if necessary)

SIGNATURE		DATE	December 01, 2020	CS FORM 212 (Revised 2017), Page 1 of 4
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[illegible]

V. WORK EXPERIENCE
(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.

[illegible]

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[illegible]

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

NAME OF THE PERSON	INCLUSIVE DATES OF		Type of ID	

[illegible]




VIII. OTHER INFORMATION

<p>NON-ACADEMIC DISTINCTIONS / RECOGNITION</p>	<p>3</p>	<p>MEMBERSHIP IN</p>
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31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	3. ASSOCIATION/ORGANIZATION (Write in full)
Solidworks Design and Flow Simulation	N/A	N/A
AutoCAD (2D and 3D)		
MS Excel, Word, and Powerpoint		
Play Lawn Tennis, Table Tennis and Basketball		

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DATE	NAME	DATE	NAME	DATE	NAME

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)?		<div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
35. a. Have you ever been found guilty of any administrative offense? b. Have you been criminally charged before any court?		<div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div> <div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details: Date Filed: _____ Status of Case/s: _____</div>												
36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?		<div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
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?		<div><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</div> <div>If YES, give details: Resignation _____</div>												
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?		<div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div> <div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
39. Have you acquired the status of an immigrant or permanent resident of another country?		<div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details (country): _____</div>												
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?		<div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, please specify: _____</div> <div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div> <div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div>												
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)														
<table><tr><td>NAME</td><td>ADDRESS</td><td>TEL. NO.</td></tr><tr><td>Dr. Jonathan C. Maglasang</td><td>Cebu City, Cebu</td><td>0917-719-7694</td></tr><tr><td>Engr. Triponio O. Solarte</td><td>Baybay City, Leyte</td><td>0906-127-8301</td></tr><tr><td>Engr. Jeffrey T. Hinggit</td><td>Butuan City, Agusan Del Norte</td><td>0965-209-6386</td></tr></table>			NAME	ADDRESS	TEL. NO.	Dr. Jonathan C. Maglasang	Cebu City, Cebu	0917-719-7694	Engr. Triponio O. Solarte	Baybay City, Leyte	0906-127-8301	Engr. Jeffrey T. Hinggit	Butuan City, Agusan Del Norte	0965-209-6386
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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.														
<div>Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</div> <div>Government Issued ID: PRC</div> <div>ID/License/Passport No.: 0083965</div> <div>Date/Place of Issuance: 01/10/2014 / Cagayan De Oro City</div>	<div></div> <div>Signature (Sign inside the box)</div> <div>DECEMBER 01, 2020</div> <div>Date Accomplished</div>	<div></div> <div>CLEO S. BILOCURA</div> <div></div> <div>Right Thumbmark</div>												
SUBSCRIBED AND SWORN to before me this 4 JAN 2021, affiant exhibiting his/her validly issued government ID as indicated above.														
<div>ATTY. RYAN C. GUINOCOR</div> <div>VSU LEGAL OFFICER</div> <div>Person Administering Oath</div>														