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1	CS Form No. 21
	Revised 2017
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SIGNATURE

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. (Do not fill up. For CSC use only) 1. CS ID No. Print legibly. Tick appropriate boxes []) and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. 2. SURNAME MANGAOANG NA FIRST NAME **EURICE ED** NAME EXTENSION (JR., SR) MIDDLE NAME **DELA CRUZ** 3. DATE OF BIRTH 04/18/1995 16. CITIZENSHIP √ Filipino Dual Citizenship (mm/dd/yyyy) by birth by naturalization BAYBAY CITY, LEYTE 4. PLACE OF BIRTH If holder of dual citizenship, Pls. indicate country: please indicate the details. W 5. SEX ✓ Male Female ✓ Single Married 17. RESIDENTIAL ADDRESS 6 CIVIL STATUS House/Block/Lot No Widowed Separated BLOCK 1, LOT 3 Other/s: Subdivision/Village Barangay VSU COOP SUBDIVISION MARCOS 1.65 7. HEIGHT (m) City/Municipality Province 56 ZIP CODE BAYBAY CITY, LEYTE 8. WEIGHT (kg) 18. PERMANENT ADDRESS 0+ 9. BLOOD TYPE House/Block/Lot No. Street BLOCK 1, LOT 3 10. GSIS ID NO. NA Subdivision/Village Barangay VSU COOP SUBDIVISION MARCOS 121286009460 11. PAG-IBIG ID NO. City/Municipality Province 12. PHILHEALTH NO. NA ZIP CODE 6521 LEYTE NA 19. TELEPHONE NO. 13. SSS NO. 477-204-477 14. TIN NO. 20 MOBILE NO 0967 504 8035 15. AGENCY EMPLOYEE NO. 21. E-MAIL ADDRESS (if any) eurice.mangaoang@vsu.edu.ph NA 22. SPOUSE'S SURNAME 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) NA FIRST NAME NA NA NA MIDDLE NAME NA NA NA NA OCCUPATION NA NA EMPLOYER/BUSINESS NAME NA NA **BUSINESS ADDRESS** NA NA NA NA TELEPHONE NO NA NA MANGAOANG 24. FATHER'S SURNAME NAME EXTENSION (JR., SR) **EDUARDO** FIRST NAME MIDDLE NAME **OLIVAS** YOLANDA DELA CRUZ 25. MOTHER'S MAIDEN NAME SURNAME MANGAOANG FIRST NAME YOLANDA **DELA CRUZ** (Continue on separate sheet if necessary) MIDDLE NAME SCHOLARSHIP/ HIGHEST LEVEL/ NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE PERIOD OF ATTENDANCE YEAR **ACADEMIC** LEVEL UNITS EARNED GRADUATED (Write in full) (Write in full) (if not graduated) RECEIVED From To VISCA FOUNDATION ELEMENTARY SCHOOL ELEMENTARY 2001 2007 NONE 2007 NONE VISAYAS STATE UNIVERSITY LABORATORY HIGH SECONDARY 2007 2011 NONE 2011 NONE SCHOOL VOCATIONAL / NA NA NA NA NONE NA NA TRADE COURSE COLLEGE VISAYAS STATE UNIVERSITY **BS AGRIBUSINESS** 2011 2015 NONE 2015 NONE **GRADUATE STUDIES VISAYAS STATE UNIVERSITY** MASTER OF MANAGEMENT: AGRIBUSINESS 2016 2020 CHED NONE 2020

SEPTEMBER 13, 2021

DATE

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27. CAREER SERVICE/ RA SPECIAL LA		0 (BOARD/ BAR) UNDER 5/ CES/ CSEE	RATING (If Applicable)	DATE OF EXAMINATION /	PLACE OF EXAMIN	ATION / CONFE	RMENT	LICENSE (if ap	-
BAF	BARANGAY ELIGIBILITY / DRIVER'S LICENSE DRIVER'S LICENSE		(If Applicable)	CONFERMENT	J. L. V. WIII.	TOOK! L	IGWILIYI	NUMBER	Date Valid
			184	07/01/2019 LTO, BAYE		YBAY CITY		H12-19-002887	UNT 2024/4
WORK E	XPERIENCE		(Cor	ntinue on separate sheet if	necessary)				
		Start from your recent	work) Descriptio	n of duties should be	indicated in the attach	ed Work Exp	erience shee		
INCLU:	SIVE DATES n/dd/yyyy)	POSITION TI			ICY / OFFICE / COMPANY	MONTHLY	SALARY/ JOB/ PAY GRADE (if		GOV
From	То	(Write in full/Do not a			o not abbreviate)	SALARY	applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	SERVI (Y/ N
9/01/2015	12/14/2017	PART-TIME INST	RUCTOR		OF BUSINESS AND	44000.00	INCREMENT	DART THE	
				MANA DEPARTMENT (GEMENT OF BUSINESS AND	11000.00		PART-TIME	Υ
0/15/2020	2/26/2021	PART-TIME INST		MANA	GEMENT	20000.00		PART-TIME	Υ
/15/2021	7/16/2021	PART-TIME INST	RUCTOR	DEPARTMENT OF BUSINESS AND MANAGEMENT		25000.00		PART-TIME	Υ
/23/2021	PRESENT	SUBSTITUTE INSTRUCTOR			OF BUSINESS AND GEMENT	26000.00		SUBSTITUTE	Υ
_					v yr				
							1.7		
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-	-								
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sheet if neces	ssary)			•					

29. NAME & ADDRESS O		INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS		POSITION / NATURE OF WORK	
(Willow	(Write in full)		То		POSITION / NATURE OF WORK		
NA		NA	NA	NA		NA	
•							
III. LEARNING AND DEVELOPMENT (Lo	&D) INTERVENTIONS/TRAINING F	ROGRAMS			navarial makitlans		
30. TITLE OF LEARNING AND DEVELOPMENT (Write in	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)	
EADERSHIP TRAINING		NO INFO	NO INFO			VISAYAS STATE UNIVERSITY	
ERSONALITY DEVELOPMENT AND BUSINESS	ETHICS SEMINAR	NO INFO	NO INFO	4 100 100 10		VISAYAS STATE UNIVERSITY	
NTREPRENEURSHIP TRAINING	a media	NO INFO	NO INFO			VISAYAS STATE UNIVERSITY	
RE-EMPLOYMENT ORIENTATION SEMINAR		NO INFO	NO INFO			VISAYAS STATE UNIVERSITY	
ABOR EDUCATION		NO INFO	NO INFO			VISAYAS STATE UNIVERSITY	
BE INTERNATIONAL CONFERENCE ON BUSINE	SS AND ECONOMY (SBE-ECBE)	2/16/2018	2/17/2018			UNIVERSITY OF SAN CARLOS	
NATIONAL YOUTH CONFERENCE ON CLII MITIGATION, DISASTER RISK REDUCTION AN		11/20/2019	11/12/2019			VISAYAS STATE UNIVERSITY	
EBINAR ON TABLE OF SPECIFICATIONS AND EARN: VSU TOS AND ITEM ANALYSIS	TEST ITEM ANALYSIS: LEARN AND RE-	11/12/2020	11/12/2020	Day IV.		VISAYAS STATE UNIVERSITY	
ISO 9001:2015 AWARENESS/-RE-AWARENESS PROGRAM WEBINAR			11/27/2020			VISAYAS STATE UNIVERSITY	
ECONOMIC AND FINANCIAL LITERACY WEEK (EFLW)			12/03/2020			NATIONAL ECONOMIC AND DEVELOPMENT AUTHORITY REGION 8	
MARKETING STRATEGIES TRAINING FOR BAYB	AY DAIRY COOPERATIVE	12/08/2020	12/09/2020			VISAYAS STATE UNIVERSITY	
'SU E-LEARNING ENVIRONMENT TRAINING - W	ORKSHOP SERIES	12/18/2020	12/18/2020			VISAYAS STATE UNIVERSITY	
	Wart David Telefort						
		1.00	-				
		1717 a s = 1	A TO A SET			Jan Sul, Ka	
						2001 7 0 200	
		No. No. of Contract of Contrac	-				
						1272 1361 2 11	
	(Con	tinue on separat	sheet if necessa	ny)			
/III. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES	32. NON		INCTIONS / RECO	OGNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZAT (Write in full)	
RESEARCH WRITING	RESEARCH WRITING				NA		
ARTICLE WRITING				W 7 In			
COMPUTER WORKS						8.00	
Section 1	1) the	week C	n		
	Shirt An	.,444					
	(Con	tinue on separat	sheet if necessar	ny)			
SIGNATURE		1		DA	TE	SEPTEMBER 13, 2021	

-				Y Y			
34.	Are you related by consanguinity or affinity to the appoint chief of bureau or office or to the person who has immedi Bureau or Department where you will be approinted, a. within the third degree?		YES	NO			
	b. within the fourth degree (for Local Government Unit - C	YES NO If YES, give details:					
35.	a. Have you ever been found guilty of any administrative	☐ YES ☐ 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 or any court or tribunal?						
37.	Have you ever been separated from the service in any of retirement, dropped from the rolls, dismissal, termination, (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 e Barangay election)?	election held within the last year (except	☐ 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 control of the control	☐ YES ☐ NO If YES, give details:					
39.	Have you acquired the status of an immigrant or permane	☐ YES ☐ NO If YES, give details (country):					
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) N	Magna Carta for Disabled Persons (RA					
	7277); and (c) Solo Parents Welfare Act of 2000 (RA 897	2), please answer the following items:					
a.	Are you a member of any indigenous group?		YES	□ NO			
b.	Are you a person with disability?		If YES, please specify:				
	The special state and a state		YES If YES, please specif	y ID No:			
C.	Are you a solo parent?		YES If YES, please specif	iy ID No:			
41.	REFERENCES (Person not related by consanguinity or affinity to applie	cant /appointee)					
	NAME	ADDRESS	TEL. NO.	mark A. W.			
	ANTONIO P. ABAMO	VISAYAS STATE UNIVERSITY	9209835693				
	JOVIEL R. TEVES	VISAYAS STATE UNIVERSITY	9175609183				
42.	I declare under oath that I have personally accomplish complete statement pursuant to the provisions of per Philippines. I authorize the agency head/authorized repre agree that any misrepresentation made in this do administrative/criminal case/s against me.	tinent laws, rules and regulations of the F esentative to verify/validate the contents state	Republic of the d herein.	BUPLE ED FRANCE PHOTO			
G Pi	DVernment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) LEASE INDICATE ID Number and Date of Issuance						
G	overnment Issued ID: DRIVER'S LICENSE	-					
ID	/License/Passport No.: H12-19-002887	Signature (Sign inside the bo	ox)				
Da	tte/Place of Issuance: 7-1-2019, LTO, BAYBAY CITY, LEYTE		Right Thumbmark				
	SUBSCRIBED AND SWORN to before me this	NOV 2021 , affiant exhibit	ting his/her validly issue	ed government ID as indicated above.			
	ATTY, RYSANC GURDOBR						
		1					

WORK EXPERIENCE SHEET

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

- 2. The duration 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: 2015-2017, 2020-2021
- Position: Part-Time instructor
- Name of Office/Unit: Department of Business and Management
- Immediate Supervisor: Antonio P. Abamo, PhD/Nilda T. Amestoso/Analita A. Salabao/Angelita L. Paradero
- Name of Agency/Organization and Location: Visayas State University, Visca Baybay City, Leyte
 - List of Accomplishments and Contributions (if any)
 - Summary of Actual Duties
 Teaches subjects in management: Organization and Management, Marketing Management,
 Financial Management

EURICE ED D. MANGAOANG

(Signature over Printed Name of Employee/Applicant)

Date: 9-13-2021