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WARNING: Any misrepresenta	ation made in th	re Personal D	ata Sheet and the	e Work Experience Sheet sh	nall cause the	filing of administ	rative/criminal case/s	against the per	rson	
READ THE ATTACHED GUIDE	TO FILLING OU	IT THE PERSO	ONAL DATA SHE	ET (PDS) BEFORE ACCOMP	LISHING THE				,	
Print legibly. Tick appropriate boxes  I. PERSONAL INFORMATIO		parate sheet if n	ecessary. Indicate N	VA if not applicable. DO NOT Al	BBREVIATE.	1 CS	ID No.	(Do not fill up. F	or CSC use only	
2 SURNAME	ACAMPADO					TO STATE OF THE ST				
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07 050000							☑ by birth		by naturalization	
4. PLACE OF BIRTH	ST. BERNARD, SOUTHERN LEYTE		If holder of dual citizenship,		Pls. indicate country:					
5. SEX	✓ Male	☑ Male ☐ Female		please indicate the d	details.  Philippines					
6 CIVIL STATUS	☑ Single		17. RESIDENTIAL ADDRESS	User Phylid at No.						
	Other/s:	ed introduction of the control of th				House/Block/Lot No. Street PANGASUGAN				
7. HEIGHT (m)	TOTAL TRANSPORT VIN CALL TRANSPORTATION		EPARTMENT / ADENCY / OF IT	S	ubdivision/Village BAYBAY	TIOS	Barangay LEYTE			
8. WEIGHT (kg)	N. P. C. Petrol.	60KGS	(e)sect	Ida so other adwy		City/Municipality		Province	100	
9. BLOOD TYPE				ZIP CODE 18. PERMANENT ADDRESS		6521-A PUROK 2				
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11. PAG-IBIG ID NO.	916226489400				ST. BERNARD City/Municipality		SOUTHER	N LEYTE		
12. PHILHEALTH NO.	12-051511001-7		ZIP CODE		6616		Province			
13. SSS NO.	3461657109		19. TELEPHONE NO.		NA					
14. TIN NO.		329190139000		20. MOBILE NO.		09051034543			1	
15. AGENCY EMPLOYEE NO.	V01092		21. E-MAIL ADDRESS (if any)	acampadoarian@		padoarian@yaho	yahoo.com			
II. FAMILY BACKGROUND										
22. SPOUSE'S SURNAME			N/A		23. NAME of C	HILDREN (Write full na	ame and list all)	DATE OF BIRT	H (mm/dd/yyyy)	
FIRST NAME		N/A		NAME EXTENSION (JR., SR)		N/A		N/A		
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EMPLOYER/BUSINESS NAME			N/A							
BUSINESS ADDRESS			N/A							
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24. FATHER'S SURNAME			ACAMPADO							
FIRST NAME		ADELFO		NAME EXTENSION (JR., SR)						
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25. MOTHER'S MAIDEN NAME			GULA							
SURNAME	ACAMPADO						-			
FIRST NAME			RENE							
MIDDLE NAME	MUNDIA				Caption	on separate sheet if nec				
III. EDUCATIONAL BACKG	ROUND					Conunta	on separate sneet it nec	essary)		
26.							UNIVERSITY STATE		SCHOLARSHIPI	
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(Continue on separate sheet if necessar

SIGNATURE

DATE 1-25-19

CS FORM 212 (Revised 2017), Page 1 of 4

	SPECIAL LAI	080 (BOARD/BAR) UNDER NS/CES/CSEE TY/DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION/ CONFERMENT	PLACE OF EXAMIN	ATION / CONFE	RMENT	LICENSE (if a	Date of Validity
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II. OTHER INFORMATION					W 15.00		
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## **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: June, 2015 May, 2016
- · Position: Part-time Instructor
- Duration: August, 2018 December, 2018
- Position: Substitute Regular
- Name of Office/Unit: Department of Liberal Arts and Behavioral Sciences
- · Immediate Supervisor: Dr. Guiraldo C. Fernandez, Jr.
- Name of Agency/Organization and Location: Visayas State University
  - List of Accomplishments and Contributions (if any)

Presented Paper during the 3<sup>rd</sup> National Research Conference on Arts, Science, and Health

Taught subjects in Philosophy and Social Sciences

- Summary of Actual Duties
  - Responsible in teaching social sciences and philosophy subjects, submitting grades and accomplishing other necessary requirements

Do research and extension

(Signature over Printed Name of Employee/Applicant)

Date: 1-21-19

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