

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 () ☐ 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	BRAVO		
FIRST NAME	MAE ANN	NAME EXTENSION (JR., SR) N/A	
MIDDLE NAME	ARSIS		
3. DATE OF BIRTH (mm/dd/yyyy)	1/21/1994	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	BAYBAY CITY, LEYTE	If holder of dual citizenship, please indicate the details.	
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		
6. CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	COTTAGE L., DUPLEX HOUSING House/Block/Lot No. Street VISAYAS STATE UNIVERSITY PANGASUGAN Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
7. HEIGHT (m)	1.5 m	ZIP CODE	6521-A
8. WEIGHT (kg)	43 kg		
9. BLOOD TYPE	O	18. PERMANENT ADDRESS	House/Block/Lot No. Street SITIO SOONG BIASONG Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
10. GSIS ID NO.	N/A	ZIP CODE	6521-A
11. PAG-IBIG ID NO.	121242383596		
12. PHILHEALTH NO.	13-025314398-4		
13. SSS NO.	06-3723396-5	19. TELEPHONE NO.	N/A
14. TIN NO.	472-932-135-000	20. MOBILE NO.	09464729899
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)	bmae91110@gmail.com

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	N/A		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	N/A	NAME EXTENSION (JR., SR) N/A	N/A	N/A
MIDDLE NAME	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	BRAVO			
FIRST NAME	ARMANDO	NAME EXTENSION (JR., SR) N/A		
MIDDLE NAME	MORALES			
25. MOTHER'S MAIDEN NAME				
SURNAME	ARSIS			
FIRST NAME	MERIAM			
MIDDLE NAME	BAYER		(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	HIPUSNGO ELEMENTARY SCHOOL	N/A	2001	2006	Graduated	2006	WITH HONORS
SECONDARY	BAYBAY NATIONAL HIGH SCHOOL	N/A	2006	2010	Graduated	2010	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	Bachelor of Science in Agriculture	2010	2015	Graduated	2015	N/A
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY	Master of Science in Soil Science	2016	2018	Graduated	2018	SECOND HIGHEST

SIGNATURE		DATE
		January 15, 2020

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
	AGRICULTURIST LICENSURE EXAMINATION	PASSED	Nov. 5-7	CAGAYAN DE ORO CITY, MISAMIS ORIENTAL		
	NCIII IN AGRICULTURAL CROPS	PASSED		VISAYAS STATE UNIVERSITY		

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE	
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DATE _____

January 15, 2020


[illegible]

VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED
(Start from the most recent L&D training program and include only the relevant L&D training taken for the last five (5) years for Division Chief/Executive Managerial positions)




[illegible]

VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
COMPUTER LITERATE	N/A	SUASSM
READING	N/A	
LEADERSHIP	N/A	

SIGNATURE		DATE	January 15, 2020
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CS FORM 212 (Revised 2017), Page 3 of 4

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 checked="" 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 type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____												
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 checked="" 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>DR. SUZETTE B. LINA</td><td>VISAYAS STATE UNIVERSITY</td><td>9199613922</td></tr><tr><td>DR. VICTOR B. ASIO</td><td>VISAYAS STATE UNIVERSITY</td><td></td></tr><tr><td>DR. ELIZABETH P. PARAC</td><td>CARAGA STATE UNIVERSITY</td><td>9175810193</td></tr></tbody></table>			NAME	ADDRESS	TEL. NO.	DR. SUZETTE B. LINA	VISAYAS STATE UNIVERSITY	9199613922	DR. VICTOR B. ASIO	VISAYAS STATE UNIVERSITY		DR. ELIZABETH P. PARAC	CARAGA STATE UNIVERSITY	9175810193
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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> MAE ANN A. BRAVO PHOTO</div> <div> Right Thumbmark</div>												
<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: 13-025314398-4</div> <div>ID/License/Passport No.: N/A</div> <div>Date/Place of Issuance: 01/16/2016</div>		<div> Signature (Sign inside the box)</div> <div>JAN 15, 2020 Date Accomplished</div>												
SUBSCRIBED AND SWORN to before me this FEB 13 2020 , affiant exhibiting his/her validly issued government ID as indicated above.														
<div>ATTY. RYSAN C. GUINOCOR VSULEGAL OFFICER</div> <div>Person Administering Oath</div>														