CS Form No. 212 Revised 2017

PERSONAL DATA SHEET

TO NUMBER 1		NAL DAI	-		a - day of the				
concerned. READ THE ATTACHED GUIDE	ation made in the Personal Data Sheet and the E TO FILLING OUT THE PERSONAL DATA SHI	EET (PDS) BEFORE ACCO	MPLISHING T	HE PDS FOI		criminal case/s a	gainst the pe	rson	
Print legibly. Tick appropriate boxe I. PERSONAL INFORMATI	es) and use separate sheet if necessary. Indicate	N/A if not applicable. DO NOT	ABBREVIATE.	3	1. CS ID No	PUBLICATI	(Do not fill up.	For CSC use only	
2. SURNAME	GARCES								
FIRST NAME	MARK LOUIS					NAME EXTENSION (JR	R., SR)	N/A	
MIDDLE NAME	LELIS			16	Territoria de la compansión de la compan				
3. DATE OF BIRTH	01/21/1997	16. CITIZENSHIP				Total Control of the			
(mm/dd/yyyy)	0112111301	IO. CITIZENSHIF		√ Filip	oino [Dual Citizenship by birth	by natura	lization	
4. PLACE OF BIRTH	HILONGOS, LEYTE	If holder of dual citize	enship,			Pls. indicate of		ilization	
5. SEX	✓ Male ☐ Female	please indicate the details.					Sal Post Madain a manager		
6 CIVIL STATUS	✓ Single	17. RESIDENTIAL ADDRESS		N/A			N/A		
	☐ Widowed ☐ Separated ☐ Other/s:	and the second second second second	Но	use/Block/Lot N N/A	Vo.		Street		
7. HEIGHT (m)			Su	ubdivision/Villag	ре		Barangay LEYTE		
	1.695 m			City/Municipality	/		Province		
8. WEIGHT (kg)	75 kg	ZIP CODE		- Y	10.0	6521	Causant I cast têo		
9. BLOOD TYPE	B+	18. PERMANENT ADDRESS	Но	N/A House/Block/Lot No.			N/A Street		
10. GSIS ID NO.	N/A	HAT THE HE WAS LAKE		NTRAL DISTRI			MATAPAY Barangay		
11. PAG-IBIG ID NO.	1211-9088-4558	Marian Caramana and Caramana an		HILONGOS City/Municipality	,		LEYTE Province		
12. PHILHEALTH NO.	13-250490350-1	ZIP CODE		жунчалюрану	15-2	6524	FTOVINCE		
13. SSS NO.	06-3865957-7	19. TELEPHONE NO.				N/A			
14. TIN NO.	474-371-554	20. MOBILE NO.			+63	9094919643	AN! E	Ass	
15. AGENCY EMPLOYEE NO.	VJ002145	21. E-MAIL ADDRESS (if any)			mlgarces	321@gmail.co	m	Asia	
II. FAMILY BACKGROUND)				(A)/		6.15	8113	
22. SPOUSE'S SURNAME	N/A	AM Commence	23. NAME of CI	HILDREN (Wri	te full name ar	id list all)	DATE OF BIR	TH (mm/dd/yyyy)	
FIRST NAME	A. N/A	NAME EXTENSION (JR., SR) N/A			N/A		Mo	V/A	
MIDDLE NAME	N/A				N/A			N/A	
OCCUPATION	N/A			. 19	N/A			N/A	
EMPLOYER/BUSINESS NAME	N/A				N/A			N/A	
BUSINESS ADDRESS	N/A	8.0			N/A			V/A	
TELEPHONE NO.	N/A	Add			N/A		ANA CA	N/A	
24. FATHER'S SURNAME	GARCES	NAME EXTENSION (JR., SR)			N/A		Add 1	N/A	
FIRST NAME	LUISITO	N/A			N/A		1	N/A	
MIDDLE NAME 25. MOTHER'S MAIDEN NAME	CAGADAS				N/A N/A			N/A	
SURNAME	LEU0			- parting report	N/A			N/A	
FIRST NAME	LELIS				N/A			N/A	
MIDDLE NAME	ZENAIDA		(Continue on separate sheet if necessary)					WA	
III. EDUCATIONAL BACKO				(Ci	onunue on se	parate sneet ii neces	isary)	ASA III	
26.	NAME OF SCHOOL	DARIO EDI IGATIONIDE ODEE IO	OUDGE	PERIOD OF	ATTENDANCE	HIGHEST LEVEL/	Ales	SCHOLARSHIP/	
LEVEL	(Write in full)	BASIC EDUCATION/DEGREE/C	(Write in full)	From	To	UNITS EARNED (if not graduated)	YEAR GRADUATED	ACADEMIC HONORS RECEIVED	
ELEMENTARY	HILONGOS SOUTH CENTRAL SCHOOL	PRIMARY EDUCA	TION	2004	2010	N/A	2010	WITH	
SECONDARY	HILONGOS NATIONAL VOCATIONAL SCHOOL	HIGH SCHOOL		2010	2014	N/A	2014	WITH HONORS	
VOCATIONAL /	HILONGOS NATIONAL VOCATIONAL SCHOOL	PERSONAL COMPUTER F	HARDWARE	2010	2014	N/A	2014	BEST IN	
COLLEGE	VISAYAS STATE UNIVERSITY- MAIN CAMPUS	BACHELOR OF SCIENCE IN SCIENCE	COMPUTER	2017	2024	100 UNITS	N/A	DOST	
GRADUATE STUDIES	UNIVERSITY OF CEBU - MARITIME EDUCATION AND TRAINING CENTER	BACHELOR OF SCIENCE I		2014	2017	N/A	2017	SCHOLAR MAERSK SCHOLAR	
SIGNATURE	QI/D	ontinue on separate sheet if nec	essary)		TE		102/200	CONOLAR	

27. CAREE	ER SERVICE/ RA	A 1080 (BOARD/ BAR) UNDER		DATE OF				LICENSE (if a	applicable)
SPECIAL L	LAWS/ CES/ CSE		RATING (If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT			NUMBER	Date of Validity
CAREER SEF	RVICE SUB-PI	PROFESSIONAL	82.8	08/12/2018	SAINT JOSEPH COLLEGE, MAASIN CITY, SOUTHERN LEYTE SAINT JOSEPH COLLEGE, MAASIN CITY,		N/A	N/A	
CAREER SERVICE PROFESSIONAL		81.5	08/04/2019	SAINT JOSEPH COLLEGE, MAASIN CITY, SOUTHERN LEYTE			N/A	N/A	
DRIVER'S LICENSE		N/A	N/A	LTO - BAYBAY, BA	AYBAY CITY	, LEYTE	H12-15-002815	01/21/2028	
N/A		N/A	N/A	N	N/A		N/A	N/A	
N/A		N/A	N/A	N.	N/A	en alle en partie de les de	N/A	N/A	
	N/A	/A	N/A	N/A	N	N/A		N/A	N/A
	N	WA	N/A	N/A		N/A		N/A	N/A
	EXPERIENCE			ontinue on separate sheet					
	vate employme USIVE DATES	nent. Start from your recent	work) Descriptio			ed Work Exp	SALARY/ JOB/ PAY		SERVICE
	USIVE DATES nm/dd/yyyy) To	POSITION TITLE not abbreviate	(Write in full/Do ate)	,	CY / OFFICE / COMPANY (Write)o not abbreviate)	MONTHLY SALARY	GRADE (if applicable)& STEP (Format *00-0*)/	STATUS OF APPOINTMENT	SERVICE
09/11/2023	PRESENT	CLERK		SUPPLY AND PROP	PERTY MANAGEMENT MAIN CAMPUS	P603.4/DAY		JOB ORDER	Y
06/01/2018	08/01/2019	ENCODE	R	UNIVERSITY RE	MAIN CAMPUS EGISTRAR - VSU MAIN CAMPUS	P25/HOUR	-	JOB ORDER	1000000
02/01/2018	05/31/2018	CLERK			ISTRAR - LGU HILONGOS	P200/DAY	N/A	JOB ORDER	Υ
N/A	N/A	N/A		N/A		N/A	N/A	N/A	N/A
N/A	N/A	N/A			N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A			N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A			N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A			N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	A State of the State of State	51	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A			N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A			N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A			N/A	N/A	N/A	N/A	N/A
N/A N/A	N/A N/A	N/A N/A			N/A N/A	N/A	N/A	N/A	N/A
N/A N/A	N/A N/A	N/A N/A			N/A	N/A N/A	N/A N/A	N/A N/A	N/A N/A
N/A	N/A N/A	N/A N/A			N/A	N/A N/A	N/A N/A	N/A N/A	N/A N/A
N/A	N/A	N/A			N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A			N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A			N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	tion was a series who assessment		N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	And the lift of the control of the control of	E	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A			N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	257	OF ADDRESS PROPERTY	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A			N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	TO ALL	FR THE STORY	N/A	N/A	N/A	N/A	N/A
		THE RESERVE OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAME	V Comment	The state of the s		1	1	1	1

SIGNATURE (Continue on separate sheet if necessary)

N/A

N/A

N/A

N/A

N/A

N/A

N/A

N/A

N/A

06/18/2025

N/A

VI. VOLUNTARY WORK OR INVOLVEMEN	IN CIVIC / NON-GOVERNMENT			RGANIZATION	l/s		
29. NAME & ADDRESS OF ORGANIZATION (Write in	iuli)	INCLUSIVE DATE	(mm/dd/vvvv)	NUMBER OF HOURS	ngi ngangan	POSITION / NATURE OF WORK	
N/A	27 17 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	From N/A	To N/A	N/A	o Manimow	Sole of the Mark that the state of the state	
N/A	aliciah avia 2 - 7 il	N/A	N/A	N/A		N/A	
N/A		N/A	N/A	N/A	ndamirops ve		
N/A	It YES, give details	N/A	N/A	N/A		N/A	
N/A		N/A	N/A	N/A		N/A	
N/A	53 C .	N/A	N/A	N/A	ere (ere ore	N/A	
N/A	skiskisko (2.175) Bolis eta G	N/A					
	(Co)	ntinue on separate :	N/A sheet if necessary	N/A		N/A	
II. LEARNING AND DEVELOPMENT (L&D 80. TITLE OF LEARNING AND DEVELOPMENT INTERVE	NTIONS/TRAINING PROGRAMS	INCLUSIVE ATTENDANCE	DATES OF	NUMBER OF HOURS	Type of LD (Managerial/	CONDUCTED/ SPONSORED BY	
(Write	in full)	(mm/d	ld/yyyy)	NOMBER OF HOURS	Supervisory/ Technical/etc)	(Write in full)	
OMPUTER HARDWARE SERVICING	s'stec evio 22Y il (notific	05/8/2023	05/12/2023	40	Technical	LEYTE TECHNOLOGY LIVELIHOOD DEVELOPM & PRODUCTIVITY CENTER	
NLOCKING EXCELLENCE: THE 5S REVOLUT SAYAS STATE UNIVERSITY	ON FOR CLERKS AND HEADS AT	11/29/2023	11/29/2023	8	Managerial VISAYAS STATE UNIVERSITY - MAIN CA		
RIS SOFTWARE ONBOARDING	P (J. YES	12/6/2023	12/6/2023	8	Technical	VISAYAS STATE UNIVERSITY - MAIN CAMPU	
SIC LIFE SUPPORT WITH CPR 2020 GUIDELINES WITH STRUCTION AND BAG VALVE MASK APPLICATIONS, O	AED, FOREIGN BODY AIRWAY CCUPATIONAL FIRST AID TRAINING	03/04/2024	03/06/2024	24	Technical VISAYAS STATE UNIVERSITY - MAIN CAN		
MINAR WORKSHOP ON BASIC RECORDS AND A		07/30/2024	07/31/2024	16	Technical VISAYAS STATE UNIVERSITY - MAIN CAM		
SIC COURSE TRAINING ON THE RA 9184 AND IT ID REGULATIONS ACT OF 2016	S REVISED IMPLEMENTING RULES	11/26/2024	11/28/2024	24	Technical VISAYAS STATE UNIVERSITY - MAIN CAN		
N/A	aloreh evç 3 ayılı	N/A	N/A	N/A	N/A	N/A	
NA NA		N/A	N/A	N/A	N/A	na signer augren (NA s) of history 9	
N/A		N/A	N/A	N/A	NA NA		
N/A N/A N/A		N/A	N/A	N/A	N/A	N/A	
		N/A	N/A	N/A	N/A	Cylindezh eli NA elen e boya in	
		N/A	N/A	N/A	N/A	NA Shared diam is found	
		N/A	N/A	N/A	N/A	N/A	
NA WA	egyvere i jedniko vojekoven kan mesen klimetra ini mele. B	N/A	N/A	N/A	N/A	NA NA	
NA	Jacobs minimized the minimizer of the minimized part of the minimizer of t	N/A	N/A	N/A	N/A	NA	
MA Sufficient of Teast and	Analystaneo (1977)	N/A	N/A	N/A	N/A	NA AMI O SWALAL NA A	
(esis hoosaec) N/A		N/A	N/A	N/A	N/A	NA NA	
NA hate enog naturanoù NA	ETV2	N/A	N/A	N/A	N/A	NA NA	
N/A	0116-100 2171	N/A	N/A	N/A	N/A	NA NA	
N/A	entrodictural att h	N/A	N/A	N/A	N/A	of graceang (NA sinta elakumo)	
NA	1 I may read so to	N/A tinue on separate s	N/A	N/A	N/A	N/A	
II. OTHER INFORMATION	Con	unue on separate s	silect ii liecessary				
31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RE	ECOGNITION	(Write in full)	antiverse (MEMBERSHIP IN ASSOCIATION/ORGANIZATION 33. (V	
COMPUTER LITERATE		N/A			3-0450	in full) N/A - N-A - N-	
BASIC COMPUTER TROUBLESHOOTING		N/A			2183	Cancel AVA Alegas Section 1975	
IT CONSULTANT		N/A		TYLETTE :		NA Synde Of Law NA souther transfer	
N/A	Bernard State Control of the Control	NA was a second of the second			N/A		
WA NA	n deal vints y nedled goldicid with	N/A	COS HUL	8-6	and the m	em sisted by MSCANIS CANAL HABITASS IS	
N/A	Andrews P	N/A	WA			N/A	
N/A	an in the second	NA legal into NA	A	Copper Sent		N/A	
		ntinue on separate	sheet if necessar		ATE	06/18/2025	
SIGNATURE	And And	The bridge is the		D.	ATE	66/18/2025 CS FORM 212 (Revised 2017), Page	

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 apppointed, a. within the third degree? b. within the fourth degree (for Local Government Unit - Career Employees)? 35. a. Have you ever been found guilty of any administrative offense?	☐ YES ☑ NO	1 3320				
b. within the fourth degree (for Local Government Unit - Career Employees)? 35. a. Have you ever been found guilty of any administrative offense?						
35. a. Have you ever been found guilty of any administrative offense?	☐ YES ☑ NO	☐ YES ☑ NO				
the state of the s	ASSESSED TO THE PROPERTY OF TH					
the state of the s	If YES, give details:					
	☐ YES ☑ NO					
	If YES, give details:					
b. Have you been criminally charged before any court?	☐ YES ☑ NO					
2. That's you been difficulty ording of bridged belote any count:	If YES, give details:					
AUT AUT AUT	Date Filed:					
Bac. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation b	Status of Case/s:	40.000				
any court or tribunal?	DY YES ☑ NO If YES, give details:					
B7. 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?	nt, YES NO If YES, give details:					
a. Have you ever been a candidate in a national or local election held within the last year (except	☐ YES ☑ NO					
Barangay election)?	If YES, give details:	17402				
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?						
9. Have you acquired the status of an immigrant or permanent resident of another country?	If YES, give details:	Kan Uga,				
9. There you addition the states of all filling after portrainone resident of already for all and the states of all filling after the portrainone residence and the states of all fillings after the portrainone residence and all of the states of all fillings after the portrainone residence and all of the states of all fillings after the portrainone residence and all of the states of all fillings after the portrainone residence and all fillings after the portrainone residence.	☐ YES ☑ NO If YES, give details (country):					
 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: 						
Are you a member of any indigenous group?						
	☐ YES ☑ NO If YES, please specify:					
Are you a person with disability?	☐ YES ☑ NO					
Are you a solo parent?	If YES, please specify ID No:					
	If YES, please specify ID No:					
REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)						
NAME ADDRESS	TEL. NO.					
MAGDALENE C. UNAJAN HEAD, DCST, VISAYAS STATE UNIVERSITY, BAYBAY CITY, LEYTE	09171304169					
RODERICK MAR UNAJAN CLERK, IHK, VISAYAS STATE UNIVERSITY, BAYBAY CITY, LEYTE	09778170877					
JANE FRANCIS V. LOBEDICA HRMO, LGU - HILONGOS, LEYTE	567-9715					
I declare under oath that I have personally accomplished this Personal Data Sheet which is a transport complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Philippines. I authorize the agency head/authorized representative to verify/validate the contents state agree that any misrepresentation made in this document and its attachments shall caus administrative/criminal case/s against me.	true, correct and Republic of the MARK LOUIS L GAR	CES				
COVERTIFICATION (I.e. Passport, GSIS, SSS, PRC, Driver's Liberise, etc.)						
PLEASE INDICATE ID Number and Date of						
PLEASE INDICATE ID Number and Date of Sovernment Issued ID: DRIVER'S LICENSE	A STATE OF THE STA					
PLEASE INDICATE ID Number and Date of	box)					
PLEASE INDICATE ID Number and Date of Government Issued ID: DRIVER'S LICENSE D/License/Passport No.: H12-15-002815						
PLEASE INDICATE ID Number and Date of Sovernment Issued ID: DRIVER'S LICENSE D/License/Passport No.: H12-15-002815 Signature (Şign iŋside the loate/Place of Issuance: LTO, BAYBAY CITY, LEYTE SUBSCRIBED AND SWORN to before me this						
PLEASE INDICATE ID Number and Date of Sovernment Issued ID: DRIVER'S LICENSE D/License/Passport No.: H12-15-002815 Signature (Şign inside the loate/Place of Issuance: LTO, BAYBAY CITY, LEYTE SUBSCRIBED AND SWOPN to before we thing.	Right Thumbmark ibiting his/her validly issued government ID as indicated above.	.				

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: JAN 2023 Present
- · Position: Clerk
- Name of Office/Unit: Supply and Property Management
- Immediate Supervisor: Vivian V. Balbarino
- Name of Agency/Organization and Location: Visayas State University, Pangasugan, Baybay City, Leyte
 - List of Accomplishments and Contributions (if any)
 - Summary of Actual Duties
 - Responsible for inventory, LTO registration, GSIS insurance of VSU motor vehicles; responsible for inventory and GSIS insurance of VSU Buildings; responsible for submitting building documents to OBO Baybay; responsible for inventory and quarterly report of VSU Biological Assets; responsible for updating the Report on the Physical Count of Property, Plant and Equipment (RPCPPE) and Report on the Physical Count of Semi-Expendable Property.

MARK LOUIS L. GARCES
(Signature over Printed Name

of Employee/Applicant)

Date:

06/18/2020

WORK EXPERIENCE SHEET

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

- 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: JUN 2018 AUG 2019
- · Position: Encoder
- Name of Office/Unit: University Registrar
- Immediate Supervisor: Eliezer L. Velasco
- Name of Agency/Organization and Location: Visayas State University, Pangasugan, Baybay City, Leyte
 - List of Accomplishments and Contributions (if any)
 - Summary of Actual Duties
 - Responsible for checking and encoding of student's data during enrollment and perform other duties assigned by the University Registrar.

MARK LOUIS L. GARCES
(Signature over Printed Name of Employee/Applicant)

Doto:

06/18/2023

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: FEB 2018 MAY 2018
- · Position: Clerk
- Name of Office/Unit: Local Civil Registrar
- Immediate Supervisor: Ernesto M. Fulache
- Name of Agency/Organization and Location: Local Government Unit Hilongos, Hilongos, Leyte
 - List of Accomplishments and Contributions (if any)
 - Summary of Actual Duties
 - Responsible for filing and recording of client's birth, death, marriage certificates; responsible for assisting client's birth, death, marriage certificates.

MARK LOUIS L. GARCES

(Signature over Printed Name of Employee/Applicant)

Date:

06/18/2025