Later !	_
CS Form No.	21
Revised 2017	

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 READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM 1. CS ID No. Print legibly. Tick appropriate boxes () 🗍 use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. (Do not fill up. For CSC use only BARRIENTOS 2 SURNAME NAME EXTENSION (JR SR) NIA FIRST NAME DODONG NEIL MIDDLE NAME LUMAAD 3. DATE OF BIRTH **SEPTEMBER 15,1989** 16. CITIZENSHIP ✓ Filipino Dual Citizenship (mm/dd/vvvv) by birth by naturalization ORMOC DISTRICT HOSPITAL 4. PLACE OF BIRTH Pls. indicate country: If holder of dual citizenship please indicate the details. Female 5 SEX ✓ Male Single ✓ Married 17. RESIDENTIAL ADDRESS BLK.18 LOT 2 6 CIVIL STATUS Widowed House/Block/Lot No Street Separated DSWD CORE SHELTER TAMBULILID Other/s: Subdivision/Village Barangay ORMOC LEYTE 7. HEIGHT (m) 1.65m City/Municipality Province 8. WEIGHT (kg) 66ka ZIP CODE BLK.18 LOT 2 18. PERMANENT ADDRESS 9. BLOOD TYPE House/Block/Lot No Street DSWD CORE SHELTER TAMBULILID 10. GSIS ID NO. N/A Subdivision/Village Barangay ORMOC LEYTE 11. PAG-IBIG ID NO 121224995949 City/Municipality Province 13-025142607-5 12 PHILHEALTH NO ZIP CODE 6541 13. SSS NO. 06-3176378-0 19. TELEPHONE NO. N/A 14. TIN NO 487-752-205 09777136103 20 MOBILE NO 15. AGENCY EMPLOYEE NO. V02939 21. E-MAIL ADDRESS (if any) tingski89@gmail.com 22. SPOUSE'S SURNAME BARRIENTOS 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) N/A N/A JENNIFER FIRST NAME N/A MANGUBAT MIDDLE NAME REVENUE OFFICER OCCUPATION EMPLOYER/BUSINESS NAME **BUREAU OF INTERNAL REVENUE** BUSINESS ADDRESS BARANGAY ABUCAY TACLOBAN CITY LEYTE TELEPHONE NO. N/A 24. FATHER'S SURNAME BARRIENTOS NAME EXTENSION (JR., SR) N/A FIRST NAME **NEPHTALIE** MIDDLE NAME LUCERO MOTHER'S MAIDEN NAME SURNAME LUMAAD **ELIZABETH** FIRST NAME MIDDLE NAME **PAGUIPO** (Continue on separate sheet if necessary) SCHOLARSHIP PERIOD OF ATTENDANCE HIGHEST LEVEL NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE YEAR ACADEMIC LEVEL (Write in full) (Write in full) GRADUATED HONORS (if not graduated) RECEIVED From To 01/03/2002 ELEMENTARY ORMOC ADVENTIST MULTIGRADE SCHOOL PRIMARY EDUCATION 01/06/1996 N/A 2002 N/A LINAO NATIONAL HIGH SCHOOL SECONDARY SECONDARY EDUCATION 01/06/2002 01/03/2006 N/A 2006 N/A VOCATIONAL / N/A N/A N/A N/A N/A N/A N/A EASTERN VISAYAS STATE UNIVERSITY ORMOC BACHELOR OF SCIENCE IN MECHANICAL COLLEGE 01/06/2006 01/03/2011 N/A N/A N/A **CITY CAMPUS ENGINEERING** GRADUATE STUDIES N/A N/A N/A N/A N/A N/A N/A arate sheet if necessary) SIGNATURE

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APRIL 21, 2025

DATE

27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANCAY ELICIBILITY (DRIVER'S LICENCE (If Applicable)			DATE OF EXAMINATION / CONFERMENT	TION / CONFE	RMENT	LICENSE (if ap NUMBER	Date of Validity		
BARANGAY ELIGIBILITY / DRIVER'S LICENSE LICENSURE EXAMINATION FOR MECHANICAL ENGINEER N/A			FEBRUARY 24&25, 2019	BU BANILAD CAMPUS		N/A	09/15/20		
			(Con	tinue on separate sheet it	necessary)				
	EXPERIENCE ate employmen	t. Start from your recent	work) Description	of duties should be i	indicated in the attached	Work Expe	rience sheet.		
INCLU	JSIVE DATES m/dd/yyyy) To	POSITION TI (Write in full/Do not a	TLE	DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)		MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)
PTEMBER 01,2022	PTEMBER PRESENT ENGINEER		PHYSICAL PULP SPECIAL	34123.10	N/A	JOB ORDER	N/A		
APRIL 15,2019 APRIL	OCTOBER 31, 2021 OCTOBER 31,	PREVENTIVE MAII SUPERVIS ENGINEERING MAINTEI	OR	INCOR	14000.00	N/A	PERMANENT CONTRACTUA	N/A	
15,2018 ANUARY	2018 MARCH	OPERATO	OR	ROBINSONS LA MERALCO INDUS	9000.00	N/A	PROJECT	N/A	
5,2017	31,2017	QUANTITY TR	ACKER		CORPORATION	7500.00	N/A	BASED	N/A
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						CT ROWERS			
	A CONTRACTOR OF THE CONTRACTOR			Walter State					
	1		(Cor	ntinue on separate sheet	if necessary)				

-	UNTARY WORK OR INVOLVEMENT		INCLUSIV	STATE OF THE PERSON NAMED IN	KGANIZA IIO	V/3		
29. NAME & ADDRESS OF OR (Write in full)			(mm/di		NUMBER OF HOURS 4hrs	POSITION / NATURE OF WORK		
	MORAL RECOVERY and HEALTH	MORAL RECOVERY and HEALTHY LIFESTYLE SEMINAR		11/04/2025		LECTURER		
	MORAL RECOVERY and LIVELIHOOD TRAINING PROGRAM		19/11/2018 24/11/2018		1hr		FACILITATOR/LECTURER	
300						89 7.00 DOM		
	ARNING AND DEVELOPMENT (L&C) the most recent L&D/training program and inclu) INTERVENTIONS/TRAINING PR		TENDED		erial positions)		
0.	TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)		ATTEN	DATES OF IDANCE Id/yyyy)	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
1573	CONSTRUCTION, OCCUPATIONAL SA	AFETY and HEALTH (SO2)	11/03/2025	14/03/2025	40hrs	TECHNICAL	PERSONAL	
300 2009	9th PSME VISAYAS REGIONA	AL CONFERENCE	20/06/2023	23/06/2023	32hrs	MANAGERIAL	ILIPPINE SOCIETY OF MECHANICAL ENGINEERS INCORPO	
7 -	CONSTRACTOR PERFORMANCE	EVALUATION SYSTEM	23/11/2022	25/11/2022	24hrs	TECHNICAL	VSU MAIN	
	MANDATORY OCCUPATIONAL S		12/03/2019	12/03/2019	8hrs	SUPERVISORY	PULP SPECIALTIES PHILIPPINES INCORPORAT	
OPER/	ATION, MAINTENANCE AND BASIC TROUB AHU, FCU ans SPLIT 1		14/05/2018	14/05/2018	4hrs	TECHNICAL	YORK EQUIPMENT COMPANY	
	CONTRACTOR STATES							
		(Co.	ntinue on separate	sheet if necessary	<i>y</i>)			
	THER INFORMATION SPECIAL SKILLS and HOBBIES	NOI	N-ACADEMIC DISTI		GNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATIO (Write in full)	
31.		,	32. (Write in full)					
	MS OFFICE LITERATE N/A DRIVING N/A					UNIVERSITY SCHOOL N/A		
	OUTDOOR ACTIVITIES		N/A			TUNOB SA MGA ADVENTISTANG MAINAMPINGON SA KINAIYAHAN		
	CIONATURE	(C)	ontinue on separate	e sheet if necessa		DATE	May 6, 2025	
	SIGNATURE		1				CS FORM 212 (Revised 2017), Page	

34.	Are you related by consanguinity or affinity to the appointing chief of bureau or office or to the person who has immediate Bureau or Department where you will be apppointed, a. within the third degree?		Para			
	b. within the fourth degree (for Local Government Unit - Car	NO If YES, give details:	e i de la compania d La compania de la compania del compania de la compania del compania de la compania del compania de la compania del compania de la compania del compani			
35.	a. Have you ever been found guilty of any administrative off	ense?	NO			
		If YES, give details:				
	b. Have you been criminally charged before any court?	NO If YES, give details: Date Filed: Status of Case/s:				
36.	Have you ever been convicted of any crime or violation of a any court or tribunal?	NO If YES, give details:				
37.	Have you ever been separated from the service in any of the dropped from the rolls, dismissal, termination, end of term, in the public or private sector?	, YES If YES, give details:				
38.	A. Have you ever been a candidate in a national or local ele Barangay election)?	NO If YES, give details:				
	b. Have you resigned from the government service during the election to promote/actively campaign for a national or local	If YES, give details:				
39.	Have you acquired the status of an immigrant or permanent	NO If YES, give details (country):				
40. a. b.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma and (c) Solo Parents Welfare Act of 2000 (RA 8972), please Are you a member of any indigenous group? Are you a person with disability? Are you a solo parent?	If YES, please specify: NO If YES, please specify ID No: NO If YES, please specify ID No:				
41.	REFERENCES (Person not related by consanguinity or affinity to applican	nt /appointee)	2027 (1999) - Ann Frederick (1997) - Ann Fred			
	NAME	ADDRESS	TEL. NO.			
	DILBERTO O. FERRAREN	CEBU CITY	9176341488			
	MARLON G. BURLAS	ORMOC CITY	9176341527	\ &\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
	PSTR. JESRIEL E. LUCERO	ORMOC CITY	9128493585			
F a	declare under oath that I have personally accomplished this Personally accomplished this Personally accomplished this Personal Personal I authorize the agency head/authorized representation gree that any misrepresentation made in this document and its administrative/criminal case/s against me.	, rules and regulations of the Republic of the re to verify/validate the contents stated herein		BANGHAYOS MONG NEIL L		
G	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) LEASE INDICATE ID Number and Date of Issuance overnment Issued ID: PRC LICENSE I.D	RH				
-	//License/Passport No.: 0104817 ate/Place of Issuance: MANILA CITY / 03/15/2019	ox)	Right Thumbmark			
	SUBSCRIBED AND SWORN to before me this	OF MAY 2025affiant exhibit	ting his/her validly issued governme			
		ATTY, KAREN ABEGAL S. MONTERON VSU Director, Legal Affairs and Services	V			

Person Administering Oath

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: Sept.1, 2022 Present
- Position: ENGINEER 1 J.O.
- Name of Office/Unit: Instrumentation and Calibration Unit
- Immediate Supervisor: Engr. Clint C. Sarvida
- Name of Agency/Organization and Location: VSU MAIN CAMPUS BAYBAY CITY
- List of Accomplishments and Contributions (if any)
 - *Schedule the Regular Preventive Maintenance of University Air conditioning Unit.
 - *Monitoring of Maintenance and Calibration of University Instruments.
 - *Facilitate the Calibration of University laboratory Instruments.
 - Summary of Actual Duties
 - * Facilitate and monitor maintenance and calibration schedule of laboratory instruments.
 - *Create Maintenance Schedule and generate work orders.
 - * Make a technical reports and documentation essential to maintenance management.
 - * Assess and evaluate the performances of mechanical equipments such as pumps, heating and air conditioning unit and refrigeration system.

Attachment to CS Form No. 212

BARRIENTOS, DODONG NEIL L.

(Signature over Printed Name of Employee/Applicant)

Date: 4/23/2025