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 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) 2. SURNAME Papong NAME EXTENSION (JR., SR) N/A FIRST NAME Concepcion MIDDLE NAME Apas 3. DATE OF BIRTH 12/07/1975 16. CITIZENSHIP ☑ Filipino (mm/dd/yyyy) ☐ Dual Citizenship ☐ by birth □ by naturalization 4. PLACE OF BIRTH Tudela, Cebu If holder of dual citizenship Pls. indicate country: please indicate the details. □ Male ☑ Female 5 SEX W Block 2, Lot 3 ☐ Single ☑ Married 17. RESIDENTIAL ADDRESS 6 CIVIL STATUS House/Block/Lot No ☐ Widowed Street ☐ Separated PQ Subdivision Cogon ☐ Other/s: Subdivision/Villag Barangay Baybay Leyte HEIGHT (m) City/Municipality Province WEIGHT (kg) 78 kgs. ZIP CODE 6521 18. PERMANENT ADDRESS Block 2, Lot 3 **BLOOD TYPE** AB+ House/Block/Lot No Street PQ Subdivision Cogon 10. GSIS ID NO. 2006266706 Subdivision/Village Barangay Baybay 11. PAG-IBIG ID NO. Leyte 121016152839 City/Municipali Province 020505395582 12. PHILHEALTH NO. ZIP CODE 6521 13. SSS NO. 0619859176 19. TELEPHONE NO. NA 14. TIN NO. 286067912 09359320276 20. MOBILE NO. 15. AGENCY EMPLOYEE NO V02082 21. E-MAIL ADDRESS (if any) cpapong55@gmail.com/papong.concepcion@vsu.edu.ph FAMILY BACKGROU 22. SPOUSE'S SURNAME Papong 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) Jeoff Apas Papong FIRST NAME Joergen 01/05/2005 MIDDLE NAME Pablo OCCUPATION OFW / Chief Enginer EMPLOYER/BUSINESS NAME Manila Ocean Crew Management **BUSINESS ADDRESS** Pasay City, Manila NA TELEPHONE NO FATHER'S SURNAME Apas NAME EXTENSION (JR., SR) FIRST NAME Leonardo Solante MIDDLE NAME MOTHER'S MAIDEN NAME Concoles SURNAME Zenaida FIRST NAME MIDDLE NAME (Continue on separate sheet if necessary) EDUCATIONAL BACKGROUN SCHOLARSHIP HIGHEST LEVEL PERIOD OF ATTENDANCE NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE ACADEMIC HONORS YEAR LEVEL UNITS EARNED GRADUATED (Write in full) (Write in full) (if not graduated) RECEIVED From To Calmante Elementary School ELEMENTARY Primary 06/05/1983 03/19/1989 3/20/1989 NA with honor SECONDARY University of the Visayas Secondary 06/08/1989 3/21/1993 NA 04/02/1990 with honor VOCATIONAL / NA NA NA NA NA NA NA TRADE COURSE University of the Visayas COLLEGE Tertiary 06/05/1995 03/20/2000 NA 3/20/2000 NA **GRADUATE STUDIES** University of San Carlos **Graduate Studies** 06/08/2012 03/21/2013 NA 3/21/2013 NA inue on separate sheet if necessary) SIGNATURE DATE May 14, 2025

BAR/ Philippir	SPECIAL LAV ANGAY ELIGIBILI ne Nurse Lice	080 (BOARD/ BAR) UNDER NS/ CES/ CSEE TY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINAT	TION / CONFER	RMENT	NUMBER	Date of Validity
		nsure Examination		A CARL LAND DURANTAN	PLACE OF EXAMINATION / CONFERMENT				validity
Philippin	e Midwife Lice		12/02/2000	Metro Manila			0339705	12/07/2025	
		Philippine Midwife Licensure Examination NA			Metro Manila			0177667	12/072025
							8-46		
V WARK E	VDEDIENCE		(Co	ntinue on separate sheet	if necessary)				
	XPERIENCE ite employmer	nt. Start from your recer	t work) Descriptio	n of duties should b	e indicated in the attached	d Work Exp	CONTRACTOR DE LA CONTRA		T
	SIVE DATES n/dd/yyyy) To	POSITION (Write in full/Do no		TO A STATE OF THE	ENCY / OFFICE / COMPANY I/Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)
	present	Clinical Insi	ructor	VSU Col	lege of Nursing	29165.00	12	temporary	N
	01/05/2022	Staff Nu	rse		n Medical Cente	16000.00	NA	Full Time	N
06/01/2015	05/31/2021	Dean of the Colleg	e of Midwifery	FCIC, Bay	/bay City, Leyte	26000.00	NA	Full Time	N
06/02/2013	06/05/2015	Clinical Ins	tructor	FCIC, Baybay City, Leyte		8000.00	NA	Full Time	N
06/01/2011	06/01/2013	School N	urse	FCIC, Bay	6000.00	NA	Full Time	N	
08/14/2008	02/27/2010	Medical Proced	lure Nurse	Super Care	11000.00	NA	Full Time	N	
04/14/2003	05/03/2004	TET and 2D-Ed	ho Nurse	Manila Medica	16500.00	NA	Full Time	N	
06/13/2004	06/14/2005	Staff Nu	rse	St. Magdalen Med	16500.00	NA	Full Time	N	
06/30/2005	07/03/2007	Staff Nu	rse	Health World Pasay Cityedical Services,		16500.00	NA	Full Time	N
03/13/2008	05/03/2010	Assessmen	t Nurse	Super Care Medica	al Services, Metro Manila	16500.00	NA	Full Time	N
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									H NEW YORK
SIGNA	TURE		(Co	ontinue on separate sheet	if necessary) DATE			05/14/2025	

	NT IN CIVIC / NON-GOVERNMENT	INCLUENCE DATE				
NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy) From To		NUMBER OF HOURS	POSITION / NATURE OF WORK		
SF Assistance Community Center - FCIC B	0601/2012	05/31/2021	24 per year	volunteer nurs	se manufactura quantitativa in color	
order of Franciscan Secular Religious Orga				volunteer for o	community assistance	
					ra va	
Continue on separate sheet if necessary)						
(II. LEARNING AND DEVELOPMENT (L&D) Start from the most recent L&D/training p				ne last five (5)	years for Divisi	on Chief/Executive/Managerial positions)
0. TITLE OF LEARNING AND DEVELOPME PROGRAMS (Write	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD	CONDUCTED/ SPONSORED BY (Write in full)	
eminar on: Continuing Professional Devel	lopment Framework for Quality	01/13/2020	01/13/2020	8.0	Supervisory	PNA RO8
Assurance Program for Filipino Nurses Basic First Aid / Life Support EAD Operatio	n	-	10/03/2019	8.0	CDRRMO	Park Control
1th Post Graduate Course in Internal Med			12/17217	8.0	Supervisory	Baybay City, Leyte Philippine College of Physicians, Eastern
nto the Phillipne Clinical Guidelines for F Health Services NC 11	04/01/2020	04/01/2020	8.0	Supervisory	Visayas TESDA	
/irtual Medical Forum on "Smoking Ceasa Cardiovascular Health	tion and Its Impact on	04/29/2020	04/29/2020	4.0	Supervisory	
/irtual PNA Convention with theme: 'KAY/ /earns & Active	A" Knowledgeable, Adaptable,	03/11/2021	03/11/2021	8.0	Supervisory	Ormoc City Medical Societ
Jurse's Role Amidst Covid 19 Pandemic		04/04/2021	04/19/2021	8.0	Supervisory	PNA Zambales Chapter
Online Professional Development Webinar	· · · · · · · · · · · · · · · · · · ·	07/27/2020	07/27/2020	8.0	Supervisory	e respector to the profit of the second
/irtual Lecture on Covid 19 Vaccines	02/19/2020	02/19/2020	8.0	Supervisory	Rex Academy FCIC Health Services Department	
Seminar Workshop on Test Construction	09/27/2019	09/27/2019	8.0	Supervisory	FCIC College Department	
GAD Orientation of Employees on Establish	06/28/2019	06/28/2019	8.0	Supervisory	GAD	
Resource person on program "Sukaranay:	03/10/2023	03/10/2023	4.0	Supervisory	VSU	
Awareness and Re-awareness Webinar	08/29/2023	08/29/2023	4.0	Supervisory	VSU	
DRNAP Eastern Visayas 9th Annual Region Meeting	01/18/2025	01/18/2025	8.0	Supervisory	Tacloban City	
CAE/ELEVATE Apollo Prehospital Patient S Fraining	02/13/2025	02/14/2025	16.0	Supervisory	VSU	
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107					The state of the s	Asserting the State of the Stat
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(Continue on separate sheet if necessary) VIII. OTHER INFORMATION						
31. SPECIAL SKILLS and HOBBIES	32. (Write in full)	NON-ACADEMIC DISTINCTIONS / RECOGNITION 33. ASSOC (Write in full) (Write				MEMBERSHIP IN 33. ASSOCIATION/ORGANIZATION (Write in full)
Acting	oundation Volu	nteer Nurse fo	or minor surge	Philippine Nurse's Association Integrated Midwife's Association of t		
Dancing						Philippines
			003			The second of th
		ntinue on separ	ate sheet if ne	ecessary)		
*		0			DATE	05/14/2025 CS FORM 212 (Revised 2017),

Are you related by consanguinity or affinity to the appointing of chief of bureau or office or to the person who has immediate a Bureau or Department where you will be approinted,			
a. within the third degree?	☐ YES ☑ NO		
b. within the fourth degree (for Local Government Unit - Cared	☐ YES ☑ NO If YES, give details:		
35. a. Have you ever been found guilty of any administrative offer	nse?	☐ YES ☑ NO	
go. a. nato joo ora, bosh oan gan, oran, as mare and		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 of any any court or tribunal?	☐ YES ☑ NO If YES, give details:		
		9 11 <u>2007 (1. 1934) 13 - 140, 145, 152, 153, 153, 15, 15</u>	
37. Have you ever been separated from the service in any of the dropped from the rolls, dismissal, termination, end of term, fin in the public or private sector?	HT (1985)	☑ YES ☐ NO If YES, give details: personal	
38. a. Have you ever been a candidate in a national or local elect Barangay election)?	☐ YES ☑ 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 or	☐ YES ☑ NO If YES, give details:		
39. Have you acquired the status of an immigrant or permanent r	☐ YES ☑ NO If YES, give details (country):		
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magn 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), p		And individual Programme in the community of the color of	
a. Are you a member of any indigenous group?		☐ YES ☑ NO	
b. Are you a person with disability?	If YES, please specify: ☐ YES ☑ NO If YES, please specify ID No:		
c. Are you a solo parent?	☐ YES ☑ NO If YES, please specify ID No:		
41. REFERENCES (Person not related by consanguinity or affinity to applicant /	appointee)		
NAME	ADDRESS	TEL. NO.	
Amelito Borneo - Ret. SP Secretary	LGU Baybay City, Leyte	9365483634	
Deogracias E. Pernitez - Ret. City Administrator	LGU Baybay City, Leyte	9263157575	
Viky Gonzaga Ed.D - Dean of Graduate School	FCIC Baybay, City, Leyte	09773878170	
42. I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertine Philippines. I authorize the agency head/authorized represer agree that any misrepresentation made in this docum administrative/criminal case/s against me.	ent laws, rules and regulations of the native to verify/validate the contents state	Republic of the CONCEPCION A. PAPONG	
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: PRC			
ID/License/Passport No.: 0339705	Th		
Date/Place of Issuance: 03/01/2001 / Metro Manila	Signature/(Sign inside the bo 05/14/2025 Date Accomplished		
SUBSCRIBED AND SWORN to before me this	O MAY ODOR	Right Thumbmark his/her validly issued government ID as indicated above.	
	ATTY. KAPEN ABEGAIL S. MONTER YSU Director, Legal Affairs and Service Person Administering Oath	2001	

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: Present
- · Position: Clinical Instructor
- · Name of Office/Unit: College of Nursing
- Immediate Supervisor: Prose Ivy G. Yepes Ed.D
- Name of Agency/Organization and location: Visayas State University, Baybay City, Leyte
- List of accomplishments and Contribution:
- Healthcare Services NC 11
- Trained First Aid Rescuer
- Duration: June 2, 2015 May 30, 2021
- · Position: Dean , College of Midwifery
- · Name of Office/Unit: Paramedical Department
- Immediate Supervisor: Sister M. Maribel Piangco, OSF
- Name of Agency/Organization and Location: Franciscan College of the Immaculate Conception, Baybay City, Leyte
 - List of Accomplishments and Contributions (if any)
 Health Care Services NC 11
 Trained First Aid Rescuer
 - Summary of Actual Duties Administrative duties
- Duration: June 5, 2013 2015
- Position: Clinical Instructor
- Name of Office/Unit: Paramedical Department
- Immediate Supervisor: Sister M. Maribel Piangco, OSF
- Name of Agency/Organization and Location: Franciscan College of the Immaculate Conception, Baybay City, Leyte
 - List of Accomplishments and Contributions (if any)
 Health Care Services NC 11
 Trained First Aid Rescuer
 - Summary of Actual Duties Classroom and Clinical Instructor Club Moderator
- Duration: June 2, 2011 May 30, 2013
- Position: School Nurse
- Name of Office/Unit: Health Services Department
- Immediate Supervisor: Sister M. Maribel Piangco, OSF
- Name of Agency/Organization and Location: Franciscan College of the Immaculate Conception, Baybay City, Leyte
 - List of Accomplishments and Contributions (if any)
 Trained First Aid Rescuer
 - Summary of Actual Duties
 Responsible for the maintenance of a quality healthcare for the school population.
- Duration: 7/3/2008 4/15/2010
- Position: Assessment Nurse
- Name of Office/Unit: Medical Procedure Department
- Immediate Supervisor: Dr. Pasqualito Gutay

- Name of Agency/Organization and Location: Super Care Medical Services, Cebu City
 - List of Accomplishments and Contributions (if any)
 Trained ECG and Audiometry Technician
 - Summary of Actual Duties Medical procedure nurse
- Duration: 8/3/2005 3/30/2008
- Position: Staff Nurse
- Name of Office/Unit: Medical Procedure Department
- Immediate Supervisor: Dr. Reynaldo Salinel
- Name of Agency/Organization and Location: St. Magdalene Medical Clinic
 - List of Accomplishments and Contributions (if any)
 Trained ECG, 2D-Echo and Stress Test Technician
 - Summary of Actual Duties Medical procedure nurse

Concepcion A. Papong

(Signature over Printed Name of Employee/Applicant)

Date: 5 - 15 - 2025