CS Form No. 212 Revised 2017

## PERSONAL DATA SHEET

WARNING: Any misrepresentation made in the Personal Data Sheet and the Work Experience Sheet shall cause the filling 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 ( ) and 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) CASTIL 2 SURNAME NAME EXTENSION (JR., SR) FIRST NAME JHONAVEL N/A MIDDLE NAME ROMBLON 3. DATE OF BIRTH **FEBRUARY 23, 1995** 16. CITIZENSHIP (mm/dd/yyyy) **✓** Filipino Dual Citizenship by birth by naturalization 4. PLACE OF BIRTH ANAHAWAN, SOUTHERN LEYTE If holder of dual citizenship Pls. indicate country: please indicate the details ☐ Male ✓ Female 5. SEX Philippines ✓ Single ☐ Married 17. RESIDENTIAL ADDRESS **APARTMENT NO. 1** KILBOURNE ST 6 CIVIL STATUS ☐ Widowed ✓ Separated House/Block/Lot No PANGASUGAN VSU. LOWER CAMPUS Other/s: Barangay Subdivision/Villad **BAYBAY CITY** LEYTE 7. HEIGHT (m) 1.55 m City/Municipality Province 66 kg 6521 8. WEIGHT (kg) ZIP CODE 18. PERMANENT ADDRESS 9. BLOOD TYPE AB+ House/Block/Lot No. Street **LEWING** 10. GSIS ID NO CRN-011-1486-3951-0 Subdivision/Village Barangay **ANAHAWAN** SOUTHERN LEYTE 11. PAG-IBIG ID NO 121143904491 City/Municipality Province 03-025772050-7 6610 12 PHILHEALTH NO ZIP CODE 13. SSS NO. 03-45123574-8 19. TELEPHONE NO. (053) 557-0773 14. TIN NO. 322-041-301-000 20. MOBILE NO. 0955-420-9673 / 0928-755-6851 V01208 15. AGENCY EMPLOYEE NO 21. E-MAIL ADDRESS (if any) rjhonavel@yahoo.com FAMILY BACKGROUND 22. SPOUSE'S SURNAME N/A 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) N/A FIRST NAME N/A **EROS GAVIN CASTIL** FEB. 26, 2019 MIDDLE NAME N/A N/A OCCUPATION EMPLOYER/BUSINESS NAME N/A **BUSINESS ADDRESS** N/A TELEPHONE NO. N/A CASTIL 24. FATHER'S SURNAME NAME EXTENSION (JR., SR) FIRST NAME NILO MIDDLE NAME **MATAFLORIDA** 25. MOTHER'S MAIDEN NAME SURNAME ROMBLON FIRST NAME REFELYN PAL CO MIDDLE NAME (Continue on separate sheet if necessary) SCHOLARSHIP HIGHEST LEVEL PERIOD OF ATTENDANCE NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE YEAR **ACADEMIC** LEVEL UNITS EARNED (Write in full) (Write in full) GRADUATED HONORS (if not graduated) RECEIVED To SALUTATORIA ELEMENTARY **MAHALO ELEMENTARY SCHOOL** PRIMARY EDUCATION 2007 **GRADUATED** 2007 2003 SALUTATORIA SAINT ANTHONY'S HIGH SCHOOL SECONDARY EDUCATION SECONDARY 2007 2011 GRADUATED 2011 VOCATIONAL / N/A N/A TRADE COURSE **MAGNA CUM** COLLEGE **METRO MANILA COLLEGE BSBA-FINANCIAL MANAGEMENT GRADUATED** 2015 LAUDE GRADUATE STUDIES N/A luna SIGNATURE DATE 1/24/2023

| MATERIAL    | 18 6, 41,3   | ÉRV CE ELIG   | BILITY                |                  |                          |                           |                |                                       | <b>.</b>                 | 4                 |
|--|--|---|-----------------------|------------------|--------------------------|---------------------------|----------------|---------------------------------------|--------------------------|-------------------|
|  | 80   | CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER<br>SPECIAL LAWS/ CES/ CSEE |                       | RATING           |                          | AL FRENCH C               | NO.455         |                                       |                          |                   |
| No.   REGION   NORS    No.     | BA   |   |                       |                  |                          |                           |                |                                       | NUMBER                   |                   |
| V. WORK EXPERIENCE   | НО   | HONOR GRADUATE ELEGIBILITY N/A  |                       |                  |                          |                           |                |                                       | 1001131602017            | 3/27/2015         |
| Common or equipment about 7 increasings  | The state of the s |   | and the second        |                  |                          |                           |                |                                       |                          |                   |
| V. WORK EXCENSIONES  | کر.  |   |                       |                  |                          |                           |                |                                       |                          |                   |
| V. WORK EXCENSIONES  |  |   |                       |                  |                          |                           |                |                                       |                          |                   |
| V. WORK EXCENSIONES  |  |   |                       |                  |                          |                           |                |                                       |                          |                   |
| V. WORK EXCENSIONES  |  |   |                       |                  |                          |                           |                |                                       |                          |                   |
| V. WORK EXPERIENCE   |  |   |                       |                  |                          |                           |                |                                       |                          |                   |
|  | ,  |   |                       |                  | Continue on separate sh  | eet if necessary)         |                |                                       |                          |                   |
| POSITION   TITLE   POSITION      |  |   |                       | work) Descriptio | n of duties should be    | n indicated in the attack | and Work Evens |                                       |                          |                   |
| Promosupper  | 28. INCL   | USIVE DATES   |                       |                  |                          |                           |                | SALARY/ JOB/ PAY                      | OTATUS OF                | GOV'T             |
| S192015   105/2015   CUSTOMER SERVICE ASSISTANT   MARKET STRATEGIC FIRM   13,338.00   NA   PROBATIONARY   NO   |  | (Write in full/Do not abbreviate)                                     |                       |                  |                          |                           | MONTHLY SALARY | applicable)& STEP<br>(Format "00-0")/ |                          |                   |
| 201/2017   3/15/2018   ADMINISTRATIVE ASSISTANT   MO MEDIAZONE PRODUCTIONS   11,000.00   NAA   CONTRACTUAL   NO     8/16/2018   5/31/2020   ADMINISTRATIVE AIDE   VISAYAS STATE UNIVERSITY   9,659.36   NAA   J.O   YES     8/17/2020   PRESENT   ADMINISTRATIVE AIDE    VISAYAS STATE UNIVERSITY   14,125.10   SG.3   CASUAL   YES     8/17/2020   RESENT   ADMINISTRATIVE AIDE    VISAYAS STATE UNIVERSITY   14,125.10   SG.3   CASUAL   YES     8/17/2020   RESENT   ADMINISTRATIVE AIDE    VISAYAS STATE UNIVERSITY   14,125.10   SG.3   CASUAL   YES     8/17/2020   RESENT   ADMINISTRATIVE AIDE    VISAYAS STATE UNIVERSITY   14,125.10   SG.3   CASUAL   YES     8/17/2020   RESENT   ADMINISTRATIVE AIDE    VISAYAS STATE UNIVERSITY   14,125.10   SG.3   CASUAL   YES     8/17/2020   RESENT   ADMINISTRATIVE AIDE    VISAYAS STATE UNIVERSITY   14,125.10   SG.3   CASUAL   YES     8/17/2020   RESENT   ADMINISTRATIVE AIDE    VISAYAS STATE UNIVERSITY   14,125.10   SG.3   CASUAL   YES     8/17/2020   RESENT   ADMINISTRATIVE AIDE    VISAYAS STATE UNIVERSITY   14,125.10   SG.3   CASUAL   YES     8/17/2020   RESENT   ADMINISTRATIVE AIDE    VISAYAS STATE UNIVERSITY   14,125.10   SG.3   CASUAL   YES     8/17/2020   RESENT   ADMINISTRATIVE AIDE    VISAYAS STATE UNIVERSITY   14,125.10   SG.3   CASUAL   YES     8/17/2020   RESENT   ADMINISTRATIVE AIDE    VISAYAS STATE UNIVERSITY   14,125.10   SG.3   CASUAL   YES     8/17/2020   RESENT   ADMINISTRATIVE AIDE    VISAYAS STATE UNIVERSITY   14,125.10   SG.3   CASUAL   YES     8/17/2020   RESENT   ADMINISTRATIVE AIDE    VISAYAS STATE UNIVERSITY   14,125.10   SG.3   CASUAL   YES     8/17/2020   RESENT   ADMINISTRATIVE AIDE    VISAYAS STATE UNIVERSITY   14,125.10   SG.3   CASUAL   YES     8/17/2020   RESENT   ADMINISTRATIVE AIDE    VISAYAS STATE UNIVERSITY   YES     8/17/2020   | 5/13/2015  |   | CUSTOMER SERVICE AS   | SSISTANT         | MARKET STRATEG           | MARKET STRATEGIC FIRM     |                | N/A                                   | PROBATIONARY             | NO                |
| SPIGNOTION   STATE     | 10/13/2015   | 12/31/2016  | FINANCIAL ANALYST 1   |                  | DSWD-NCR                 |                           | 18,549.00      | SG-9                                  | MOA                      | YES               |
| SONATURE  ADMINISTRATIVE AIDE III  VISAYAS STATE UNIVERSITY  14,125.10  SG.3  CASUAL  YES  CASUAL  YES  LATER TO SG.3  CASUAL  YES  LATER TO S | 2/1/2017   | 3/15/2018   | ADMINISTRATIVE ASSIS  | TANT             | MQ MEDIAZONE P           | RODUCTIONS                | 11,000.00      | N/A                                   | CONTRACTUAL              | NO                |
| SIGNATURE  Continue on apparels about If reconsary)  DATE  MAYANA  | 8/16/2018  | 5/31/2020   | ADMINISTRATIVE AIDE I |                  | VISAYAS STATE U          | NIVERSITY                 | 9,659.36       | N/A                                   | J.O                      | YES               |
| SIGNATURE June DATE 1/24/2023  | 6/1/2020   | PRESENT   | ADMINISTRATIVE AIDE I | II               | VISAYAS STATE UNIVERSITY |                           | 14,125.10      | SG-3                                  | CASUAL                   | YES               |
| SIGNATURE June DATE 1/24/2023  | parties and the same   |   |                       |                  |                          |                           |                |                                       |                          |                   |
| SIGNATURE June DATE 1/24/2023  |  |   |                       |                  | -                        |                           |                |                                       |                          |                   |
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| SIGNATURE June DATE 1/24/2023  |  |   |                       |                  |                          |                           |                |                                       | ·                        |                   |
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| SIGNATURE June DATE 1/24/2023  |  |   |                       |                  |                          |                           |                |                                       |                          |                   |
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| SIGNATURE June DATE 1/24/2023  |  |   |                       |                  |                          |                           |                |                                       |                          | -                 |
| SIGNATURE June DATE 1/24/2023  |  |   |                       |                  |                          |                           |                |                                       |                          |                   |
| SIGNATURE June DATE 1/24/2023  | N 10- 17-40-12-07  |   |                       |                  |                          |                           |                |                                       |                          |                   |
| SIGNATURE June DATE 1/24/2023  |  |   |                       |                  |                          |                           |                |                                       |                          |                   |
| SIGNATURE June DATE 1/24/2023  |  | -   |                       | - 198            | 1                        |                           |                |                                       |                          |                   |
| SIGNATURE June DATE 1/24/2023  |  |   |                       |                  | 71 34-15 (18)            |                           |                |                                       |                          |                   |
| SIGNATURE June DATE 1/24/2023  |  | -   |                       |                  |                          |                           |                |                                       |                          |                   |
| SIGNATURE June DATE 1/24/2023  |  | -   |                       |                  |                          |                           |                |                                       |                          |                   |
| SIGNATURE June DATE 1/24/2023  |  |   |                       |                  |                          |                           |                | 1                                     |                          |                   |
| SIGNATURE June DATE 1/24/2023  |  |   |                       | 1.0              |                          |                           |                |                                       |                          |                   |
| SIGNATURE June DATE 1/24/2023  |  |   |                       |                  |                          |                           |                |                                       |                          |                   |
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|  | SIGN   | IATURE  |                       | Link             |                          | DATE                      | 1/             | 24/2023                               | CS FORM 212 (Revilsar) 2 | 017). Page 2 of A |

| VI. VOLUNTARY WORK OR INVOLVEMENT   | IN CIVIC / NON-GOVERNMENT / F   | PEOPLE / VOL             | UNTARY OR  | GANIZATIONS  |  |  |
|---|---|--------------------------|--|--|--|--|
|   | NAME & ADDRESS OF ORGANIZATION (Write in full)  INCLUSIVE DATES (mm/dd/yyyy)  NUMBER OF HOURS From To |                          |  |  | POSITION / NATURE OF WORK  |  |
| NONE  | Lev Li  |                          | TONG S   | Programme Inc.   | liper of a   | t esse l'all aeroan angel qui a ser a                                |
|   | *********   |                          |  |  |  |  |
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|   | Manual Control of Control   |                          |  | 100000   | Patricia a Xalia   |  |
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|   |   |                          |  |  | 314.27   |  |
|   |   |                          |  |  |  |  |
|   | (Con  | tinue on separate s      | chael if naraecon                                    | 4)   |  |  |
| VII. LEARNING AND DEVELOPMENT (L&D)   |   | NAME OF TAXABLE PARTY.   | NAME AND ADDRESS OF THE OWNER, WHEN PERSONS NAMED IN | <b>,</b>   |  |  |
| (Start from the most recent L&D/training program and inc                        | lude only the relevant L&D/training taken for   | the last five (5) yea    | ars for Division C                                   | hief/Executive/Manag   | erial positions)   |  |
| 30. TITLE OF LEARNING AND DEVELOPMENT IN (Write in f                            | INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy) From To  |                          | NUMBER OF HOURS                                      | Type of LD<br>( Managerial/<br>Supervisory/<br>Technical/etc)  | CONDUCTED/ SPONSORED BY (Write in full)                              |  |
|   |   |                          |  |  | , e  | and the same of the same   |
| Laws and Rules on Governn   |   | 09/13/22022              | 09/16/2022   | 24 hrs.  | Technical  | COMMISSION ON AUDIT REGION VIII                                      |
| In-House Training on Public Fi  | nancial Management  | 08/03/2022               | 08/05/2022   | 24 hrs.  | Technical  | DEPARTMENT OF BUDGET & MANAGEMENT<br>REGION VIII                     |
| AGAP TECHNICAL  | SEMINAR   | 06/16/2022               | 06/16/2022   | 8 hrs.   | Technical  | ASSOCIATION OF GOVERNMENT<br>ACCOUNTANTS OF THE PHILIPPINES          |
| 2021 Membership Conference of Government Financial Management Innovators Circle |   |                          | 11/19/2021   | 8 hrs.   | Technical  | VISAYAS STATE UNIVERSITY   |
| ISO 9001:2015 Awareness/Re-   | 11/27/2020  | 11/27/2020               | 3 hrs.   | Technical  | VISAYAS STATE UNIVERSITY   |  |
| FMU General Assembly cu   | 12/2/216  | 12/3/2016                | 16 hrs.  | Technical  | DEPARTMENT OF SOCIAL WELFARE & DEVELOPLEMENT-NATIONAL CAPITAL REGION |  |
| Finance Management Unit 1st Semestral Pro<br>2016                               | 7/7/2016  | 7/9/2016                 | 24 hrs.  | Technical  | DEPARTMENT OF SOCIAL WELFARE & DEVELOPLEMENT-NATIONAL CAPITAL REGION |  |
| Roll-Out Training on the Implementation Government Accounting Manual            |   |                          | 5/13/2016  | 8 hrs.   | Technical  | DEPARTMENT OF SOCIAL WELFARE & DEVELOPLEMENT-NATIONAL CAPITAL REGION |
| Orientation on the National Cultural Heritage Act of 2009                       |   |                          | 4/19/2016  | 8 hrs.   | Technical  | DEPARTMENT OF SOCIAL WELFARE & DEVELOPLEMENT-NATIONAL CAPITAL REGION |
| Bottom-Up Budgeting Year-End Implementation Review                              |   |                          | 2/24/2016  | 16 hrs.  | Technical  | DEPARTMENT OF SOCIAL WELFARE & DEVELOPLEMENT-NATIONAL CAPITAL REGION |
| Training on Project Manageme  | 12/1/2015   | 12/3/2015                | 24 hrs.  | Technical  | DEPARTMENT OF SOCIAL WELFARE & DEVELOPLEMENT-NATIONAL CAPITAL REGION |  |
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|   |   | Det Ish                  | Van de   | New York Time  | 42,00  | aryone i en isologiu I seneraldi.                                    |
| VIII. OTHER INFORMATION   | (Col  | ntinue on separate       | sheet if necessa                                     | ry)  |  |  |
|   | 32. NOI   | N-ACADEMIC DISTI         |  | OGNITION   |  | MEMBERSHIP IN ASSOCIATION/ORGANIZATION                               |
| 31. SPECIAL SKILLS and HOBBIES  | OL.   |                          | ite in full)   |  |  | VISAYAS STATE UNIVERSITY CREDIT                                      |
| SPORTS (Volleyball, Badminton)  NONE  |   |                          |  |  | COOPERATIVE  |  |
| COOKING ADMINISTRATIVE PERSONNEL AS   |   |                          |  |  |  | ADMINISTRATIVE PERSONNEL ASSOCIATIO                                  |
| DANCING   | Nux.  |                          |  | Student State of the State of t |  |  |
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| -        |  |  |   |                     |  |  |
|----------|--|--|---|---------------------|--|--|
| 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 appropriated, a. within the third degree?   |  | ☐ YES ☑ NO                                |                     |  |  |
|          | b. within the fourth degree (for Local Government Unit - Ca  | ☐ YES ☐ NO  If YES, give details:  |   |                     |  |  |
| 35.      | a. Have you ever been found guilty of any administrative of  | fense?   | ☐ YES ☑ NO 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 a any court or tribunal?   | Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?   |   |                     |  |  |
| 37.      | Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, et (abolition) in the public or private sector?  | ☐ YES ☑ NO If YES, give details:   |   |                     |  |  |
| 38.      | a. Have you ever been a candidate in a national or local ele<br>Barangay election)?  | ☐ YES ☑ NO If YES, give details:   |   |                     |  |  |
|          | b. Have you resigned from the government service during election to promote/actively campaign for a national or local  | ☐ YES ☑ NO If YES, give details:   |   |                     |  |  |
| 39.      | Have you acquired the status of an immigrant or permaner   | ☐ YES ☑ NO If YES, give details (country):   |   |                     |  |  |
| a.<br>b. | 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972 Are you a member of any indigenous group?  Are you a person with disability?  Are you a solo parent?  | ☐ YES ☑ NO If YES, please specify: ☐ YES ☑ NO If YES, please specify ID No: ☑ YES ☐ NO If YES, please specify ID No: 10  |   |                     |  |  |
| 41.      | REFERENCES (Person not related by consanguinity or affinity to applications)   | int /appointee)  |   |                     |  |  |
|          | NAME   | ADDRESS  | TEL. NO.                                  |                     |  |  |
|          | MA V. NAPIERE RIETA B. BUSTILLO  | VSU, Accounting Office  VSU, Accounting Office   | 09359633220<br>09152329310                | 36                  |  |  |
| AM/      | ALIA O. ARMADA   | Brgy. Gabas, Baybay City, Leyte  | 09395530982                               |                     |  |  |
| 42.      | I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertial Philippines. I authorize the agency head/authorized repressagree that any misrepresentation made in this doctor administrative/criminal case/s against me. | nent laws, rules and regulations of the<br>entative to verify/validate the contents stat   | Republic of the ed herein.                | РНОТО               |  |  |
| P        | overnment Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)  LEASE INDICATE ID Number and Date of Issuance overnment Issued ID: GSIS   | -funa  |   |                     |  |  |
| -        | //License/Passport No.: CRN-011-1486-3951-0  | U  |   |                     |  |  |
| $\vdash$ | ate/Place of Issuance: March 2022  | Signature (Sign inside the to the state of t | iox)                                      | Right Thumbmark     |  |  |
|          | SUBSCRIBED AND SWORN to before me this   | 3 MAR 2023 , affiant exhibiting  | ng his/her validly issued government ID a | as indicated above. |  |  |
|          |  | ATTY RYAN C. GUINOCO   | R   |                     |  |  |
|          |  | Person Administering Oal   | h   |                     |  |  |