## CS Form 700. 212 Revised 2017

## PERSONAL DATA SHEET

WARNING: Any misrepresen	tation made in the Personal Data Sheet and the		cause the filli			oriminal case of	nin at the annual		
READ THE ATTACHED GUID	DE TO FILLING OUT THE PERSONAL DATA SHI	FET (PDS) REFORE ACCOME	DI ICUINO TUE	PDS FOR	М				
I. PERSONAL INFORMAT	ION	TWA II HOL applicable. DO NOT A	BREVIATE.		1. CS ID	No.	(Do not fill u	p. For CSC use only	
2. SURNAME	ALBA								
FIRST NAME									
MIDDLE NAME	ARTURO NAME EXTENSION Jr.  BARTOLINI								
3. DATE OF BIRTH	10.5.77	40 OF 175 W. I.S.							
(mm/dd/yyyy)	10.3.77	16. CITIZENSHIP		☑ Fili	pino	Dual Citizensh	nip		
4. PLACE OF BIRTH	Baybay Leyte	If holder of dual citize	✓ by birth □ by naturalizati place. □ by birth □ by naturalizati place. □ by birth □ by naturalizati place. □ by birth □ by naturalizati place. □						
5. SEX		please indicate the details.				e country:			
nea acabina cama a la		A STATE OF THE STA		Philippine	es			and the second	
6 CIVIL STATUS	☐ Single ☑ Married ☐ Widowed ☐ Separated	17. RESIDENTIAL ADDRESS	Hou	House/Block/Lot No.			Street		
and the second section of the second	Other/s:						Guadalupe		
7. HEIGHT (m)	170cm			Subdivision/Village BAYBAY CITY			Barangay LEYTE		
8. WEIGHT (kg)	80 kgs	ZIP CODE	C	City/Municipality			Province		
9. BLOOD TYPE	B+	18. PERMANENT ADDRESS				6521			
40. OCIO ID NO	-		Нои	se/Block/Lot i	No.		Street		
10. GSIS ID NO.	2004796893		Sub	bdivision/Villag	gθ		Guadalupe Barangay		
11. PAG-IBIG ID NO.	100802521901	and the second of the second o	В	BAYBAY CITY		LEYTE			
12. PHILHEALTH NO.	03-050042422-9	ZIP CODE	City/Municipality 6521		6521	Province			
13. SSS NO.	33-71014502	19. TELEPHONE NO.		11	ii y in	N/A			
15. AGENCY EMPLOYEE NO.	417-024-730 n/a	20. MOBILE NO.		09057371294					
I. FAMILY BACKGROUND		21. E-MAIL ADDRESS (if any)			thurfox	1977@gmail.d	com		
2. SPOUSE'S SURNAME	ALBA		23. NAME of CHI	I DDEN ANd	to full name	- d E-d - W			
FIRST NAME	ROSEMARIE	NAME EXTENSION (JR., SR)	ZO. TARIAL OF ORTH					RTH (mm/dd/yyyy)	
MIDDLE NAME	COBARDO		Alexa Loise C. Alba Thurfox Gregory C. Alba		01-29-2005				
OCCUPATION	Housewife		-	nurrox G	regory C	. Alba	06-1	6-2008	
EMPLOYER/BUSINESS NAME	N/A								
BUSINESS ADDRESS	N/A								
TELEPHONE NO.									
4. FATHER'S SURNAME	N/A ALBA (deceased)								
FIRST NAME		NAME EXTENSION (JR., SR)					-	4	
	ARTURO	TO THE EXTENSION (U.S., SR)							
MIDDLE NAME	ESGUERRA								
MOTHER'S MAIDEN NAME	D 4 11 14 1								
SURNAME	Bartolini (deceased)						-		
FIRST NAME	Herminia						-		
MIDDLE NAME	Pabroquez			(Co	ontinue on s	eparate sheet if neces	ssary)		
EDUCATIONAL BACKG	ROUND								
LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/ (Write in full)	/COURSE	PERIOD OF A		HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS	
ELEMENTARY	GUADALUPE ELEMENTARY SCHOLL	Primary		From 1984	To 1990	Graduated	4000	RECEIVED	
SECONDARY	SAN JOSE NATIONAL HIGH SCHOOL	Secondary		1990	1996	Graduated	1990	N/A	
VOCATIONAL / TRADE COURSE	N/A				1000	Siduated	1996	N/A	
COLLEGE	Visayas State University	BS in Animal Science		1996	2000	124 Units	Undergo		
COLLEGE	N/A				2000	124 011113	Undergrad.		
GRADUATE STUDIES	N/A			,		54			
GRADUATE STUDIES	N/A	×61							
SIGNATURE	(Co	ntinue on separate sheet if necess	ary)	DAT	TE .	Cest 1	7.7071		

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27. CAR	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER RATING DATE OF SPECIAL LAWS/ CES/ CSEE RATING FXAMINATION / PLACE OF EXAMINATION /						LICENSE (if applicable)		
В/	SPECIAL LAWS/ ARANGAY ELIGIBILITY	CES/ CSEE / DRIVER'S LICENSE	(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMI	EXAMINATION / CONFERMENT		NUMBER Validit	
	Driver Licer	ise	90						,
	H12-17-0010	071				100000			
	EXPERIENCE			ntinue on separate sheet					
B. INCLU	JSIVE DATES				e indicated in the attac	hed Work Ex	SALARY/ JOB/ PAY	t.	
From	m/dd/yyyy) To	POSITION TIT (Write in full/Do not a		DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)		MONTHLY SALARY	GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/N)
9.1.18	present	Admin. Ai		VSU	//OVPAF	553.91/day		Regular	Υ
11.1.15	8.30.18	Admin. Aid		VSU	/OVPAF	477.81/day		Casual	Υ
10.4.11	10.30.15	Utility/Messe			/OVPAF	260/day		JO	Υ
3.22.02	5.31.01 6.30.09	Security Gu		Stinger Sec. Serv. Inc.		-		Private	N.
0.22.02	0.30.09	Security Gu	iard 	Veterans Phil.	Scout Sec. Agency			Private	N
			-						
1									
			2						
								2	
7						и .			
			10						
SIGNA	TURE			inue on separate sheet if I	DATE	Sem	. 15,7	ລ 1	

VI. VOLUNTARY WORK OR INVOLVEM	MENT IN CIVIC / NON-GOVERNMENT	/ PEOPLE / VO	LUNTARY OR	RGANIZATION	<b>/S</b>	
	SS OF ORGANIZATION frite in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	Fig. 1	POSITION / NATURE OF WORK
N/A		From	То			
-				-		
		+		-		
				-		
	(C	Continue on separate	sheet if necessary	v)		
VII. LEARNING AND DEVELOPMENT (L Start from the most recent L&D/training program and	L&D) INTERVENTIONS/TRAINING PR	ROGRAMS ATTE	ENDED		everial positions)	
		INCLUSIVE	E DATES OF	1572.55	Type of LD	
THE OF ELANTING AND DEVELOPINEN	INT INTERVENTIONS/TRAINING PROGRAMS ite in full)	(mm/d	NDANCE dd/yyyy)	NUMBER OF HOURS	( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
Basic Occupation Safety & Health T	Fraining	From 6/7/2021	To 6/12/2021	40	210000 00000	
Personnel Officers Association of the		11/20/2018		48	Technical	DOLE-OSH Region VIII
Standard First Aid Training-Health c		10/16/2019			Technical	
ISO 9001:2015 Awareness/Re-Aware		11/27/2020			Technical	Region 8 - DRRM
Fire Prevention Seminar	filess Heblingi			8	Technical	VSU Lead Auditor
Preparation of Processing of Docs.	Delative to Descurement	3/30/2019		8	Technical	BFP Baybay City
Orientation on Basic Customer Serv					Technical	Alex P. Tulin
	rice & Work Values	9/16/2017		8	Technical	Dr. Lourdes B. Cano
Procurement Planning Workshop		9/13/16		8	Technical	Ms. Louella C. Ampac/Ms. Alicia M. Flores
Bomb Threat & Bomb Identification	Seminar	6/20/2005		8	Technical	Col. Paglinawan, E.
Gun Safety Seminar		3/25/2005		8	Technical	Col. Isidro Sison (PA)
Signature Verification Training		5/25/2005		8	Technical	Dr. Fely Sora PNP Crime Lab.
	1 1/27 1/278 2 2 3					
			A Project			100
4.0		1				190
190		1				
, 1,4,						3.3212
			Je A J de			
77.99	8 20 00 00				- 2400	
		-				
	(Cor	ntinue on separate she	reat if necessary)	0 600 9		
VIII. OTHER INFORMATION						
31. SPECIAL SKILLS and HOBBIES	32. NON-	N-ACADEMIC DISTINCT (Write in		TION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
Basketball						LSU AdPA Board of Director since 2018
	Coach VSU Varsity Women (2	2015-2018) Silv VSU	er Medalist (2	2018) SCUAA	1	up to present
Driving						
	Exemplary Behavior Awards 2		CSC (VSU)			
	LSU AdPA Board of Director since 2	2018 up to present	t tene	11115	1	
			1,500	130		
	75	CONTRACTOR OF THE CONTRACTOR O	VSU			
SIGNATURE	(Conti	tinue on separate shee	et if necessary)	24-		Could be seen
		1		DATE	E	Sept. 15,2021

34	Are you related by consanguinity or affinity to the appointin chief of bureau or office or to the person who has immediat Bureau or Department where you will be approinted, a. within the third degree?	g or recommending authority, or to the te supervision over you in the Office,					
	b. within the fourth degree (for Local Government Unit - Ca	☐ YES ☑ NO ☐ YES ☑ NO If YES, give details:					
35.	a. Have you ever been found guilty of any administrative of	☐ 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?	☐ YES ☑ 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 ☑ NO If YES, give details:					
38.	a. Have you ever been a candidate in a national or local ele- 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	☐ YES ☑ NO If YES, give details:					
39.	Have you acquired the status of an immigrant or permanent	☐ YES ☑ NO If YES, give details (country):					
<b>o</b> .	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?	☐ YES ☑ NO  If YES, please specify: ☐ YES ☑ NO  If YES, please specify ID No: ☐ YES ☑ NO  If YES, please specify ID No: ☐ YES ☑ NO  If YES, please specify ID No:					
41.	REFERENCES (Person not related by consanguinity or affinity to applicant	t /appointee)	Note that the second of the se				
	NAME	ADDRESS	TEL. NO.				
MAR	RIA ROBERTA S. MIRAFLOR	Kilim Baybay City, Leyte	563-7108	55			
ALE	X P. BAGARINAO	Marcos Baybay City, Leyte					
REM	BERTO A. PATINDOL	Gabas Baybay City, Leyte	563-7108				
	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 document administrative/criminal case/s against me.	ent laws, rules and regulations of the F ntative to verify/validate the contents stated	Republic of the	PHOTO			
PL	vernment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)  EASE INDICATE ID Number and Date of Issuance						
H	vernment Issued ID: SSS		1, 1				
$\vdash$	icense/Passport No.: 33-7101450-2 e/Place of Issuance: City of Manila	()					
_		OCT 2021		Right Thumbmark			
	SUBSCRIBED AND SWORN to before me this	ATTY, KYSAN C. GUINOCOR VSU (Med Legal Officer	ng his/her validly issued	d government ID as indicated above.			
		Person Administering Oath	and the second				