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 filing 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. 1 CS ID No (Do not fill up. For CSC use only) Print legibly. Tick appropriate boxes ( 🔲 and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. 2. SURNAME CORMANES NAME EXTENSION (JR., SR) FIRST NAME JOAN MARIE MIDDLE NAME YGOT 3. DATE OF BIRTH April 01, 1993 16. CITIZENSHIP ✓ Filipino Dual Citizenship (mm/dd/yyyy) Joy birth oy naturalization 4. PLACE OF BIRTH Ormoc City, Leyte If holder of dual citizenship, Pls. indicate country: please indicate the details. 5. SEX Male ✓ Female **Philippines** ✓ Single Married 17. RESIDENTIAL ADDRESS Apt #. 9 Maple Escalante Apartments 6 CIVIL STATUS House/Block/Lot No. Widowed Street Separated Brgy. Guadalupe Other/s: Subdivision/Village Barangay Baybay Leyte 7. HEIGHT (m) 4'11 City/Municipality Province 8. WEIGHT (kg) 60 ZIP CODE 6521-A 18 PERMANENT ADDRESS 9. BLOOD TYPE "B" Melhourne St House/Block/Lot No. Brgy. Dona Felisa Mejia 10. GSIS ID NO. 2005283394 Subdivision/Village Barangay **Ormoc City** 11. PAG-IBIG ID NO. Leyte 917020099536 City/Municipality Province 12. PHILHEALTH NO 13-025377160-8 ZIP CODE 6541 13. SSS NO On Process 19. TELEPHONE NO. 561-8073 14. TIN NO. 335-512-751-0000 20. MOBILE NO. 09666983096 15. AGENCY EMPLOYEE NO. V01031 21. E-MAIL ADDRESS (if any) joanmarie.cormanes@vsu.edu.ph 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 N/A MIDDLE NAME N/A OCCUPATION N/A EMPLOYER/BUSINESS NAME N/A **BUSINESS ADDRESS** N/A TELEPHONE NO. N/A 24. FATHER'S SURNAME CORMANES NAME EXTENSION (JR., SR) JR. FIRST NAME JUANITO MIDDLE NAME BARING 25. MOTHER'S MAIDEN NAME MA. ROSA DIANO YGOT SURNAME YGOT FIRST NAME MA. ROSA MIDDLE NAME DIANO (Continue on separate sheet if necessary) SCHOLARSHIP/ IGHEST LEVEL YEAR PERIOD OF ATTENDANCE NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE ACADEMIC LEVEL UNITS EARNED GRADUATE HONORS RECEIVED (Write in full) (Write in full) (if not graduated) From То ELEMENTARY Ormoc City, Leyte Elementary diploma 1/6/2000 03/31/2005 N/A 2000 SECONDARY **New Ormoc City National High School** High school diploma 1/6/2005 03/31/2009 N/A 2005 VOCATIONAL / N/A TRADE COURSE COLLEGE Visayas State University **Doctor of Veterinary Medicine** 1/6/2009 03/31/2016 NIA 2016 None **GRADUATE STUDIES** N/A **GRADUATE STUDIES** N/A SIGNATURE DATE June 24 2019 CS FORM 212 (Revised 2017), Page 1 of 4

CAR		1080 (BOARD/ BAR) UNDER	RATING	DATE OF				LICENSE (if a	7
7. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE  Veterinary Medicine Licensure Exam  0.8				EXAMINATION / CONFERMENT	ATION / CONFERMENT		NUMBER	Date of Validity	
			Aug. 23, 24, and 25		lanila		8842	2019-2022	
							70.8.570.0.35		
WORK	EXPERIENCE		(Col	ntinue on separate sheet if n	necessary)				
		nt. Start from your recent	t work) Description	of duties should be in	dicated in the attached	Work Exper	ience sheet		
INCLUSIVE DATES (mm/dd/yyyy) POSI		POSITION T (Write in full/Do not	TITLE	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)
/2016	7/25/2017	Veterinarian/Small An	imal Practitioner	Cebu Veterinary Doctors		15000.00	And the	Regular	N
2017	present	Instructo	or 1	Visayas Sta	te University			Temporary	Y
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				8/15/1990	n'				
SIGNATURE		m	DATE	June 24, 2019 CS FOR			RM 212 (Revised 2017), Page 2 of 4		

IV. CIVIL SERVICE ELIGIBILITY

VI. VOLUNTARY WORK OR INVOLVEMENT IN	I CIVIC / I GOVERNMENT /	PEOPLE / VOI	LUNTARY OR	GANIZATION/		
29. NAME & ADDRESS OF OR (Write in full)			VE DATES dd/yyyy)	NUMBER OF HOURS	Taking Services	POSITION / NATURE OF WORK
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VII. LEARNING AND DEVELOPMENT (L&D) II		ontinue on separate ROGRAMS ATT	NAMES OF TAXABLE PARTY OF TAXABLE PARTY OF TAXABLE PARTY.	<b>y)</b>		
Start from the most recent L&D/training program and includ	le only the relevant L&D/training taken fo			hief/Executive/Man		
TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)		ATTE	E DATES OF NDANCE (dd/yyyy)	NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
Philippine Veterinary Medical Association (PVMA): 86 Scientific Conference	oth PVMA Annual Convention and	2/14/2019	2/16/2019	27.0	Delegate	Philippine Veterinary Medical Association
Philippine Animal Hospital Association (PAHA): 24th	Annual Conference	3/10/2018	5/10/2018	27.0	Delegate	Philippine Animal Hospital Association (PAHA)
Online Issuance of Local Veterinary Shipping Permit	System Workshop	11/4/2018	11/4/2018	8.0	Delegate	Bureau of Animal Industry- National Veterinary Quarantine Services Division
35th PVMA Annual Convention and Scientific Conference Veterinary Practitioners Association of the Philippine		02/14/2018	02/16/2018	24.0	Delegate	Philippine Veterinary Medical Association
Conference	s (VPAP): 45th Annual Scientific	06/22/2017	06/23/2017	16.0	Delegate	Veterinary Practitioners Association of the Philippines (VPAP)
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amelia melancia rabide si cici per selenta diagram diagram da anti-	(C)	ontinue on separate	sheet if necessor	Hazari Dayon	105 15 15	
VIII. OTHER INFORMATION		oriunde on separate	Sheet in hecessar		A. Johnson T. College	
31. SPECIAL SKILLS and HOBBIES	32. NO	ON-ACADEMIC DIST (Wr	INCTIONS / RECOG	GNITION	0.77.0	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
Playing musical instruments (piano and guitar)	Delegate for Leyte on VIV. Conference) on N					Veterinary Practitioners Association of the Philippines
Painting (Acrylic and Watercolor)	One of the exhibitors during the	e 2019 Art Exhit State Un		ld in the Balay	Philippine Veterinary Medical Association	
Cooking and gardening	CHARLES TO THE TOTAL OF THE TOT					
ANTES ESTABLISHED TO PER JOSEPH	area yluhar melangahadke a	desirally. GIOC COLLEGE 100 9				ad the depth of the property of the
		Company to the Company		La Maria Company Company		
		6				
	(Cc	ontinue on separate	sheet if necessar	y)		
SIGNATURE	xmuzt	D.	ATE	June	24, 2019	CS FORM 212 (Revised 2017), Page 3 of 4

34. Are you related by consanguinity or affinity to the			,		
chief of bureau or office or to the person who has min Bureau or Department where you will be apppointed,			to the second se		
a. within the third degree?		YES VN	0		
	b. within the fourth degree (for Local Government Unit - Career Employees)?				
b. Within the louist degree (for Local Government on	t-Oaleet Employees):	☐ YES ☑ N If YES, give details:	0		
		ii 1 Lo, give details.			
35. a. Have you ever been found guilty of any administrat	ive offense?	YES V N			
<u> </u>		YES V N If YES, give details:	0		
		ii 120, 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 violatio	n of any law doors and name of regulation by				
any court or tribunal?	in or any law, decree, ordinance or regulation by	T YES INO			
		If YES, give details:			
	Marin Carana				
<ol> <li>Have you ever been separated from the service in any retirement, dropped from the rolls, dismissal, terminati</li> </ol>	등 위한 기업으로 기계하는 것이 경기하고 때 등에 회원되어 가는 사람들이 가게 들었다. 생활하는 사람들은 경기를 하는 것이다.	YES If YES, give details:	NO		
(abolition) in the public or private sector?	on, one of term, implied contract of phases out	ii 1E5, give details:	Family Problem		
38. a. Have you ever been a candidate in a national or loc	cal election held within the last year (except	☐ YES ☑	NO		
Barangay election)?	Water Control	If YES, give details:	1 110		
b. Have you resigned from the government service du	ring the three (3)-month period before the last		NO		
election to promote/actively campaign for a national o		If YES, give details:			
39. Have you acquired the status of an immigrant or perm	nanent resident of another country?		7 40		
		YES If YES, give details (cour	NO ntrv):		
40. 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:				
a. Are you a member of any indigenous group?			NO		
		If YES, please specify:			
b. Are you a person with disability?		YES If YES, please specify ID No	NO NO		
c. Are you a solo parent?			7 NO		
		If YES, please specify ID No			
41. REFERENCES (Person not related by consanguinity or affinity to ap	pplicant /appointee)				
NAME		TEL. NO.			
	ADDRESS				
Dr. Ana Marquiza Quilicot	Visca, Baybay, Leyte	9228713558			
Dr. Agnes Taveros	Visca, Baybay, Leyte	9061919698			
Dr. Carl Pradera	Visca, Baybay, Leyte	9755185354			
42. I declare under oath that I have personally accomplete statement pursuant to the provisions of			The same of		
Philippines. I authorize the agency head/authorized re	- 10mm				
agree that any misrepresentation made in this	document and its attachments shall cause	e the filing of	РНОТО		
administrative/criminal case/s against me.					
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	Lonnal				
ID/License/Passport No.: 8842	- No. 10 10 10 10 10 10 10 10 10 10 10 10 10				
	Signature (Sign inside the b	ox)			
Date/Place of Issuance: 09/1/2016/PRC	Date Accomplished		Right Thumbmark		
AUDOCENEES AND STREET	2.0.400.5515				
SUBSCRIBED AND SWORN to before me this	2 N AUG 2019 , affiant exhibiti	ng his/her validly issued govern	ment ID as indicated above.		
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## 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, 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: August 2017 to present • Position: Instructor I • Name of Office/unit: Visayas State University, College of Veterinary Medicine

Name of Agency/Organization and Location: Visayas State University, Baybay City, Leyte

List of Accomplishments and Contributions (if any)

• Immediate Supervisor: Dr. Ana Marquiza Quilicot

- Completion and submission of final grades of the students under the assigned subjects
- Prepared research proposals, formed IEC materials, and participated in implemented extension services involved by the College of Veterinary Medicine
- Has catered to various clients seeking consultation regarding their diseased companion animal, as well as sharing information regarding responsible pet ownership and rabies
- Summary of Actual Duties
  - The work includes teaching a number of students based on the assigned subjects, including the preparation of IEC materials to be used during the lectures, formation of examination sheets and laboratory activities, correcting papers during exams, computation of grades, etc.
  - Supervises advisees conducting their undergraduate thesis in the fields of epidemiology, parasitology, bacteriology, and mycology
  - Member in different committees within the College
  - Involved in the research projects and extension duties of the College of Veterinary Medicine, and submission of its annual reports.
  - Resident Veterinarian of the CVM Clinic, catering to clients seeking consultation, surgery, home services, and basic prophylactic procedures for their companion animals
- Duration: November 15, 2016 July 25, 2017
- Position: Veterinarian
- Name of Office/unit:
- Immediate Supervisor: Dr. Odysseus Camarillo
- Name of Agency/Organization and Location: Cebu Veterinary Doctors/F. Ramos St., Cebu City
  - List of Accomplishments and Contributions (if any)
  - Summary of Actual Duties

Responsible for the diagnosis of diseases presented in the clinic, treatment of said diseases, and patient management in canines and felines; establishes client-owner relationships; cater to home-services which includes vaccinations and deworming; represent the organization to veterinary conferences (e.g. VPAP); educate owners regarding responsible pet ownership and common diseases that can harm their pets.

Joan Marie Cormanes, DVM (Signature over Printed Name of Employee/Applicant)

Date: June 24, 2019