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. 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) Torrion 2. SURNAME NAME EXTENSION (JR., SR) FIRST NAME Charlindo MIDDLE NAME Siega 3. DATE OF BIRTH 9/6/1992 16. CITIZENSHIP ✓ Filipino Dual Citizenship (mm/dd/yyyy) by birth by naturalization 4. PLACE OF BIRTH Baybay, Leyte If holder of dual citizenship. Pls. indicate country: please indicate the details 5. SEX ✓ Male Female Curba 2 ✓ Single
Widowed Married 17. RESIDENTIAL ADDRESS 6 CIVIL STATUS Separated House/Block/Lot No. Street Villa Solidaridad Other/s: Subdivision/Village Barangay Baybay Levte 7. HEIGHT (m) 1.65 City/Municipality Province 64 ZIP CODE 6521 8. WEIGHT (kg) Curba 2 18. PERMANENT ADDRESS B+ 9. BLOOD TYPE House/Block/Lot No. Street Villa Solidaridad 10. GSIS ID NO. Subdivision/Village Barangay Baybay Leyte 11. PAG-IBIG ID NO. 121136827336 City/Municipality Province 12. PHILHEALTH NO. 002019957202 ZIP CODE 6521 3449522191 19. TELEPHONE NO. 13. SSS NO. 337-866-195-000 09190068626 14. TIN NO. 20, MOBILE NO. 15. AGENCY EMPLOYEE NO. V00934 21. E-MAIL ADDRESS (if any) charlindotorrion@gmail.com 22. SPOUSE'S SURNAME NA 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME **BUSINESS ADDRESS** TELEPHONE NO. 5/28/1967 24. FATHER'S SURNAME Torion IAME EXTENSION (JR., SR) FIRST NAME Charlito Pedere MIDDLE NAME 11/11/1963 25. MOTHER'S MAIDEN NAME Siega SURNAME FIRST NAME Teresita Amolato (Continue on separate sheet if necessary) MIDDLE NAME SCHOLARSHIP/ PERIOD OF ATTENDANCE HIGHEST LEVEL 26. ACADEMIC NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE LEVEL UNITS EARNED (Write in full) (Write in full) GRADUATED HONORS (if not graduated) RECEIVED From То Valedictoria Villa Solidaridad Elem, School 3/31/2005 Graduated 2005 ELEMENTARY 6/1/1999 1st Hon. 2009 Makinhas Nat'l High School NA 6/1/2005 3/31/2009 Graduated SECONDARY Mention VOCATIONAL / TRADE COURSE

GRADUATE STUDIES

University of the Philippines-Diliman

MS Meteorology

8/82016

present

continuing

NA

NA

(Continue on separate sheet if necessary)

SIGNATURE

DATE

July 4, 2023

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BS Meteorology

6/1/2009

5/10/2014

Graduated

2014

NA

Visayas State University

COLLEGE

7. CARE		080 (BOARD/ BAR) UNDER	RATING	DATE OF	DI AGE GE EVAL	TION / OCCUPE	MENT	LICENSE (if ap	
			(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINA	TION / CONFER	MENT	NUMBER	Date of Validity
	NA								
			(Co	ntinue on separate sheet if	necessary)				
	EXPERIENCE	nt Start from your recei	nt work) Description	on of duties should h	e indicated in the attac	had Wark Ex	marianco sho	o.t	
nclude private employment. Start from your recent work) INCLUSIVE DATES				MONTHLY	SALARY/ JOB/ PAY GRADE (if	STATUS OF	GOVT		
(mm/dd/yyyy) POSITION TITI (Write in full/Do not ab			DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)		SALARY	applicable)& STEP (Format "00-0")/ INCREMENT	APPOINTMENT	SERVICE (Y/N)	
/1/2016	present	Full-time Ins	tructor	Visayas State University		Php29,500	NA	Contractual	Υ
/1/2014	7/1/2016	Part-time Ins	tructor	Visayas St	ate University	Php15,000	NA	Contractual	Υ
	-								
						-			
						-			
		1	(Co	ntinue on separate sheet i					
SIGN	IATURE	YA	A	DATE	July 4, 2023		CS FORM :	212 (Revised 2017),	Page 2 of 4

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29. NAME & ADDRESS OF ORGANIZATION (Write in full)		INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS		POSITION	/ NATURE OF WORK
		From 2/25/2018	To	100	Facilitate (Day	P	_
DOST-SEI Science Explorer Camp - Iloilo			3/4/2018	40.0	Facilitator/Resource Person		
DOST-SEI Science Explorer Camp - Northern Samar			6/22/2018	40.0	Facilitator/Res	ource Perso	n
		(Continue on sepa	erate cheet if nace	ceand			
II. LEARNING AND DEVELOPMENT (I	NAME OF TAXABLE PARTY OF TAXABLE PARTY.	PROPERTY OF THE PERSON NAMED IN	AND DESCRIPTION OF THE PERSON NAMED IN COLUMN				
Start from the most recent L&D/training program and	include only the relevant L&D/trainin			Division Chief/Exe	cutive/Managerial p	ositions)	
30. TITLE OF LEARNING AND DEVELOPMENT INTE (Write in full	ATTEN	E DATES OF IDANCE Id/yyyy)	NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)		CONDUCTED/ SPONSORED BY (Write in full)	
hilippine Meteorological Society, Inc. Annual C	onvention 2023	3/20/2023	3/21/2023	16 hours	Technical	Philip	ppine Meteorological Society, Inc.
nternational Course Program (ICP) South Works		5/24/2022	5/27/2022	32 hours	Technical		Hasselt University, Belgium
022 Space Observations and Sustainability Co		2/7/2022	6/13/2022	20 hours	Technical	Kyoto Univ	Taiwan Space Union rersity, Japan and National Institute f
International School on Equatorial Atmosphere 2019 (ISQUAR-2019)			3/22/2019	40 hours	Technical	Space at	nd Aeronautics, Bandung, Indonesia
nternational School on Atmospheric Radars 20	11/12/2018	11/16/2018	40 hours	Technical	National	Central University, Taoyuan District, Taiwan	
						-	
		(Continue on sepa	arate sheet if nece	ssary)			
JIII. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)  33. MEMBERSHIP IN ASSOCIATION/ORGANIZA (Write in full)						
Python Programming Language	NA				Terrestrial and Aquatic Restoration by Students Immersed in Environmental Reform		
Badminton							
	1	(Continue on sep	arate sheet if nece	essary)			
SIGNATURE	WA.	5	DATE		July 4, 2023		CS FORM 212 (Revised 2017), Page 3 or
	/						

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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 apppointed,					
	a. within the third degree?	YES NO				
	b. within the fourth degree (for Local Government Unit - Car	YES NO				
	3-1,		If YES, give details:			
35.	a. Have you ever been found guilty of any administrative off	ense?	☐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					
30.	by any court or tribunal?	☐ YES ☑ NO If YES, give details:				
		ii 123, give details.				
37.	Have you ever been separated from the service in any of th	e following modes: resignation	YES NO			
	retirement, dropped from the rolls, dismissal, termination, er		YES NO If YES, give details:			
	out (abolition) in the public or private sector?					
38.	<ul> <li>a. Have you ever been a candidate in a national or local ele Barangay election)?</li> </ul>	ction held within the last year (except	☐YES ☑NO			
			If YES, give details:			
	b. Have you resigned from the government service during the					
00	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	resident of another country?	YES NO			
			If YES, give details (country):			
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma	gna Carta for Disabled Persons (RA				
	7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972)					
a.	Are you a member of any indigenous group?		☐YES ☑ NO			
b.	Are you a person with disability?	If YES, please specify:				
	The you a person was disability:		☐ 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	t /appointee)				
	NAME	ADDRESS	TEL. NO.			
	Engr. Epifania G. Loreto	Visca Baybay City, Leyte	09952167888			
D	1. Roberto C. Guarte	Vicus Baybasılate	9977/08070			
D	r. Dayron S. Barredo	Visco Baylog, Lefte	09515112132			
42.	I declare under oath that I have personally accomplished	d this Personal Data Sheet which is a	true, correct and			
	complete statement pursuant to the provisions of pertin					
	Philippines. I authorize the agency head / authorized repagree that any misrepresentation made in this doct		use the filing of			
	administrative/criminal case/s against me.	The state of the s	CHARLANDS SHORRION			
- E	Payer mont logged ID a. n					
	iovernment Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)  **ILEASE INDICATE ID Number and Date of Issuance**					
G	overnment Issued ID: SSS	TALA				
IC	D/License/Passport No.: 3449522191	)  x)				
D	ate/Place of Issuance: BGC Taguig City					
L		Date Accomplished	Right Thumbmark			
	SUBSCRIBED AND SWORN to before me this	, affiant exhibiting	g his/her validly issued government ID as indicated above.			
	10 301	111				
	L	Person Administering Oath				
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