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 . PERSONAL INFORMATION 2. SURNAME VILLAS NAME EXTENSION (JR., SR) FIRST NAME NORMAN MIDDLE NAME ORTEGA 3. DATE OF BIRTH 05/11/1990 16. CITIZENSHIP (mm/dd/yyyy) ✓ Filipino Dual Citizenship by birth by naturalization BAYBAY, LEYTE 4. PLACE OF BIRTH If holder of dual citizenship, Pls. indicate country: please indicate the details. ✓ Male Female 5. SFX Single ✓ Married 17. RESIDENTIAL ADDRESS 461 STA. BARBARA 6 CIVIL STATUS ☐ Widowed House/Block/Lot No Separated Street POBLACION Other/s: Subdivision/Village Barangay INOPACAN 7. HEIGHT (m) 163 LEYTE City/Municipality Province 8. WEIGHT (kg) 71 ZIP CODE 6522 18. PERMANENT ADDRESS 9. BLOOD TYPE 461 STA BARABARA 0 House/Block/Lot No Street POBLACION 10. GSIS ID NO. LP02004797138 Subdivision/Village Barangay INOPACAN 11. PAG-IBIG ID NO LEYTE 1210 7760 9186 City/Municipality Province 12. PHILHEALTH NO 12-051133593-6 ZIP CODE 6522 13. SSS NO. N/A 19. TELEPHONE NO. (053) 565-8283 14. TIN NO. 296-021-641-000 20. MOBILE NO. 09176590003 15. AGENCY EMPLOYEE NO. V00893 21. E-MAIL ADDRESS (if any) ormanvillas@vsu.edu.ph/ villasnorman@gmail.com FAMILY BACKGROUND 22. SPOUSE'S SURNAME VILLAS 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) ME-AN FIRST NAME GABRIELLE NORMAINE D. VILLAS 01/03/2012 DOTOLLO MIDDLE NAME OCCUPATION **GOVERNMENT EMPLOYEE** EMPLOYER/BUSINESS NAME VISAYAS STATE UNIVERSITY VSU, VISCA, BAYBAY, LEYTE **BUSINESS ADDRESS** TELEPHONE NO. 09176758300 24. FATHER'S SURNAME VILLAS NAME EXTENSION (JR., SR) FIRST NAME **NORBERTO** MIDDLE NAME CABANTUG 25. MOTHER'S MAIDEN NAME SURNAME ORTEGA **NORMA** FIRST NAME MIDDLE NAME DANCIL (Continue on separate sheet if necessary) III. EDUCATIONAL BACKGROUND SCHOLARSHIP/ ACADEMIC HIGHEST LEVEL/ UNITS EARNED NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE PERIOD OF ATTENDANCE LEVEL (Write in full) (Write in full) GRADUATED HONORS (if not graduated) From To ELEMENTARY VISCA FOUNDATION ELEMENTARY SCHOOL PRIMARY EDUCATION 06/01/1997 03/30/2003 Graduated N/A 2003 LEYTE STATE UNIVERSITY LABORATORY HIGH SECONDARY HIGH SCHOOL 06/01/2003 03/30/2007 Graduated 2007 N/A SCHOOL VOCATIONAL / N/A N/A N/A N/A N/A N/A TRADE COURSE **BACHELOR OF SCIENCE IN COMPUTER** COLLEGE VISAYAS STATE UNIVERSITY 06/01/2007 03/30/2011 Graduated 2011 N/A SCIENCE GRADUATE STUDIES N/A N/A N/A N/A N/A N/A N/A (Continue on separate sheet if necessary) SIGNATURE DATE 04/25/2017

CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER RATING			RATING	DATE OF	OU LOOVE FOUT UT		LICENSE (if applicable)		
SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE			(If Applicable)	EXAMINATION / PLACE OF EXAMINATION / CONFE CONFERMENT			VIEIN I	NUMBER	Date of Validity
	N/A		N/A	N/A	N/A	4		N/A	
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1								
WORK I	-VEENIENCE		(Co	ontinue on separate sheet	if necessary)				
WORK E	EXPERIENCE rate employmen	t. Start from your rece	nt work) Descripti	on of duties should b	e indicated in the attache	d Work Exp	erience sheet	The second secon	
INCLU	USIVE DATES	POSITION		DEPARTMENT / AGENCY / OFFICE / COMPANY		MONTHLY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP	STATUS OF	GOV'T SERVICE
(Write in full/Do no			(Write in full/Do not abbreviate)		SALARY	(Format "00-0")/ INCREMENT	APPOINTMENT	(Y/ N)	
From /30/2015	To PRESENT	COMPUTER PRO	GRAMMER I	VISAYAS STATE UNIVERSITY-UNIVERSITY		867/DAY	11	CASUAL	Υ
	-	COMPUTER PROG		COMPUTER CENTER VISAYAS STATE UNIVERSITY -		360/DAY		JO	Y
15/2013	10/29/2015			REGISTRAR'S OFFICE		15000.00		CONTRACTUA	N
16/2012	01/30/2013	SYSTEM ADMII		PFIZER INC.				L CONTRACTUA	N
/13/2011	03/15/2012	ANAL		INNODATA KNOWLEDGE SERVICES II		12000.00		L	N
					3				
	1								
Tall									
	-								
	-								-
								-	-
			S.		1				-
2									
2000年初期12			E SERVICE PARTY	(Continue on separate sh	eet if necessary) DATE			1-17	

NAME & ADDRESS OF ORGANIZATION (Write in full) BALIKAT CIVICOM		VE DATES ddd/yyyy) To Present	NUMBER OF HOURS	OPERATIVE	POSITION / NATURE OF WORK	
				OPERATIVE		
	5					
	Continue on separat	e sheet if necessal	ry)			
. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING art from the most recent L&D/training program and include only the relevant L&D/training taken			Chief/Executive/Man	agerial positions)	建筑的基础	
10. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)		VE DATES OF ENDANCE h/dd/yyyy)	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
H NICT SUMMIT	11/10/2016	To 11/11/2016	8 hours	Technical	NATIONAL ICT CONFEDERATION OF THE PHILIPPINES	
HNOG(Philippine Network Operators Group)	06/27/2016	06/27/2016	8 hours	Technical	PHNOG & DICT	
gher Education Management Information System (HEMIS) Assessment andd Validation (HEMIS)	on 02/12/2016	02/12/2016	8 hours	Technical	CHED	
EBMAP SERVER- TRAINING WORKSHOP	08/21/2015	08/25/2015	72 hours	Technical	VSU-PHIL LIDAR	
ANDS-ON TRAINING AND ORIENTATION ON IPEL ONLINE DATABASES UBSCRIPTIONS	09/07/2015	09/07/2015	8 hours	Technical	NATIONAL LIBRARY	
OOGLE APPS FOR EDUCATION	11/19/2014	11/20/2014	48 hours	Technical	GOOGLE & CHED	
ISCO NETWORKING ASSOCIATE	04/13/2014	11/17/2014	360 hours	Technical	CENTER FOR INTERNATIONAL EDUCATION	
		1				
			S			
		M Lymb				
	(Continue on sepa	rate chapt if naces	can/)			
VIII. OTHER INFORMATION	(Continue on sepa	Tate sheet if neces	Suly			
31. SPECIAL SKILLS and HOBBIES 32.	NON-ACADEMIC D	ISTINCTIONS / RE (Write in full)	COGNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZ (Write in full)	
	BEST PRODUCTION ASSOCIATE - INNODATA KNOPWLEDGE SERVICES, INC. DATED DEC. LEYTE STATE UNIVERSITY ADMINISTRATIVE PERSONNEL ASSOCIATION (LSU-ADPA)					
trainings for LGU Webs Savvy						
Multimedia set-up for Livestream						
Design and Configure Local Area Network				ty free		
Servers Provisioning						
			1,14			
	(Continue on con-	arate sheet if nece.	ssarv			
SIGNATURE	Tooming on sept	and officer in the Co.		DATE	06-9+-17	

34.	Are you related by consanguinity or affinity to the ap, ting o chief of bureau or office or to the person who has immediate s Bureau or Department where you will be apppointed, a. within the third degree? b. within the fourth degree (for Local Government Unit - Caree	upervision over you in the Office,	☐ YES ☑ NO ☐ YES ☑ NO If YES, give details:			
35.	a. Have you ever been found guilty of any administrative offer	☐ 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 any by any court or tribunal?	☐ YES ☑ NO If YES, give details:				
	retirement, dropped from the rolls, dismissal, termination, end out (abolition) in the public or private sector?					
38	a. Have you ever been a candidate in a national or local election Barangay election)?	☐ YES	NO			
	b. Have you resigned from the government service during the election to promote/actively campaign for a national or local of	e three (3)-month period before the last candidate?	☐ YES ☐ If YES, give details:	NO NO		
39	Have you acquired the status of an immigrant or permanent	☐ YES ☑ NO If YES, give details (country):				
a. b.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag 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				
4	REFERENCES (Person not related by consanguinity or affinity to applicant	ADDRESS	TEL. NO.			
	NAME DR. EDGARDO E. TULIN	VSU, BAYBAY, LEYTE	053 563 - 7067	ID picture taken within the last 6 months 3.5 cm. X 4.5 cm (passport size)		
-	PROF. WINSTON TABADA	VSU, BAYBAY, LEYTE	053 563 7068	With full and handwritten name tag and signature over		
	ENGR. SEAN O. VILLAGONZALO	VSU, BAYBAY, LEYTE	09953934540	printed name Computer generated		
4	12. I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertin Philippines. I authorize the agency head/authorized repr I agree that any misrepresentation made in this doc administrative/criminal case/s against me.	ent laws, rules and regulations of the esentative to verify/validate the conter	its stated herein.	or photocopied picture is not acceptable		
	Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: Driver's License ID/License/Passport No.: H12-13-002369	Signature (Sign inside the				
	Date/Place of Issuance: BAYBAY CITY,LEYTE	Date Accomplished				
t	SUBSCRIBED AND SWORN to before me this	, affiant exhi	biting his/her validly issued gov	vernment ID as indicated above.		
		Person Administering C	Dath			