CS Form No. 212									
Revised 2017		PERSO	NAL DAT	A S	HEET				
WARNING: Any misrepresents concerned.						/criminal case/s	against the pe	erson	
READ THE ATTACHED GUIDE	TO FILLING OUT THE	PERSONAL DATA SH	EET (PDS) BEFORE ACCON	IPLISHING T	HE PDS FORM.				
Print legibly. Tick appropriate boxe I. PERSONAL INFORMATION	ON	neet if necessary, indicate	e N/A if not applicable. DO NOT	ABBREVIAT	E. I CS ID No		(Do not fill up	For CSC use on	
2. SURNAME	ESPINOSA								
FIRST NAME	JOY			entymene antomorphomograph schoolmen andm		NAME EXTENSION (JR., SR)		
MIDDLE NAME	SOLANO								
3. DATE OF BIRTH		74004							
(mm/dd/yyyy)	10/2	7/1991	16. CITIZENSHIP		☑ Filipino ☐	Dual Citizenship			
4. PLACE OF BIRTH	BAYBAY	CIYT, LEYTE	If holder of dual citize	enshin				by naturalization	
5. SEX	☐ Male		please indicate the o			Pls. indicate country:			
	☑ Single		(7 property terrors					~	
6 CIVIL STATUS	☐ Widowed	☐ Married ☐ Separated	17. RESIDENTIAL ADDRESS	Н	louse/Block/Lat No.		Street		
	☐ Other/s:				Subdivision/Village		BUNGA Barangay	W. Petter State Control of the Contr	
7. HEIGHT (m)	0.	129			BAYBAY		LEYTE		
8. WEIGHT (kg)		50	ZIP CODE		City/Municipality		Province	PARTICIPATION OF THE PARTICIPA	
9. BLOOD TYPE	A	B+	18. PERMANENT ADDRESS					a Den Amerikan da anang mendampungan pinangan pinangan pinangan pinangan pinangan pinangan pinangan pinangan p	
10. GSIS ID NO.	NA 121080492433			House/Block/Lot No. Subdivision/Village BAYBAY City/Municipality			Street BUNGA Berangey LEYTE Province		
11. PAG-IBIG ID NO.									
12. PHILHEALTH NO.	130501452964		ZIP CODE		6521-A				
13. SSS NO.	0631894229		19. TELEPHONE NO.		NA				
14. TIN NO.	476480605		20. MOBILE NO.	+6395028118223					
15. AGENCY EMPLOYEE NO.	ı	IA	21. E-MAIL ADDRESS (if any)	joy.espinosa@vsu.edu.ph				et er kom st. en	
II. FAMILY BACKGROUND									
22 SPOUSE'S SURNAME				23. NAME of C	HILDREN (Write full name and	list all)	DATE OF BIR	TH (mm/dd/yyyy)	
FIRST NAME			NAME EXTENSION (JR., SR)					MANTES MANTES CONTROLLER STATE OF STATE	
MIDDLE NAME						Comment of Mary Advisor days dissert the second desired days			
OCCUPATION					ti di Maria Para di Salamani in si Majama mahasin pili dinamani bagis kepulasa, sasa a	the Principle of the Control of the			
EMPLOYER/BUSINESS NAME									
BUSINESS ADDRESS					entre de la companya			annes de la constitución de la c	
TELEPHONE NO.			ESS BATTON HOLDER EN HOLDE PROSTE ACTUAL ACTUAL PARTY ACTUAL PROSTE ACTU				and the state of t		
24. FATHER'S SURNAME		ESPINOSA					10/0	4/1961	
FIRST NAME	TIF	RSO	NAME EXTENSION (JR., SR)						
MIDDLE NAME		ORNOPIA				on Amerikan quinti de la la companie de la cercio de la companie de la cercio del la cercio de la cercio de la cercio de la cercio del			
25. MOTHER'S MAIDEN NAME							11/2	9/1961	
SURNAME	SURNAME SOLANO FIRST NAME CAROLINA MIDDLE NAME SALUBRE								
FIRST NAME						The second secon			
MIDDLE NAME					(Continue on separate sheet if necessary)				
III. EDUCATIONAL BACKG	ROUND								
26. LEVEL	NAME OF (Write	SCHOOL in fulf)	BASIC EDUCATION/DEGRE (Write in full)	E/COURSE	PERIOD OF ATTENDANCE From To	HIGHEST LEVEL UNITS EARNED (If not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED	

						1		
MIDDLE NAME	DLE NAME SALUBRE			(Continue on separate sheet if necessary)				
II. EDUCATIONAL BAC	KGROUND							
16. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE		HIGHEST LEVEL/ UNITS EARNED	YEAR GRADUATED	SCHOLARSHII ACADEMIC HONORS	
			From	То	(if not graduated)		RECEIVED	
ELEMENTARY	BUNGA ELEMENTARY SCHOOL	ELEMENTARY EDUCATION	06/01/1998	3/30/2004	NA	2004	WITH HONORS	
SECONDARY	BUNGA NATIONAL HIGH SCHOOL	SECONDARY EDUCATION	06/01/2005	3/30/2008	NA	2008	WITH HONORS	
VOCATIONAL / TRADE COURSE	NA NA	NA	NA	NA	NA	NA	NA	
COLLEGE	VISAYAS STATE UNIVERSITY BACHELOR OF SCIENCE IN COMPUTER SCIENCE		08/01/2016	6/22/2020	NA	2020	NA	
GRADUATE STUDIES CEBU INSTITUTE OF TECHNOLOGY-UNIVERSITY		MASTER OF SCIENCE IN COMPUTER SCIENCE	E 8/27/2022	12/17/2022	9	NA	NA	
	(0	Continue on separate sheet if necessary)						
SIGNATURE			DA	DATE		February 12, 2023		

Designation of the Parket of t	SERVICE ELIG	STREET, STREET							
27. CAF	REER SERVICE/ RA 1 SPECIAL LAN	080 (BOARD/ BAR) UNDER NS/ CES/ CSEE	RATING	DATE OF EXAMINATION /	DI ACE OF EVANIA	IATIONI / CONICT	COMPANY	LICENSE (if	applicable)
E	SPECIAL LAWS/ CES/ CSEE (If Applicable) EXAMINATION / PLACE OF EXAMINATION / CONFERMENT CONFERMENT		ERMENT	NUMBER	Date of Validity				
	NA		NA	NA	Marie Control of the	NA		NA	NA
									1
	THE EACH POINTS AND INVESTMENT OF THE GOAL ACTUAL COMMAND	«Потей» «Потей» потей поте Потей потей поте	erfeld kinklas (into 100 Actividis) vide kinkettisiin, stilve 555 (in vierspieles) appeal			And the state of t	THE STREET STREET, STR	WT-RESTRUKTION ARTHER ARTHUR DO A LANGUI DE ARTHUR ARTHUR DE ARTHUR DE ARTHUR DE ARTHUR DE ARTHUR DE ARTHUR DE	THE STATE STATE STATE AND ADDRESS OF THE STATE OF THE STA
									- Constitution of the Cons
			(C-						
	EXPERIENCE			ntinue on separate she					
(Include pr	ivate employmen	t. Start from your recen	work) Description	n of duties should	be indicated in the attach	ed Work Ex			V
28. INC	mm/dd/yyyy)	POSITION TI (Write in full/Do not a		DEPARTMENT / AC	GENCY / OFFICE / COMPANY ull/Do not abbreviate)	MONTHLY	SALARY/ JOB/ PAY GRADE (If applicable)& STEP	STATUS OF	GOV'T SERVICE
From	То	1000	but or tall of	(vvine ii) ii	JIII Do not appreviate)	SALARY (FI	(Format "00-0")/ INCREMENT	APPOINTMENT	(Y/N)
08/01/2020	PRESENT	PART-TIME INST	RUCTOR	VISAYAS S	TATE UNIVERSITY	17,000.00- 20,000.00			Υ
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	- Control of the Cont			melline divini dina kanandara esiki anderinda diri giri ana esikaya esikaya esikaya esika diri ana diri ana du					
		el frenchischer des festilleres des kondeniere verschende verbeiten ze sich erweite bezieht des seine verbeite							
		F	(Cont	nue on separate sheet					
SIGNA	TURE	\$			DATE	1	February 12, 2023		

VI. VOLUNTARY WORK OR INV	OLVEMENT IN CIVIC / NON-GOVERNMEN	IT / PEOPLE /	VOLUNTARY	ORGANIZATIO	DN/S			
29. NAME & /	ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS		POSITION / NATURE OF WORK		
	NA .	From	То					
THE PROPERTY OF THE PROPERTY O		NA NA	NA	NA		NA		
					PARAMETERS STEEL CONTRACTOR STEEL			
	SEANOSE MERONDO NA PROMININA CONTRACTO DE CO							
					PO OFFICIAL REAL PROPERTY OF THE OTHER DESIGNATION OF THE OTHER DESIGNA			

VII. LEARNING AND DEVELOP! Start from the most recent L&D/training pro	(Co MENT (L&D) INTERVENTIONS/TRAINING I Orgram and include only the relevant L&D training taken	ntinue on separate PROGRAMS A	TTENDED					
		INCLUSIVE	DATES OF	Chief Executive Mar	Type of LD			
TITLE OF LEARNING AND DEVE	ELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	(Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)		
LAF	RAVEL 7 & VUE JS	From 8/26/2020	To 8/28/2020	24.0		DEPARTMENT OF COMPUTER SCIENCE AND		
	ROUNDED ON ANALYTICS	-		+		TECHNOLOGY		
	CERTIFICATION EXAMINATION	7/23/2021	9/27/2021	15.0		DEVELOPMENT ACADEMY OF THE PHILIPPINES PHILIPPINE NATIONAL IT STANDARDS		
	AND PUBLISHING YOUR RESEARCH PAPER	10/27/2020	10/27/2020	4.0		PHILIPPINE NATIONAL IT STANDARDS FOUNDATION		
	AND PUBLISHING YOUR RESEARCH PAPER ECTUAL PROPERTY RIGHTS AWARENESS AND	4/16/2021	4/16/2021	2.0		ELSEVIER		
COMMERCIAL	IZATION OF TECHNOLOGIES LASS ON EDUCATION TECHNOLOGY AND DIGITAL	10/26/2021	10/26/2021	4.0		TECHNOLOGY BUSINESS INCUBATOR VSU		
SEPAREOTERY EEPERTO MAGIER CI	SECURITY SECURITY	9/30/2021	9/30/2021	2.0		SEAMEO		
VSU E-LEARNING ENVIRO	ONMENT TRAINING-WORKSHOP SERIES	12/84/2020	12/14/2020	24.0		DEPARTMENT OF COMPUTER SCIENCE AND TECHNOLOGY		
CHOOSING THE RIGHT JOU	URNAL FOR YOUR RESEARCH ARTICLES	10/05/2021	10/05/2021	2.0		ELSEVIER		
		de la company de						
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				1				
		-						
W STUFF WESPWATISH	(Con	tinue on separate s	heet if necessary	7				
III. OTHER INFORMATION								
31. SPECIAL SKILLS and HOBBI	IES 32 NON-	ACADEMIC DISTIN	CTIONS / RECOC in full)	SNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)		
IMAGE PROCESSING		NA				NA		
WEB APPLICATION DEVELOPMEN	NT	NA NA						
Miller distribution de la company de la comp		NA NA						
SIGNATURE	THE RESERVE OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TO THE PERSON NA	linue on separate si	neet if necessary					
GGIATORE	\$			DAT	E	February 12, 2023		

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3/	And the state of t						
34	Are you related by consanguinity or affinity to the appoin	ting or recommending authority, or to the					
	chief of bureau or office or to the person who has immed	liate supervision over you in the Office,					
	Bureau or Department where you will be apppointed,						
	a. within the third degree?		☐ YES ☑	NO			
	b. within the fourth degree (for Local Government Unit - (
	5. William and locality degree (for Local Government Offit - (Dareer Employees)?	☐ YES ☑	NO			
			If YES, give details:				
35	a. Have you ever been found guilty of any administrative	offense?	☐ YES ☑	NO.			
				NO			
			If YES, give details:				
	b Harris barrel and a second						
	b. Have you been criminally charged before any court?		YES 2	NO			
			If YES, give details:				
			Date Filed:				
			Status of Case/s:				
_	Have very average and the Life of the Life		Status of Case/s.				
36.	Have you ever been convicted of any crime or violation of	f any law, decree, ordinance or regulation	☐ YES ☑	NO			
	by any court or tribunal?		If YES, give details:	1 110			
			IT ILO, give details.				
-							
37.	Have you ever been separated from the service in any of	the following modes: resignation.	☐ YES ☑	1 00			
	retirement, dropped from the rolls, dismissal, termination,	end of term, finished contract or phased	If YES, give details:	NO			
	out (abolition) in the public or private sector?	The second secon	ii 1ES, give details.				
20							
38.	a. Have you ever been a candidate in a national or local e	election held within the last year (except	☐ YES ☐	7 NO			
	Barangay election)?		If YES, give details:				
	h Have you regioned from the government and its during		1 "				
	b. Have you resigned from the government service during	the three (3)-month period before the last	1	☑ NO			
	election to promote/actively campaign for a national or loc	cal candidate?	If YES, give details:				
39.	Have you acquired the status of an immigrant or permane	ent resident of another country?					
	, and a political	riciosacine of another obality;		☑ NO			
			If YES, give details (co	ountry):			
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) M	Jagna Carta for Disabled Persons /PA					
	7277); and (c) Solo Parents Welfare Act of 2000 (RA 897)	2) please answer the following items:					
1	Are you a member of any indigenous group?	c), produce disamon the following items.					
	Are you a member of any indigenous group?		YES [√ NO			
			If YES, please specify:				
).	Are you a person with disability?		☐ YES [☑ NO			
			If YES, please specify ID				
	Are you a solo parent?						
				NO			
-			If YES, please specify ID	NO.			
41.	REFERENCES (Person not related by consanguinity or affinity to applic	ant /appointee)					
	NAME	1 ADDRESS	75.10				
		ADDRESS	TEL NO.				
	ROLDAN PIEDRAVERDE	BRGY. BUNGA, BAYBAY CITY, LEYTE	NA				
anda inpani	HARAY FORMA						
	JIMMY ESPINA	PCC, NUEVA ECIJA	9656636167				
embanasa	II/V/MILAD						
	IVY VILLAR	BRGY, BUNGA, BAYBAY CITY, LEYTE	9355940482				
12	I dealers and a self-that I have						
14.	I declare under oath that I have personally accomplished	ed this Personal Data Sheet which is a t	rue, correct and				
	complete statement pursuant to the provisions of perti	nent laws, rules and regulations of the	Republic of the	JOY S. ESPINON			
	Philippines. I authorize the agency head/authorized rep	presentative to verify/validate the content	s stated herein.	200 0000			
	I agree that any misrepresentation made in this do	cument and its attachments shall cause	se the filling of	PHOTO			
	administrative/criminal case/s against me.						
-							
Gr	overnment Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)						
PI	EASE INDICATE ID Number and Date of Issuance						
_	MAN E			4			
Go	overnment Issued ID:						
ID.	License/Passport No.:			1			
		Signature (Sign inside the b	OX)				
Da	10/15/2015	February 12, 2023					
L		Date Accomplished		Right Thumbmark			
2000 200							
	SUBSCRIBED AND SWORN to before me this	, affiant exhibiti	ng his/her validly issued govern	nment ID as indicated above.			
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		Person Administering Oat					
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