CS Form No. 212 Revised 2017

RSONAL DATA SHE

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

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. (Do not fill up. For CSC use only I. PERSONAL INFORMATION AGRAVANTE 2. SURNAME IAME EXTENSION (JR., SR) KEANE JIM FIRST NAME TENORIO MIDDLE NAME 3. DATE OF BIRTH 06/05/1989 16. CITIZENSHIP ☑ Filipino (mm/dd/yyyy) ☐ Dual Citizenship ☑ by birth ☐ by naturalization 4. PLACE OF BIRTH **DAVAO CITY** If holder of dual citizenship, Pls. indicate country: please indicate the details 5 SEX ☑ Male ☐ Female V ☑ Sinale 124 JASMIN ST. ☐ Married 17 RESIDENTIAL ADDRESS 6 CIVIL STATUS /Block/Lot No ☐ Widowed ☐ Separated Street LUZVIMINDA VILL. MA-A Other/s: Subdivision/Village Barangay DAVAO CITY 7. HEIGHT (m) 1.9m City/Municipality Province 8. WEIGHT (kg) 98KGS ZIP CODE 18. PERMANENT ADDRESS 9. BLOOD TYPE A+ House/Block/Lot No 270 PANGILINAN ST. NCO DISTRICT 10. GSIS ID NO N/A Barangay Subdivision/Village DAVAO DEL SUR PADADA 11 PAG-IBIG ID NO 111116694104 City/Municipality Province 12. PHILHEALTH NO. 16-025462954-2 ZIP CODE 13 SSS NO CRN-0111-1897011-5 19 TELEPHONE NO (082) 244 00 44 14. TIN NO. 440-063-908-000 20 MOBILE NO 09175953263/ 09258953263 15. AGENCY EMPLOYEE NO NIA 21. E-MAIL ADDRESS (if any) keane.agravante@gmail.com/ keane_agravante@yahoo.com FAMILY BACKGROUND 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) FIRST NAME NA NA NIA MIDDLE NAME N/A N/A N/A OCCUPATION N/A NA N/A **EMPLOYER/BUSINESS NAME** N/A **BUSINESS ADDRESS** NA N/A TELEPHONE NO N/A N/A FATHER'S SURNAME AGRAVANTE N/A NAME EXTENSION (JR., SR) FIRST NAME LORENZO N/A MIDDLE NAME BANARIA N/A MOTHER'S MAIDEN NAME **TENORIO** NIA SURNAME **AGRAVANTE** N/A FIRST NAME FE N/A MIDDLE NAME **FLORES** (Continue on separate sheet if necessary) EDUCATIONAL BACKGROUN SCHOLARSHIP HIGHEST LEVEL NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE PERIOD OF ATTENDANCE YEAR ACADEMIC LEVEL GRADUATED HONORS (if not graduated) RECEIVED From To ATENEO DE DAVAO UNIVERSITY -ELEMENTARY **Elementary Education Graduate** Jun-1994 Mar-2002 GRADUATE 2002 GRADE SCHOOL UNIT ATENEO DE DAVAO UNIVERSITY -SECONDARY Secondary Education Graduate Jun-2002 Mar-2006 GRADUATE 2006 HIGH SCHOOL UNIT ATENEO DE DAVAO UNIVERSITY -COLLEGE **BACHELOR OF SCIENCE IN NURSING** Jun-2006 Mar-2010 GRADUATE 2010 COLLEGE OF NURSING UNIVERSITY OF THE VISAYAS . **GRADUATE STUDIES** MASTER OF ARTS IN NURSING MANAGEMENT Mar-2012 GRADUATE Mar-2010 2012 Medallion for **GRADUATE SCHOOL** Excellence in Dean's UNIVERSITY OF THE VISAYAS . GRADUATE STUDIES MASTER OF SCIENCE IN PUBLIC HEALTH GRADUATE Mar-2014 Dec-2018 2018 Medallion for GRADUATE SCHOOL Excellence in UNIVERSITY OF THE VISAYAS -**GRADUATE STUDIES** DOCTOR OF MANAGEMENT IN HEALTH CARE Mar-2014 May-2018 GRADUATE 2018 GRADUATE SCHOOL CEBU NORMAL UNIVERISTY DOCTOR OF PHILOSOPHY IN EDUCATION, GRADUATE STUDIES Jun-2019 Present 6 Academic units GRADUATE SCHOOL OF TEACHING EDUCATION RESEARCH AND EVALUATION SIGNATURE DATE 1-Aug-2019

IV. CIVIL Š	ERVICE ELIG	IBILITY							
27. CARE		1080 (BOARD/ BAR) UNDER	RATING	DATE OF				LICENSE (if a	pplicable)
SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE			(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMIN			NUMBER	Date of Validity
Professional Regulatory Commission - Board of Nursing: Philippine Nurses Comprehensive			77.60%	December 19-20, 2010	ce (Region 1		0669031	March 2011	
Technical Education and Development Skills Authority: Certificate in Medical Transcription with Technical Education and Development Skills			Competent	March 2011	nd Skills Dev	1 - Davao	N/A	May 2011	
Authority: Certificate in Health Care Services with			Competent	May 2011	Technical Education ar Agency - Regional Office			N/A	May 2011
N/A			N/A	N/A			N/A	N/A	
N/A			N/A	N/A N/A				N/A	N/A
N/A			N/A	N/A	N/A N/A				N/A
N/A			N/A	N/A N/A				N/A	N/A
	XPERIENCE			ntinue on separate shee					
		nt. Start from your recen	t work) Descriptio	n of duties should	be indicated in the attach	ed Work Ex		et.	
(m	INCLUSIVE DATES (mm/dd/yyyy) POSITION TITLE (Write in full/Do not abbreviate)			DEPARTMENT / AC	MONTHLY SALARY	GRADE (if applicable)& STEP (Format "00-0")	STATUS OF APPOINTMENT	GOV'T SERVICE	
From	То			Visavas	State University		INCREMENT		(Y/N)
January 2019	Present December	Instructor I (Clinica	,	Colle	state University ge of Nursing orporation USAID	24,000.00	SG12-0	Substitute	Yes
January 2016	2018	Monitoring & Evaluation,		Project Develop	99,000.00	Jhpiego - Mid- Mgr	FIXED TERM Contract	No	
March 2015 January 2015	December 2015 March 2015	Learning Of Monitoring, Evaluation,	ficer	Typhoon Haiya OXFA	75,000.00	OXFAM - D1 (Mid-Mgr) OXFAM - D1	FIXED TERM Contract FIXED TERM	No	
December 2013	March 2015	Learning Of Public Health Promo		Typhoon Haiya OXFAI	n - Development Phase M International	62,000.00	(Mid-Mgr)	Contract FIXED TERM	No
November 2013	December 2013	Humanitarian Hea		Typhoon Haiyar MERLIN	55,000.00	(Mid-Mgr) SCI - Grade	Contract FIXED TERM	No	
June 2013	November 2013	Public Health		Typhoon Haiyai	35,000.00	3 (Mid-Mgr)	Contract FIXED TERM	No	
January 2012	June 2013	Emergency Room C		Project Typho	30,000.00	Grade 3 (Mid- Mar) Junior	Contract FIXED TERM	No	
June 2011	January 2012	Nurse Volum		Carmen District H	Maternity Hospital ospital - Provincial Health	45,000.00	Supervisory	Contract	No
July 2010	February 2011	Basic English 1		Office of Davao del Norte CYMA Int'l English Academy		N/A P 6,000.00	N/A	N/A	No
N/A	N/A	N/A	- Cuonor	N/A		N/A	N/A N/A	N/A	No
N/A	N/A	N/A		N/A		N/A	N/A	N/A N/A	N/A N/A
N/A	N/A	N/A		N/A		N/A	N/A	N/A	N/A
N/A	N/A	N/A		N/A		N/A	N/A	N/A	N/A
N/A	N/A	N/A			N/A	N/A	N/A	N/A	
N/A	N/A	N/A			N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A		N/A		N/A	N/A	N/A	N/A
N/A	N/A	N/A		N/A		N/A	N/A	N/A	N/A
N/A	N/A	N/A		N/A		N/A	N/A	N/A	N/A
N/A	N/A	N/A		N/A		N/A	N/A	N/A	N/A
N/A	N/A	N/A		N/A		N/A	N/A	N/A	N/A
N/A	N/A	N/A		N/A		N/A	N/A	N/A	N/A
N/A	N/A	N/A		N/A		N/A	N/A	N/A	N/A
N/A	N/A	N/A		N/A		N/A	N/A	N/A	N/A
N/A	N/A	N/A		N/A		N/A	N/A	N/A	N/A
N/A	N/A	N/A		N/A N/A		N/A	N/A	N/A	N/A
N/A N/A	N/A N/A	N/A N/A	-		N/A	N/A	N/A	N/A	
			(Cont	inue on separate sheet	N/A if necessary)	N/A	N/A	N/A	N/A
SIGNA	TURE	A	Care James		DATE		1-Aug	1-2019	
		1	11				00	FARITAGA M	271 N 1

VI. VOLUNTÄRY WORK OR INVOLVEMENT	THE RESIDENCE OF THE PROPERTY	-		ORGANIZAT	' S		
29. NAME & ADDRESS OF ORGANIZATION (Write in full)		INCLUSIVE DATES (mm/dd/yyyy) From To		NUMBER OF HOURS	POSITION / NATURE OF WORK		
NA			NA	NA	NA		
NA			NA	NA	NA .		
NA NA			NA	NA	NA		
4		NA	NA	NA	NA		
Α		NA	NA	NA	NA NA		
Α		NA	NA	NA NA	NA .		
Α		-			NA NA		
A	(Con	NA ntinue on separate	NA sheet if necessary	NA Ø	NA		
 LEARNING AND DEVELOPMENT (L&D) tart from the most recent L&D/training program and inclu 				biof Exacution Ma			
TITLE OF LEARNING AND DEVELOPMENT INTI (Write in ful	ERVENTIONS/TRAINING PROGRAMS	INCLUSIV ATTEI (mm/	E DATES OF NDANCE (dd/yyyy)	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
ta as a Deliverable: An Orientation to Open Data		From	То	3200H		Jhpiego Online Training	
nder and Sexual and Reproductive Health 101				3200H		Global Health eLearning Center Online Training	
otecting Life in Global Health Assistance and Statutory A	Abortion Restrictions			3200H		Global Health eLearning Center Online Training	
aith Workforce Productivity: An Approach for Measurem	ent, Analysis and Improvement			3200H		Global Health eLearning Center Online Traini	
ata Qualty				3200H		Global Health eLearning Center Online Traini	
Abortion and Family Planning Requirements - 2017				3200H		Global Health eLearning Center Online Traini	
overnance and Health				3200H		Global Health eLearning Center Online Traini	
Key Practices of Good Governance				3200H		Global Health eLearning Center Online Traini	
Journal Manuscript for Global Health				3200H		Global Health eLearning Center Online Traini	
ender Monitoring & Evaluation				3200H		Global Health eLearning Center Online Traini	
ata Use for Program Managers				3200H		Global Health eLearning Center Online Traini	
arassment Prevention				3200H		Last Mile Learning - LINGOS Online Training	
S Abortion and Family Planning Requirements - 2016				3200H		Global Health eLearning Center Online Training	
ender and Sexual and Reproductive Health 101				3200H		Global Health eLearning Center Online Training	
ata Quality Check for Health Care Providers		03 Mar 2016	04 Mar 2016	1600H		Provincial Government of Agusan del Norte Resource Speaker	
ımanitarları Action Training		30 May 2016	02 Jun 2016	3200H		Oxfam International	
ommunicating as One Oxfam: A Case Story & Documenta		07 Dec 2015	08 Dec 2015	1600H		Oxfam International Resource Speaker	
ientation and Fieldwork on Pre-Crices Market Mapping A		12 Oct 2015	21 Oct 2015	8000H		Oxfam International	
orkshop on CAMSA: Common Approach on Monitoring, E countability Ibabaihan, Karahasan at WASH: Tungo sa Ligtas at Maka		03 Aug 2015	04 Aug 2015	1600H		Oxfam International	
xfam's Last Mile Mobile Solution (LMMS) Training	Dulunang WASH sa mga usaping Gender	18 Sep 2015	19 Sep 2015	1600H		Oxfam International	
Tamin's East mine making contract (Limite) Haming	(Com	05 Aug 2015	07 Aug 2015	2400H		Oxfam International	
II. OTHER INFORMATION	(Con	tinue on separate	sneet II necessary				
31. SPECIAL SKILLS and HOBBIES	32. NON	LACADEMIC DISTI	NCTIONS / RECOG	ENITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATI	
Computer Related Work		NA	1			Philippine Nurses Association	
Database Concept, Management and Administration	NA				The Honor Society of Nursing, Sigma Theta Tau International		
Data Analysis, Statistics and Interpretation	NA					Nurses League of Philippine Governme Nurses	
PMEALP (Planning, Monitoring, Evaluation, Accountability, Learning and Partnership)		Nurse Educators and Practictioners of t Philippines					
Program and Project Management		NA	NA			Philippine Public Health Association	
Travelling					Maternal-Child Nurses Association of the Philipppines		
Solitude and Yoga		NA NA on sene to	sheet if necessary			Philippine Nurse Researcher Society	
SIGNATURE	SIGNATURE Alles A				ATE	1-Aug-2019	

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29. NAME & ADDRESS OF ORGANIZATION		JSIVE DATES		VS			
(Write in full)	(m	m/dd/yyyy) To	NUMBER OF HOURS		POSITION / NATURE OF WORK		
A	NA	NA	NA	NA			
A	NA	NA	NA	NA			
A	NA	NA	NA	NA			
A	NA	NA	NA	NA			
A	NA	NA	NA	NA			
A	NA	NA	NA	NA	NA		
A	NA	NA	NA	NA			
II. LEARNING AND DEVELOPMENT (L&D) INTERVENTION	(Continue on separa S/TRAINING PROGRAMS	ate sheet if necessar ATTENDED	y)				
lart from the most recent L&D/training program and include only the relevant L&			Chief Executive Mai	nagerial positions)			
TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING (Write in full)	G PROGRAMS AT (m	GIVE DATES OF FENDANCE m/dd/yyyy)	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)		
ptage Management Workshop and Stakeholders Meeting	From 15 Jul 201:	To 16 Jul 2015	1600H		Oxfam International Resource Speaker		
nter, Sanitation, Hygiene (WASH) Baseline Knowledge, Attitude & Practices Sur oup Discussion Faciliation Orientation for Enumerators	vey and Focus 06 Mar 201	5 07 Mar 2015	1600H		Oxfam International Resource Speaker		
sbian, Gay, Bisexual, Transgender (LGBT) Forum	28 Feb 201	5 28 Feb 2015	0800H		Oxfam International Resource Speaker		
entation on Fraud Management	25 Feb 201	5 25 Feb 2015	0800H		Oxfam International		
sics in Water, Sanitation and Hygiene (WASH)	09 Feb 201	5 13 Feb 2015	4000H		Oxfam International		
f-Help Group (SHG) Approach	22 Jan 201	5 24 Jan 2015	2400H		Oxfam International Resource Speaker		
nder Equality Forum for Eastern Visayas State University	14 Jan 201	5 14 Jan 2015	0800H		Oxfam International Resource Speaker		
mmunicating as One Oxfam: A Case Story & Documentation Workshop	02 Dec 201	4 03 Dec 2014	1600H		Oxfam International		
roduction to Participatory Development	18 Dec 201	4 19 Dec 2014	1600H		Oxfam International		
king WASH Safer: Violence, Gender & WASH	14 Nov 201	4 14 Nov 2014	H0080		Oxfam International		
nder Mainstreaming in WASH	10 Oct 201	4 10 Oct 2014	H0080		Oxfam International		
mmunity Led Total Sanitation (CLTS)	08 Jul 2014		2400H		Oxfam International		
nder Induction	25 Apr 201	4 25 Apr 2014	H0080		Oxfam International		
aster Risk Reduction Orientation with Gender and Protection Lenses	20 Jun 201:		1600H		Oxfam International Resource Speaker		
ter Quality Monitoring Training	28 Mar 201		1600H		Oxfam International Resource Speaker		
ining of Trainers for Water Quality Monitoring Training	04 Mar 201	4 05 Mar 2014	2400H		Oxfam International		
parning course of the SPHERE Handbook in Action sic Security and Logistics in UN Organization			2400H		SPHERE Project Charter (Online)		
roduction on Child Safe Guarding			2400H		United Nations Security (Online)		
mmunication in the Workplace			0800H		Save the Children International & MERLIN Philippines		
ress Management in the Workplace			H0080		MERLIN (Online)		
	(Continue on separa	te sheet if neressan	0800H		MERLIN (Online)		
II. OTHER INFORMATION			,				
31. SPECIAL SKILLS and HOBBIES 32.	NON-ACADEMIC DIS	STINCTIONS / RECO	GNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZAT		
NA NA		NA A			NA NA		
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NA	7	NA A	THE RESIDENCE OF THE PERSON OF	NA NA			
NA	1	NA .		NA NA			
NA	ı	NA .		NA			
NA	h	IA		NA			
NA	١	lA .			NA NA		
SIGNATURE	(Congrue on segara	te sheet if necessary		\TE	1-Aug-2019		

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC	/ Man-GOVERNMENT /	PEOPLE /	VOLUNTAR	ORGANIZAT	'S		
29. NAME & ADDRESS OF ORGANIZATION (Write in full)			INCLUSIVE DATES (mm/dd/yyyy) From To			POSITION / NATURE OF WORK	
NA			NA	NA	NA		
NA NA			NA	NA	NA		
A	1	NA	NA	NA	NA		
IA		NA	NA	NA	NA		
IA		NA	NA	NA	NA		
IA		NA	NA	NA NA	NA		
NA		NA	NA NA	NA NA	NA NA		
	(Contin	nue on separa	e sheet if necess		NA .		
VII. LEARNING AND DEVELOPMENT (L&D) INTERV Start from the most recent L&D/training program and include only the				Chief/Executive/Mar	nagerial positions)		
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTION (Write in full)		INCLUSI ATT	VE DATES OF ENDANCE n/dd/yyyy)	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
anagement in the Workplace		From	То	0800H		MERLIN (Online)	
raining on Nutrition in Emergencies				1600H		MERLIN Philippines	
omprehensive Nutrition Programme				2400H		MERLIN Philippines	
edical Waste Management Training				0800H		Department of Health - Davao Regional Office	
olid Waste Management Training				0800H		Department of Health - Davao Regional Office	
raining on Ovicidal-Larvicidal Trap for Sanitary Inspectors			1	1600H		MERLIN Philippines & Department of Science	
ackage on Essential Interventions on Non-Communicable Diseases				2400H		Technology MERLIN Philippines	
rientation Course on Disease Surveillance & Response				2400H		MERLIN Philippines	
rientation on Philippine Integrated Mgt of Acute Malnutrition				2400H		MERLIN Philippines	
Orientation on Universal Health Care & Community Health Team				2400H		DOH, Davao	
Integrated Management of Childhood Illnesses Workshop				3200H		Provincial Health Office, Davao del Norte	
Comprehensive Family Planning				3200H		Provincial Health Office, Davao del Norte	
ssential Intrapartum and New Born Care Orientation Workshop				1600H		Provincial Health Office, Davao del Norte	
rientation on the Implementation of the Micronutrient Supplementation	n			1600H		Provincial Health Office, Davao del Norte	
asic IV Therapy Training for Nurses				2400H		ANSAP, Davao	
asic ECG Interpretation and Intubation Technique				1600H		ECSI, Koronadal	
First Aid and Health Care Provider CPR Course				2400H		ECSI, Koronadal	
DH Infection Control Seminar & Lecture				0800H		CDH, Carmen	
III. OTHER INFORMATION	(Continu	ue on separate	sheet if necessa	ny)			
31. SPECIAL SKILLS and HOBBIES 32.	NON-AC		TINCTIONS / RECO	GNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZAT	
NA		N	A			NA	
NA		N.	A			NA	
NA		N.	A		NA		
NA		N.	A		NA		
NA			Ą		NA		
NA			A		NA		
NA		N.				NA	
SIGNATURE	(Ceptinu	e on separate	sheet if necessar	y)			

34.	Are you related by consanguinity or affinity to the cointing chief of bureau or office or to the person who has a mediate Bureau or Department where you will be apppointed,								
	s ' b. within the fourth degree (for Local Government Unit - Care		NO NO						
35.	a. Have you ever been found guilty of any administrative offe	☐ 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 an 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, find the public or private sector?	☑ YES ☐ NO If YES, give details:							
38.	A. Have you ever been a candidate in a national or local electron 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 of	☐ YES ☑ NO If YES, give details:							
39.	Have you acquired the status of an immigrant or permanent	☐ YES ☑ NO If YES, give details (country):							
a. b. c.	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 If YES, please specify: ☐ YES If YES, please specify II ☐ YES If YES, please specify II	☑ NO						
41.	REFERENCES (Person not related by consanguinity or affinity to applicant	/appointee)							
	NAME	ADDRESS	TEL. NO.						
	Mme. Jesusa Magno Dr. Zosima Pañares	Carigara, Leyte	09351912182	60					
	Dr. Cleofe Tabada	V. Rama Ave., Cebu City GSIS Heights, Davao City	09981590120 09234107065						
42.	2. I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I authorize the agency head/authorized representative to verify/validate the contents stated herein. agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me.								
G ID	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) LEASE INDICATE ID Number and Date of Issuance overnment Issued ID: PRC-BON # 0669031 //License/Passport No.: ate/Place of Issuance: Davao City	DOX)	Right Thumbmark						
		, affiant exhib ATTY, RYSANA, GUINOCOR VSULEGAL OF SOIL Administering Oat		overnment ID as indicated above.					