

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)

I. PERSONAL INFORMATION

2. SURNAME	DARGANTES		
FIRST NAME	TONI MARC	NAME EXTENSION (JR., SR)	
MIDDLE NAME	LORETO		
3. DATE OF BIRTH (mm/dd/yyyy)	4/29/1983	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:
4. PLACE OF BIRTH	Baybay City	If holder of dual citizenship, please indicate the details:	
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		
6. CIVIL STATUS	<input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	26 House/Block/Lot No. Street Villa Trinidad Gaas Subdivision/Village Barangay Baybay Leyte City/Municipality Province
7. HEIGHT (m)	1.52	ZIP CODE	
8. WEIGHT (kg)	64		
9. BLOOD TYPE	B	18. PERMANENT ADDRESS	26 House/Block/Lot No. Street Villa Trinidad Gaas Subdivision/Village Barangay Baybay City Leyte City/Municipality Province
10. GSIS ID NO.	02004558960	ZIP CODE	6521
11. PAG-IBIG ID NO.	121147839201		
12. PHILHEALTH NO.	13-000103153-9	19. TELEPHONE NO.	NA
13. SSS NO.	0629708699	20. MOBILE NO.	0916-4317303
14. TIN NO.	287-276-670	21. E-MAIL ADDRESS (if any)	tmdargantes@vsu.edu.ph
15. AGENCY EMPLOYEE NO.	V000854		

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	DARGANTES		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	DEARLY	NAME EXTENSION (JR., SR)	ANGEL ZIYA M. DARGANTES	12/20/2007
MIDDLE NAME	MANAGBANAG		DEA NIBELLE M. DARGANTES	7/4/2013
OCCUPATION	TELLER			
EMPLOYER/BUSINESS NAME	OCCI BAYBAY BRANCH			
BUSINESS ADDRESS	BAYBAY CITY, LEYTE			
TELEPHONE NO.	053-563-8037			
24. FATHER'S SURNAME	DARGANTES			
FIRST NAME	BUENAVENTURA	NAME EXTENSION (JR., SR)		
MIDDLE NAME	BOHOLST			
25. MOTHER'S MAIDEN NAME				
SURNAME	LORETO			
FIRST NAME	FE ISABLE			
MIDDLE NAME	TIGOL			

(Continue on separate sheet if necessary)

III. EDUCATIONAL BACKGROUND

26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE		HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	VISCA FOUNDATION ELEMENTARY SCHOOL	PRIMARY EDUCATION	1990	1996		1996	
SECONDARY	VISCA LABORATORY HIGH SCHOOL	SECONDARY EDUCATION	1996	2000		2000	
VOCATIONAL / TRADE COURSE	DUALTECH TRAINING CENTER MANILA	ELECTROMECHANICS	2000	2002		2002	
COLLEGE	VISAYAS STATE UNIVERSITY	BS IN COMPUTER SCIENCE	2004	2008		2008	
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY	MASTER OF MANAGEMENT	2015	2018		2018	

(Continue on separate sheet if necessary)

SIGNATURE		DATE	Oct. 4, 2018	CS FORM 212 (Revised 2017), Page 1 of 4
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27.	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
					NUMBER	Date of Validity
	CAREER SERVICE PROFESIONAL ELIGIBILITY	82.53%	4/6/2014	TACLOBAN CITY	13-125552	5/19/2014

#### V. WORK EXPERIENCE

[illegible]

SIGNATURE	<i>tmd</i>	DATE	Oct. 4, 2018	CS FORM 212 (Revised 2017), Page 2 of 4
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## VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION

[illegible]

(Continue on separate sheet if necessary)

## VII. LEARNING AND DEVELOPMENT (L&amp;D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

[illegible]

(Continue on separate sheet if necessary)







## VIII. OTHER INFORMATION

[illegible]

(Continue on separate sheet if necessary)

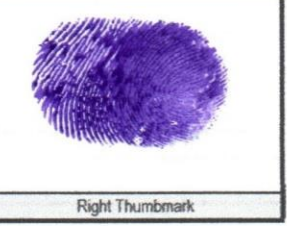
SIGNATURE	<i>tno</i>	DATE	Oct. 4, 2018
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34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to the chief of bureau or office or to the person who has immediate supervision over you in the Office, Bureau or Department where you will be appointed, a. within the third degree? b. within the fourth degree (for Local Government Unit - Career Employees)?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____												
35. a. Have you ever been found guilty of any administrative offense?  b. Have you been criminally charged before any court?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____  <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ Date Filed: _____ Status of Case/s: _____												
36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____												
37. Have you ever been separated from the service in any of the following modes: resignation, retirement, dropped from the rolls, dismissal, termination, end of term, finished contract or phased out (abolition) in the public or private sector?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____												
38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?  b. Have you resigned from the government service during the three (3)-month period before the last election to promote/actively campaign for a national or local candidate?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____  <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____												
39. Have you acquired the status of an immigrant or permanent resident of another country?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details (country): _____												
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? b. Are you a person with disability? c. Are you a solo parent?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____												
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)														
<table><thead><tr><th>NAME</th><th>ADDRESS</th><th>TEL. NO.</th></tr></thead><tbody><tr><td>DR. REMBERTO A. PATINDOL</td><td>OVPAF, VSU, VISCA, BAYBAY CITY</td><td>053-563-7108</td></tr><tr><td>DR. OTHELLO B. CAPUNO</td><td>OVPRE, VSU, VISCA, BAYBAY CITY</td><td>053-563-7485</td></tr><tr><td>DR. WINSTON M. TABADA</td><td>DCST, VSU, VISCA, BAYBAY CITY</td><td></td></tr></tbody></table>			NAME	ADDRESS	TEL. NO.	DR. REMBERTO A. PATINDOL	OVPAF, VSU, VISCA, BAYBAY CITY	053-563-7108	DR. OTHELLO B. CAPUNO	OVPRE, VSU, VISCA, BAYBAY CITY	053-563-7485	DR. WINSTON M. TABADA	DCST, VSU, VISCA, BAYBAY CITY	
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42. 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. I agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me.														
<table><tr><td><div>Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</div><div>Government Issued ID: DRIVER'S LICENSE</div><div>ID/License/Passport No.: H12-10-000670</div><div>Date/Place of Issuance: 04/28/2016 / BAYBAY CITY</div></td><td><div></div><div>Signature (Sign inside the box)</div><div>Oct. 4, 2018</div><div>Date Accomplished</div></td><td><div></div><div>Right Thumbmark</div></td></tr></table>			<div>Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</div> <div>Government Issued ID: DRIVER'S LICENSE</div> <div>ID/License/Passport No.: H12-10-000670</div> <div>Date/Place of Issuance: 04/28/2016 / BAYBAY CITY</div>	<div></div> <div>Signature (Sign inside the box)</div> <div>Oct. 4, 2018</div> <div>Date Accomplished</div>	<div></div> <div>Right Thumbmark</div>									
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SUBSCRIBED AND SWORN to before me this <u>OCT 04 2018</u> , affiant exhibiting his/her validly issued government ID as indicated above.														
<div>ATTY. RYSAN C. GUINOCOR</div> <div>VSU LEGAL OFFICER</div> <div>Person Administering Oath</div>														



PHOTO



Right Thumbmark