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 Print legibly. Tick appropriate boxes (and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. 2 SURNAME DARGANTES NAME EXTENSION (JR., SR) FIRST NAME TONI MARC MIDDLE NAME LORETO 3. DATE OF BIRTH 4/29/1983 16. CITIZENSHIP ✓ Filipino Dual Citizenship (mm/dd/vvvv) by birth by naturalization Pls. indicate country: 4 PLACE OF BIRTH Baybay City If holder of dual citizenship please indicate the details ✓ Male Female T 5. SEX ✓ Married ☐ Single 17. RESIDENTIAL ADDRESS 26 **6 CIVIL STATUS** ☐ Widowed ☐ Separated House/Block/Lot No Street Villa Trinidad Gaas Other/s: Subdivision/Village Barangay Baybay Leyte 7. HEIGHT (m) 1.52 Province City/Municipality 8. WEIGHT (kg) 64 ZIP CODE 26 18. PERMANENT ADDRESS 9. BLOOD TYPE B House/Block/Lot No Street Villa Trinidad Gaas 10. GSIS ID NO. 02004558960 Subdivision/Village Barangay Baybay City Leyte 11. PAG-IBIG ID NO 121147839201 City/Municipality Provinc 12. PHILHEALTH NO. 13-000103153-9 ZIP CODE 6521 13. SSS NO. 0629708699 19. TELEPHONE NO NA 14. TIN NO. 287-276-670 0916-4317303 20 MOBILE NO. 15. AGENCY EMPLOYEE NO. V000854 21. E-MAIL ADDRESS (if any) tmdargantes@vsu.edu.ph FAMILY BACKGROUN 22. SPOUSE'S SURNAME DARGANTES 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR. SR) FIRST NAME DEARLY **ANGEL ZIYA M. DARGANTES** 12/20/2007 MIDDLE NAME MANAGBANAG 7/4/2013 DEA NIBELLE M. DARGANTES OCCUPATION TELLER EMPLOYER/BUSINESS NAME OCCCI BAYBAY BRANCH **BUSINESS ADDRESS BAYBAY CITY, LEYTE** TELEPHONE NO. 053-563-8037 24. FATHER'S SURNAME DARGANTES NAME EXTENSION (JR., SR) BUENAVENTURA FIRST NAME MIDDLE NAME BOHOLST 25 MOTHER'S MAIDEN NAME SURNAME LORETO FE ISABLE FIRST NAME TIGOL MIDDLE NAME (Continue on separate sheet if necessary) SCHOLARSHIP HIGHEST LEVEL PERIOD OF ATTENDANCE NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE YEAR **ACADEMIC** LEVEL UNITS EARNED GRADUATED HONORS (Write in full) (Write in full) (if not graduated) RECEIVED From To VISCA FOUNDATION ELEMENTARY SCHOOL RIMARY EDUCATION ELEMENTARY 1996 1990 1996 SECONDARY VISCA LABORATORY HIGH SCHOOL SECONDARY EDUCATION 1996 2000 2000 VOCATIONAL / **DUALTECH TRAINING CENTER MANILA ELECTROMECHANICS** 2000 2002 2002 TRADE COURSE COLLEGE **VISAYAS STATE UNIVERSITY BS IN COMPUTER SCIENCE** 2004 2008 2008 GRADUATE STUDIES VISAYAS STATE UNIVERSITY MASTER OF MANAGEMENT 2015 2018 2018 SIGNATURE CS FORM 212 (Revised 2017), Page 1 of 4 DATE Oct. 4, 2018 lm

V. CIVIL SERVICE ELIGIBILITY		DATE OF			LICENSE (if applicable)				
7. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE			RATING (If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINAT	TION / CONFERMENT		NUMBER	Date of Validity
CAREER SERVICE PROFESIONAL ELIGIBILITY			82.53%	4/6/2014	TACLOB	TACLOBAN CITY			5/19/201
								3	
	XPERIENCE ate employmen	t. Start from your recent		ntinue on separate sheet in		d Work Exp	erience sheet.		
	ISIVE DATES In/ddf/yyyy)	POSITION TI (Write in full/Do not		DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)		MONTHLY SALARY	SALARYI JOBI PAY GRADE (# applicable)& STEP (Format *00-0*)/ INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVIC (Y/ N)
04/01/2001	06/30/2002	Maintenance	Trainee	Monde	M.Y. San INC.				No
01/01/2003	04/30/2003	Electricia		-	st Philippines INC.				No
07/01/2008	09/30/2008	Science Research		-	PRE, VSU			J.O.	No
10/1/2008	6/30/2014							J.O.	No
07/01/2014	11/30/2016	Science Research Admindministrative			ARP, VSU niversity, VSU	14,931	8 (1)	Permanent	Yes
2/1/2016	PRESENT	Admindministrative	Assistant VI	-	PAF, VSU	21,387	12(1)	Permanent	Yes
SIGN	ATURE	- ta	ico	ntinue on separate sheet DATE	ll necessary) Oct . 4, 21	016	CS FORM	212 (Revised 2017),	Page 2 of

29. NAME & ADDRESS OF ORGANIZATION	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	DOCITION (NATI IDE OF MODE)	
(Write in full)	From	To	NUMBER OF HOURS		POSITION / NATURE OF WORK
	†				
			1		
II. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PR	ontinue on separate :	sheet if necessary	1		
Start from the most recent L&D/training program and include only the relevant L&D/training taken for			hiel/Executive Mana		
			Carrie Carro		
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS	INCLUSIVE DATES OF ATTENDANCE		NUMBER OF HOURS	Type of LD (Managerial/	CONDUCTED/ SPONSORED BY
(Write in full)		d/yyyy)		Supervisory/ Technical/etc)	(Write in full)
Name Park Western	From	То			
pen Data Workshop	3/15/2017	3/15/2017	8.0	Technical	College of Management and Economics, VS
VPAF Strategic Planning Workshop	2/15/2017	2/16/2017	16.0	Technical	OVPAF, VSU
0th Annnual Conference of the Asian Association of Open Universities	10/26/2016	10/28/2016	24.0	Technical	Asian Association of Open Universities
	+			recimical	Asian Association of Open Universities
Vorkshop on RA 9184, Goods and Procurement Planning	9/8/2016	9/8/2016	8.0	Technical	VSU
Vorkshop to Review and Improve Citizens' Charter	9/1/2016	9/1/2016	8.0	Technical	VSU
curriculum Review for Graduate Programs	1/21/2016	1/22/2016	16.0	Technical	Graduate School, VSU
	1/21/2010	1/22/2010	10.0	recimical	Graduate School, 450
SU Web Development Workshop	1/19/2015	1/21/2015	24.0	Technical	VSU
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Charles In					In the second of
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4					3 **
	ontinue on separate s	heet if necessary)		
III. OTHER INFORMATION					
31. SPECIAL SKILLS and HOBBIES 32. NO	N-ACADEMIC DISTIN	ICTIONS / RECOG	NITION	g American con a vision	MEMBERSHIP IN ASSOCIATION/ORGANIZATION
St. Cont. Orices and hopping		in full)			33. (Write in full)
7 7					VSU Administrative Personnel Association
(Co	ntinue on separate s	heet if necessary			
SIGNATURE Ind		,	DA	TF	0.1 1 2010
Juny.				-	Oct. 4,2018

	chief of bureau or office or to the person who has immediate Bureau or Department where you will be apppointed,	e supervision over you in the Office,				
	a. within the third degree?		YES NO			
	b. within the fourth degree (for Local Government Unit - Car	☐ YES ☑ NO				
			If YES, give details:			
35.	a. Have you ever been found guilty of any administrative of	fense?	YES NO			
			If YES, give details:			
	b. Have you been criminally charged before any court?		☐ YES ☑ NO			
	b. Have you been criminally charged before any count?		If YES, give details:			
			Date I	Filed:		
			Status of Ca	ise/s:		
36.	Have you ever been convicted of any crime or violation of a	YES NO				
	any court or tribunal?	If YES, give details:				
37.	Have you ever been separated from the service in any of the	ne following modes: resignation, retirement	YES NO			
	dropped from the rolls, dismissal, termination, end of term,		If YES, give details:			
	in the public or private sector?					
38.	A. Have you ever been a candidate in a national or local ele Regrander election?	ection held within the last year (except	YES V	10		
	Barangay election)?		If YES, give details:			
	b. Have you resigned from the government service during to		☐ YES ☑ N	10		
	election to promote/actively campaign for a national or loca	ll candidate?	If YES, give details:			
39.	Have you acquired the status of an immigrant or permanent	ave you acquired the status of an immigrant or permanent resident of another country?				
			If YES, give details (country):			
	10 A MARIN STATE OF THE STATE O	L. Come T. State T.				
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma		3			
0	and (c) Solo Parents Welfare Act of 2000 (RA 8972), pleas	e answer the following items:				
a.	Are you a member of any indigenous group?		☐ YES ☑ N If YES, please specify:	NO		
b.	Are you a person with disability?	☐ YES ☑ NO If YES, please specify ID No: ☐ YES ☑ NO				
C.	Are you a solo parent?					
			If YES, please specify ID No			
41.	REFERENCES (Person not related by consanguinity or affinity to applic	ant /appointee)				
	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			
			033-303-7403			
	DR. WINSTON M. TABADA	DCST, VSU, VISCA, BAYBAY CITY				
42.	I declare under oath that I have personally accomplished to					
	statement pursuant to the provisions of pertinent laws, rule the agency head / authorized representative to veri					
	misrepresentation made in this document and its attach			PHOTO		
	against me.					
Г	Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)			JIIII WARREN		
	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.: H12-10-000670		HIMIH			
H		oox)				
-	Date/Place of Issuance: 04/28/2016 / BAYBAY CITY	Oct. 4, 2016 Date Accomplished	CONTRACTOR OF STREET	Right Thumbmark		
	CLIBCODIDED AND CHAODN to before the thing of the	A 1 NO.15 affect and their	a his/hor validly issued assessment	nt ID as indicated above		
	SUBSCRIBED AND SWORN to before me this	0 4)018 affiant exhibiting	g his/her validly issued governmen	il id as indicated above.		
		NII .				
	I	///gh				
		ATTY. RYSAN C. GUINOC	OR			
		VSU LEGADO SON Administering Oat				
_						
			С	S FORM 212 (Revised 2017), Page 4 of		

34. Are you related by consanguinity or affinity appointing or recommending authority, or to the