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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 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) 2. SURNAME OMPOD NAME EXTENSION (JR., SR) FIRST NAME **GERALD** MIDDLE NAME DECIO 3. DATE OF BIRTH 16. CITIZENSHIP (mm/dd/yyyy) 03/09/1997 **✓** Filipino ☐ Dual Citizenship Dby birth by naturalization 4 PLACE OF BIRTH MATAG-OB, LEYTE If holder of dual citizenship Pls. indicate country: please indicate the details. ✓ Male ☐ Female -✓ Single ☐ Married 17. RESIDENTIAL ADDRESS 6 CIVIL STATUS N/A ☐ Widowed Separated House/Block/Lot No N/A PANGASUGAN Other/s: Subdivision/Village Barangay BAYBAY CITY 7. HEIGHT (m) LEYTE 1.69 City/Municipality Province 8. WEIGHT (kg) 65 ZIP CODE 6521 18. PERMANENT ADDRESS N/A 9. BLOOD TYPE 0 N/A House/Block/Lot No Street 10. GSIS ID NO. N/A STO. ROSARIO N/A Subdivision/Village Barangay 11. PAG-IBIG ID NO. MATAG-OB 121277743499 LEYTE City/Municipality Province 12. PHILHEALTH NO. N/A ZIP CODE 6532 13. SSS NO. 34-9995744-4 19. TELEPHONE NO. N/A 14 TIN NO N/A 20. MOBILE NO. 0950-840-1065 15. AGENCY EMPLOYEE NO. N/A 21. E-MAIL ADDRESS (if any) gerald.ompod@vsu.edu.ph 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 N/A N/A N/A MIDDLE NAME N/A OCCUPATION N/A EMPLOYER/BUSINESS NAME N/A **BUSINESS ADDRESS** N/A TELEPHONE NO. N/A 24. FATHER'S SURNAME OMPOD NAME EXTENSION (JR., SR) FIRST NAME ROME TORILLAS MIDDLE NAME 25. MOTHER'S MAIDEN NAME SURNAME DECIO MICHELLE FIRST NAME MIDDLE NAME MORE (Continue on separate sheet if necessary) **EDUCATIONAL BACKG** SCHOLARSHIP NAME OF SCHOOL PERIOD OF ATTENDANCE HIGHEST LEVEL BASIC EDUCATION/DEGREE/COURSE LEVEL YEAR GRADUATED ACADEMIC UNITS EARNED (Write in full) (Write in full) HONORS (if not graduated) RECEIVED From To VALEDICTO ELEMENTARY SAN VICENTE ELEMENTARY SCHOOL **ELEMENTARY EDUCATION** 2004 2010 N/A 2010 RIAN SECONDARY MATAG-OB NATIONAL HIGH SCHOOL 1ST SECONDARY EDUCATION 2010 2014 N/A 2014 HONORABLE VOCATIONAL / N/A N/A N/A N/A TRADE COURSE N/A N/A N/A **BACHELOR OF SCIENCE IN** DOST COLLEGE **VISAYAS STATE UNIVERSITY** 2014 2019 N/A 2019 AGRICULTURAL ENGINEERING **SCHOLAR** GRADUATE STUDIES N/A N/A N/A N/A N/A N/A N/A SIGNATURE DATE 10/04/21

		1	1					LICENSE (if a	applicable)
27. CAREER SERVICE/ RA 1980 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE			RATING DATE OF EXAMINATION / CONFERMENT PLACE OF EXAMIN			ATION / CONFERMENT		NUMBER	Date of Validity
LICENSE AGRICULTURAL AND BIOSYSTEMS ENGINEER			81.27%	10/30-31/2019	IEC CONVENTION CENTER-CEBU			18-1546644	03/09/2022
		-							
									-
									-
			(Co	ntinue on separate sheet if	necessarv)				
	EXPERIENCE								
28. INCLU	JSIVE DATES				e indicated in the attac		SALARY/ JOB/ PAY	ret,	GOVT
(m	m/dd/yyyy)	POSITION T (Write in full/Do not			ICY / OFFICE / COMPANY o not abbreviate)	MONTHLY SALARY	GRADE (if applicable)& STEP (Format "00-0")/	STATUS OF APPOINTMENT	SERVICE (Y/ N)
From	То						INCREMENT		
N/A	N/A	N/A			N/A			N/A	N/A
						-			
									-
									-

							1		1
							1		
SIGN	ATURE		C (C	ontinue on separate sheet i	f necessary) DATE		10/0	1/21	
J,G/K		9	THE STATE OF THE S		DAIL			FORM 212 (Revised	2017). Page 2 of

29. NAME & ADDRESS OF C (Write in ful	RGANIZATION	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK N/A		
N/A		From N/A	To N/A				
		-					
				-			
	(Cont	inue on separate s	sheet if necessar	y)			
VII. LEARNING AND DEVELOPMENT (L&D)	INTERVENTIONS/TRAINING PR	OGRAMS ATT	ENDED				
(Start from the most recent L&D/training program and incli	ude only the relevant L&D/training taken for			Chief/Executive/Mar	nagerial positions	;)	
30. TITLE OF LEARNING AND DEVELOPMENT INTO		INCLUSIVE DATES OF ATTENDANCE		NUMBER OF HOURS	Type of LD (Managerial/	CONDUCTED/ SPONSORED BY	
(Write in ful	1)	(mm/di From	d/yyyy) To	-	Supervisory/ Technical/etc)	(Write in full)	
PARTICIPATING THE ANIMAL FARM STRUCTURES	DESIGN FOR COLLEGE OF	02/17/2019	02/22/2019	5	Technical	PSAE-VSU; VSU, VISCA, BAYBAY CITY, LEYTE	
ENGINEERING MONTH: ABEngrs. WEEK ABE TALKS: POSTHARVEST OPERATIONS AND LO	SSES ON THE MAJOR CROPS IN THE	10/29/2018	10/29/2018	3	Technical	PSAE-VSU; VSU, VISCA, BAYBAY CITY, LEYTE	
PHILIPPINES ON THE IOR TRAINING							
ON-THE-JOB TRAINING		06/14/2018	07/27/2018	240	Technical	PHILIPPINE RICE RESEARCH INSTITUTE Department of Science and Technology -	
2-Day Scholar's Formation Program of the Filipino Pa	atriot	04/21/2017	04/22/2017	16	Technical	Science Education Institute	
					-		
	(Cont	inue on separate s	sheet if necessary	y)			
VIII. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES	32. NON-	ACADEMIC DISTIN (Write	CTIONS / RECOG in full)	GNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
COMPUTER LITERATE (MS WORD, MS EXCEL, MS POWERPOINT)		N/A				PHILIPPINE SOCIETY OF AGRICULTURAL AN	
STRUCTURE DESIGN USING AUTOCAD						BIOSYSTEMS ENGINEER	
PHOTOSHOP EDITING							
READING BOOKS					A-market de la companya de la compa		
PLAYING BASKETBALL							
	(Conti	inue on separate s	heet if necessary	0			
SIGNATURE	of the			DA	TE	10/04/21	
	1 40					CS FORM 212 (Revised 2017), Page 3 of	

34.	Are you related by consanguinity or affinity to the appointing chief of bureau or office or to the person who has immediate Bureau or Department where you will be apppointed,				
	a. within the third degree? b. within the fourth degree (for Local Government Unit - Care	☐ YES ☑ NO ☐ YES ☑ NO If YES, give details:			
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 ar any court or tribunal?	☐ YES ☑ NO If YES, give details:			
37.	Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, en (abolition) in the public or private sector?	YES V 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	☐ YES ☑ NO If YES, give details:			
39.	Have you acquired the status of an immigrant or permanent	☐ YES ☑ NO If YES, give details (country):			
40. a. b. c.	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 ☑ NO If YES, please specify: ☐ YES ☑ NO If YES, please specify ID No: ☐ YES ☑ NO If YES, please specify ID No:			
41.	REFERENCES (Person not related by consanguinity or affinity to applicant h	/appointee)			
	NAME	ADDRESS	TEL. NO.		
	DR. BAYRON S. BARREDO	TACLOBAN CITY, LEYTE	0951 511 2133		
	DR. ROBERTO C. GUARTE	VSU, BAYBAY CITY, LEYTE	0999 172 3334		
	ENGR. JESSIE JAMES LAYAN	SAN VICENTE, DANAO BOHOL	0919 612 9545		
42.	I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertine Philippines. I authorize the agency head/authorized represent agree that any misrepresentation made in this document administrative/criminal case/s against me.	nent laws, rules and regulations of the Fentative to verify/validate the contents state	Republic of the		
Go Pl	Sovernment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance	A de la constantina della cons			
\vdash	overnment Issued ID: PRC ID	Hames			
\vdash	//License/Passport No.: 18-1546644	DX)			
Da	ate/Place of Issuance: ORMOC CITY	Date Accomplished	Right Thumbmark		
	SUBSCRIBED AND SWORN to before me this2	ATTY, RYSAIN C. GUINOCOR VSU (sylet Legal Officer	ng his/her validly issued government ID as indicated above.		
		Person Administering Oath			