PERSONAL DATA SHEET

intle with her Tiele and and to to t			EET (PDS) BEFORE ACCOM			1. CS ID No.		(Do not fill up. Fo	or CSC use only	
int legibly. Tick appropriate boxe PERSONAL INFORMATI	s(and use separate sheet if r	ecessary. Indicate I	N/A if not applicable. DO NOT	ABBREVIATE.		1. CS ID NO.		(Do not fill up. Fe	or CSC use only	
2. SURNAME	FLORES					Section 1				
FIRST NAME	MARIEVIC						NAME EXTENSION (JR	, SR)	N/A	
MIDDLE NAME	SIEGA									
DATE OF BIRTH	10/22/92		16. CITIZENSHIP				In. al Citianachia			
(mm/dd/yyyy)	10/22/32		10, OFFIZEINGFIII		✓ Filipi	no L	Dual Citizenship by birth	by naturaliz	zation	
4. PLACE OF BIRTH	PAKU, BONTOC, SOUTHE	RN LEYTE	If holder of dual citize	enship,			Pls. indicate co	ountry:		
5. SEX	Male	✓ Female	please indicate the o	details.	Philippine	ec .			-	
J. SEA	✓ Single	Married	17. RESIDENTIAL ADDRESS	A STATE OF THE STA	rimppine	.5			6.00	
6 CIVIL STATUS	Widowed	Separated	17, RESIDENTIAL ADDRESS	House/Block/Lot No.				Street		
	Other/s:	-					G	UADALUPE		
			SEC TYDICAL STOCKERS		odivision/Village			Barangay LEYTE	50.	
7. HEIGHT (m)	1.55		dian an a file of single		ty/Municipality			Province		
8. WEIGHT (kg)	45	12 apullad	ZIP CODE	6521	2666	10				
). BLOOD TYPE	AB+	Carlei	18. PERMANENT ADDRESS							
A Istopanno	AM Leones	NAME OF THE OWNER OWNER OF THE OWNER O	(nobsoph3		se/Block/Lot No	0.	141	Street	11 8 21 5	
0. GSIS ID NO.	2005056946		Brate Bryggereite Book awas bas etc.	-	odivision/Village	9		Barangay	THE REAL PROPERTY.	
Communication (State of the state	100000	DORLICO SOMAL TRIA		BONTO		56	LEYTE	3/4/2018	
1. PAG-IBIG ID NO.	ON THE PROCESS		INDICTUDE SACRUE	Cit	ty/Municipality			Province		
2. PHILHEALTH NO.	132522455796		ZIP CODE	6604						
3. SSS NO.	N/A		19. TELEPHONE NO.	N/A						
4. TIN NO.	445-450-298		20. MOBILE NO.	9552190573	3					
5. AGENCY EMPLOYEE NO.	V-00970		21. E-MAIL ADDRESS (if any)	Floresmar	ievic@gr	nail.com				
. FAMILY BACKGROUN	D									
2. SPOUSE'S SURNAME	N/A			23. NAME of CH	ILDREN (Write	e full name and	list all)	DATE OF BIRT	H (mm/dd/vvvv	
FIRST NAME	N/A		NAME EXTENSION (JR., SR)	N/A				N/A		
MIDDLE NAME	N/A		N/A					-		
OCCUPATION	N/A									
EMPLOYER/BUSINESS NAME	N/A									
BUSINESS ADDRESS	N/A									
TELEPHONE NO.	N/A									
4. FATHER'S SURNAME	FLORES		The Extension of the Con-			-				
FIRST NAME	REYNALDO		NAME EXTENSION (JR., SR)							
MIDDLE NAME	CAPILITAN									
5. MOTHER'S MAIDEN NAME	OUTO A									
SURNAME FIRST NAME	SIEGA GERTRUDES									
MIDDLE NAME	MAYMAY				(C	ontinue on se	parate sheet if neces	sary)		
II. EDUCATIONAL BACK	GROUND									
									SCHOLARSHIP	
e6.	NAME OF SCH (Write in fu		BASIC EDUCATION/DEGI (Write in full)		PERIOD OF	ATTENDANCE	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	ACADEMIC HONORS	
						То	(ii not graduated)		RECEIVED	
ELEMENTARY	PAKU ELEMENTAR	YSCHOOL	PRIMARY EDUCA	TION	1990	2005	N/A	2005	N/A	
SECONDARY	PAKU NATIONAL HI	SH SCHOOL	HIGH SCHOOL		2005	2009	N/A	2009	N/A	
VOCATIONAL /	N/A		N/A	_	N/A	N/A	N/A	N/A	N/A	
TRADE COURSE	NIA		N/A	-	NIA	N/A	NA	IVA	NIA	
	SOUTHERN LEYTE STATE	UNIVERSITY-CTE	BACHELOR OF SECONDA	RY EDUCATION	2009	2013	N/A	2013	N/A	
COLLEGE										

	RVICE ELIGIBIL								
7. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER			RATING	DATE OF STANDARD CONTENTS OF S				LICENSE (if a	pplicable) Date of
SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE		(If Applicable)	1 EXAMPLATION / I		PLACE OF EXAMINATION / CONFERMENT				
Licensure Examnination for Teachers (LET)		77.89%			ban City		1279794	10/22/20	
					38 E SCHOOL SERVE	42 - 44 2 3	Large and		
	- V (1	er and d	121	4			\$05-5.01 43-70E		
					WAY STEEL		ewige do an		
	XPERIENCE	Start from your recer		ntinue on separate sheet if n of duties should be	necessary) indicated in the attach	ed Work Exp	erience sheet.		
INCLU:	SIVE DATES n/dd/yyyy)	POSITION T (Write in full/Do not	ITLE	DEPARTMENT / AGEN	CY / OFFICE / COMPANY o not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format *00-0*)/ INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVICI (Y/ N)
From 1/8/2016	PRESENT	INSTRUCT	ORI		versity (College of ation)	23000.00	N/A	REGULAR-	Y
3/11/2014	05/18/2016	PART-TIME INS	TRUCTOR	Visayas State Un	versity (College of ation)	120.00/hour	N/A	TEMPORARY Contractual	Y
6/24/2014	10/18/2014	VISITING INST	RUCTOR	SOUTHERN LEYTE (Arts and Lette	STATE UNIVERSITY ors Department)	110.00/hour	N/A	Contractual	Υ
3/6/2013	03/28/2014	SECONDARY T	EACHER	SAINT JAMES CO	LLEGE OF PADRE	4700.00	N/A	Contractual	Υ
							X.40		
				NW STORY					
			1447	38	90.0		MESTER NO.		
			9_1111111111111111111111111111111111111	10.3 No. 10.0 No. 10.		W-4	Cleural I		
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\$116	200		ed Ross	METRALMO NO ROMES	NUMBER OF STREET	Collection of the last	and the same		
	and the second second	AND PROGRAMMED TO STREET							
			Allors	ntinue on separate sheet if	necessary)				

VI. VOLUNTARY WORK OR INVOLVEMENT	IN CIVIC / N GOVERNMENT	/ PEOPLE / VO	DLUNTARY O	RGANIZATIOI			
29. NAME & ADDRESS OF ORGANIZATION (Write in full)		INCLUSIVE DATES (mm/dd/yyyy) From To		NUMBER OF HOURS	POSITION / NATURE OF WORK		
N/A		From	10				
	237						
						- Ingles and the first of the first	
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r with and							
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						The Englishment A	
	Allano Jeva						
AND DEVELOPMENT I AD	SECTION AND DESCRIPTION OF THE PERSON NAMED IN COLUMN 2 IS NOT THE OWNER.	ntinue on separate s	The second second				
III. LEARNING AND DEVELOPMENT (L&D Start from the most recent L&D training program and incl				ief/Executive/Manac	rerial positions)		
	Black Byrone Williams	INCLUSIVE			Type of LD	Late of the ratio of conception of the little of	
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)			ATTENDANCE (mm/dd/yyyy)		(Managerial/ Supervisory/	CONDUCTED/ SPONSORED BY (Write in full)	
	And the state of t	From	То		Technical/etc)		
SEMINAR-WORKSHOP ON COMMUNITY EN	TRY AND NEEDS ASSESSMENT		CONTRACTOR	DONOR E A	ESTABLE LIBERS	VICAVAC CTATE INDEPORT	
TRAINING - WORKSHOP ON PRESENT		1/12/2019	1/12/2019	8.0	TECHNICAL	VISAYAS STATE UNIVERSITY VISAYAS STATE UNIVERSITY	
SEMNAR-WORKSHOP ON PREPARING LOGFF	RAME FOR EFFECTIVE RESEARCH	10/12/2018	10/23/2018	8.0	TECHNICAL	VISAYAS STATE UNIVERSITY	
PROPOSAL RADIO FOR DEVELOPM							
WRITESHOP ON OUTCOME-BASED EDU		8/6/2018 7/26/2018	8/6/2018 7/26/2018	8.0	TECHNICAL	VISAYAS STATE UNIVERSITY VISAYAS STATE UNIVERSITY COLLEGE O	
TRAINING WORKSHOP ON INNOVATIV	E LEARNING STRATEGIES	5/15/2018	5/16/2018	16.0	TECHNICAL	VISAYAS STATE UNIVERSITY COLLEGE O	
ECHO SEMINAR-WORKSHOP ON 1ST ASSOCIATION OF E (ASSERT) NATIONAL CONVENTION ON OU		4/7/2018	4/7/2018	8.0	TECHNICAL	VISAYAS STATE UNIVERSITY	
GRADUATE SCHOOL 2ND MULTIDICIPLIN	03/24/2018	03/24/2018	8.0	TECHNICAL	SOUTHERN LEYTE STATE UNIVERSITY-CTE		
FILIPINO REVIEWER IN PREPARATION FOR HIGH	2/24/2018	3/3/2018	8.0	TECHNICAL	ViSCA Foundation Elementary School		
ORIENTATION AMONG FACULTY MEMBERS ON	ACADEMIC FREEDOM AND PUBLIC						
ACCOUNTABIL	ITY AS	9/17/2017	9/17/2017	8.0	TECHNICAL	VISAYAS STATE UNIVERSITY	
WORKSHOP IN PREPARATION F	OR LEVEL I AACCUP	6/10/2017	6/10/2017	8.0	TECHNICAL	VISAYAS STATE UNIVERSITY	
ORIENTATION SEMINAR AND RETO	OLING OF CE FACULTY	4/9/2017	7/19/2016	8.0	TECHNICAL	VISAYAS STATE UNIVERSITY	
SEMINAR WORKSHOP ON OBE SYLLABUS	CONTRACTOR OF THE	03/14/2015	03/15/2015	16.0	TECHNICAL	VISAYAS STATE UNIVERSITY	
PREPARATION OF INSTRUCTIONAL MATERIAL AND COMPUTER AIDED INSTRUCTION			11/27/15	8.0	TECHNICAL	VISAYAS STATE UNIVERSITY	
CONSTRUCTION OF TABLE OF SPECIFICATION AND FORMULATION OF LET-LIKE QUESTIONS			11/26/2015	8.0	TECHNICAL	VISAYAS STATE UNIVERSITY DEPARTMENT OF TEACHER EDUCATION	
LICENSURE EXAMINATION FOR TEACHERS (LET) REVIEW			9/9/2015	8.0	TECHNICAL	VISAYAS STATE UNIVERSITY	
SEMINAR/WORKSHOP ON I	DATA ENCODER	12/2/2014	02/14/2014	24.0	TECHNICAL	SAINT JAMES COLLEGE OF PADRE BURGOS	
and the processing of the gall within the	to be a first of the first of t	ntinue on separate :	sheet If necessary		Rational Value	SOUTHERN LEYTE INC.	
VIII. OTHER INFORMATION				ESSINE SUC		and leave the same County (Planeters) 4 th of the same leave	
	T ao NO	N-ACADEMIC DISTI	NCTIONS / RECO	GNITION		MEMBERSHIP IN ASSOCIATION/ORGANIZATION	
31. SPECIAL SKILLS and HOBBIES	32.	(Writ	e in full)			33. (Write in full)	
COMPUTER SKILLS		N/A				VSU FACULTY ASSOCIATION (VSUFA)	
WRITING STORIES & POEM						SPEECH COMMUNICATION ORGANIZATION O THE PHILIPPINES (SCOP)	
SINGING & DANCING						PHILIPPINE ASSOCIATION FOR TEACHERS AN EDUCATORS, INC. (PAFTE)	
EFFECTIVE COMMUNICATION SKILLS	iga Jo					ga militira de esperante de la compansa de la compa	
TEACHING SKILLS		ibno V	10 pt 27 pt. 25 pt. 20			THE RESERVE THE CONTROL OF THE PARTY OF THE	
	SOOR	intinue on separate	sheet if necessary	2 TA		I	
		9331730	Marine .	1 1 74	M (0, 0040		
SIGNATURE	Stone		DATE		May 10, 2019	CS FORM 212 (Revised 2017), Page 3 of	

chief of bureau or office or to the person who have immedia	The same control of the control of t	The same and the same and the same and
Bureau or Department where you will be apppointed.		
a. within the third degree?	YES	✓ NO
b, within the fourth degree (for Local Government Unit - C	areer Employees)?	□ NO
		If YES, give details:
	☐ YES	✓ NO
35. a. Have you ever been found guilty of any administrative of		
	☐ YES	✓ NO
		If YES, give details:
b. Have you been criminally charged before any court?		If YES, give details:
	☐ YES	NO Date Filed:
	L IES	Status of Case/s:
Have you ever been convicted of any crime or violation of	any law decree ordinance or regulation b	NV
36. any court or tribunal?	YES	" □ NO
Discount of a section of the contract of the c	▼ 113	
		If YES, give details:
37. Have you ever been separated from the service in any of t	he following modes: resignation	
retirement, dropped from the rolls, dismissal, termination,		ut .
(abolition) in the public or private sector?		If YES, give details:
The second secon	10 10 10 10 10 10 10 10 10 10 10 10 10 1	
	☐ YES	✓ NO
38. a. Have you ever been a candidate in a national or local el	ection held within the last year (except	
Barangay election)?	YES	[] NO
THEREPORE TRATES AVAINA JANUARY D	er who and sections	If YES, give details:
YTR PRIVING TRATE ANALY ALLEY COME.		
b. Have you resigned from the government service during	the three (3) menth period before the last	Source and recording of the entire
election to promote/actively campaign for a national or loc		If YES, give details:
39. Have you acquired the status of an immigrant or permane	<u> </u>	and a second
TO ATTENDA STATE SATEROIS AND THE ATTENDANCE OF THE STATE	YES	✓ NO
STATISMING STATES THE PROTUBE AND STATES	☐ YES	✓ NO
TOPICS (CONTRACT From Relative From Sound	MATTER SPECIAL PROPERTY TO THE	If YES, give details (country):
		- Lo, give detaile (country).
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) M	agna Carta for Disabled Persons (RA	TIMESTALE
7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972	?), please answer the following items: YES	✓ NO
Are you a member of any indigenous group?		ISVEO plane and if a
b. Are you a person with disability?		If YES, please specify:
D TECHNICAL VSAFASSIATE UNITSONY		If YES, please specify ID No:
c. Are you a solo parent?		
Y TREESTINGSTATE EAYABY 1 25 BRIDSE 1 3	UCTION 1979 1379 B	If YES, please specify ID No:
41. REFERENCES (Person not related by consanguinity or affinity to applicant		AS POLYCYTA & SURGE ON MOLEY.
DR. BAYRON S. BARREDO	ADDRESS	TEL. NO. 563-7527
DR. NORLYN L. BORONG	VISCA, BAYBAY CITY, LEYTE MATALOM, LEYTE	9124056646
DR. GINALYN B. CARBONILLA	TOMAS OPPUS, SOUTHERN LEYTE	9178837622
42. I declare under oath that I have personally accomplished		
statement pursuant to the provisions of pertinent laws,		
authorize the agency head / authorized representative to		
misrepresentation made in this document and its attach	ments shall cause the filing of administr	(Jlov
against me.		MARIEVICO S. FLORES
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)	AIM	COMPUTER SKILLS
PLEASE INDICATE ID Number and Date of Issuance		
Government Issued ID: PRC ID		
ID/License/Passport No.: 1279794	box)	
Date/Place of Issuance: Tacloban City	Date Accomplished	Right Thumbmark
SUBSCRIBED AND SWORN to before me this	, affiant exhibit	ting his/her validly issued government ID as indicated above.
	/ Man	
	ATTY, RYSAT C. GUINOCOL	}
Line and Control of the Control of t	VSULEGA OFFICER	
The state of the s	Person Administering Oa	un.