CS Form No. 212 Revised 2017	PERSO	NAL DAT	A SH	IEET	Control of the	geografia de la companya de la comp		
concerned. READ THE ATTACHED GUIDE	ntion made in the Personal Data Sheet and the	EET (PDS) BEFORE ACCO	MPLISHING TH	HE PDS FORI	1.	criminal case/s a		
Print legibly. Tick appropriate boxes  I. PERSONAL INFORMATION	( ) and use separate sheet if necessary. Indicate N	N/A if not applicable. DO NOT A	ABBREVIATE.		1. CS ID No.		(Do not fill up. F	or CSC use only)
2. SURNAME	BESAVILLA							
FIRST NAME	AIZA	NAME EXTENSION (JR., SR)						
MIDDLE NAME	BANDALAN						17/71	
DATE OF BIRTH     (mm/dd/yyyy)	8/27/1995	16. CITIZENSHIP	✓ Filipino		0 🗆	☐ Dual Citizenship ☐ by birth ☐ by naturalization		
4. PLACE OF BIRTH	BAYBAY,LEYTE	If holder of dual citiz			Pls. indicate country:		Zadon	
5. SEX	☐ Male ☑ Female	please indicate the o	etails.			-		
6 CIVIL STATUS	☐ Single ☐ Married ☐ Widowed ☐ Separated ☐ Other/s:	17. RESIDENTIAL ADDRESS	House/Block/Lot No.		Street SAN ISIDRO Barangay			
7. HEIGHT (m)	1.5m		Subdivision/Village BAYBAY			LEYTE		
8. WEIGHT (kg)	67kg	ZIP CODE	6521	City/Municipality			Province	
9. BLOOD TYPE	0+	18. PERMANENT ADDRESS		S. 14 1N			0,	
10. GSIS ID NO.	N/A	B(K) 2 **		use/Block/Lot No		700	SAN ISIDRO	
11. PAG-IBIG ID NO.	1212-0373-9452	450 374354C DUAM	250114141	ubdivision/Village BAYBAY City/Municipality		217 100	Barangay  LEYTE  Province	
12. PHILHEALTH NO.	12-025640995-5	ZIP CODE	- dan Alas	6521		P.O. 2103	Province	981
13. SSS NO.	06-3995838-7 19. TELEPHONE NO.		N/A					
14. TIN NO.	342-433-725-000	09556130793						
15. AGENCY EMPLOYEE NO.	/-	21. E-MAIL ADDRESS (if any)		<u>a</u>	izabesa	villa@gmail.co	<u>om</u>	
II. FAMILY BACKGROUND								
22. SPOUSE'S SURNAME	BESAVILLA	NAME EXTENSION (JR., SR)	23. NAME of CHILDREN (Write full name and list all)  ZIANNA GABRIELLE B. BESAVILLA				DATE OF BIRTH (mm/dd/yyyy)	
FIRST NAME	NEX U/S		ZOE DANIELLE B. BESAVILLA			7/7/2019		
MIDDLE NAME		DUBLIN		ZOE DANIELLE B. BESAVILLA 7/2/20				2022
OCCUPATION	SCIENCE RESEARCH ASSISTANT							
EMPLOYER/BUSINESS NAME	VISAYAS STATE UNIV		-					
BUSINESS ADDRESS	VISCA,BAYBAY CITY,	LEYIE	-					
TELEPHONE NO.			-					
24. FATHER'S SURNAME	BANDALAN	NAME EXTENSION (JR., SR)						
FIRST NAME	MEDEL	N/A						
MIDDLE NAME	PEREZ							
25. MOTHER'S MAIDEN NAME								
SURNAME	BULAWAN							
FIRST NAME	IMELDA							
MIDDLE NAME	CUATON			(Co	ntinue on se	parate sheet if neces	sary)	
III. EDUCATIONAL BACK	GROUND							
26. LEVEL	NAME OF SCHOOL BASIC EDUCATION/DE (Write in full) (Write in f			PERIOD OF A	TTENDANCE	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
ELEMENTARY	CANDADAM ELEMENTARY SCHOOL	N/A		2002	2008	NA	2008	SALUTATORIAN
SECONDARY	VSU-LHS	1.16		2008	2012	11/6	2012	NA

VOCATIONAL / TRADE COURSE NA MA NA N/A NA UNIVERSITY OF CEBU-BANILAD 2017 COLLEGE 2014 2017 GRADUATE STUDIES 5(29); 3 CS FORM 212 (Revised 2017), Page 1 of 4 SIGNATURE DATE

	SERVICE ELIGIBILITY  REER SERVICE/ RA 1080 (BOARD/ BAR) UNDER PATING DATE OF								
SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE  RATING (If Applicable)			EXAMINATION / CONFERMENT	ION / CONFEI	RMENT	NUMBER	Date of Validity		
	CSC Sub-pr	ofessional	81.95	3/13/2022	LEYTE NORMAL UNIVERSITY, TACLOBAN CITY				
			(Coi	ntinue on separate she	et if necessary)				
	EXPERIENCE		nt work) Description	on of duties should	d be indicated in the attach	ed Work E	xperience she	el.	
include private employment. Start from your recent work) Descr 8. INCLUSIVE DATES (mm/dd/yyyy) POSITION TITLE (Write in full/IDo not abbreviate)		TTLE	DEPARTMENT / A	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/	STATUS OF APPOINTMENT	GOV'T SERVIC (Y/N)		
From 01/16/2023	PRESENT	ADMIN AIDE III	(CLERK 1)	DATA PROTECTION OFFICE-VISAYAS STATE		14678	INCREMENT U/A	CASUAL	Y
5/2021	1/15/2023	CLERI			NIVERSITY AS STATE UNIVERSITY	12174.80	NK	JOB ORDER	Y
8/2018	12/4/2020	CUSTOMER SALES RI	EPRESENTATIVE	MEAR CONCEPT	S CORP-RICO'SLECHON	12532.00	MA	REG	N
8/2017	7/7/2018	CUSTOMER SALES RI	EPRESENTATIVE	3MRS DIONSOI	N CORP-RICOS LECHON	9516.00	NA	REG	N
			_						
							-		
ner -									
				1					
							-		
							-		
							-		
							-		
				ontinue on separate she					
SIGN	ATURE	Badde	F		DATE		5/29/1	S FORM 212 (Revised 2)	0471 0-

I. VOLUNTARY WORK	OR INVOLVEMENT	IN CIVIC / NON-GOVERNMENT	_		Y ORGANIZATIO	ON/S		
29. NAME & ADDRESS OF ORGANIZATION (Write in full)		INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS		POSITION / NATURE OF WORK		
	1 // 2		From	То				
	NA					77		
				-				
				te sheet if necessa	ry)			
		INTERVENTIONS/TRAINING F le only the relevant L&D/training taken for			Chief/Executive/Mana	gerial positions)		
			INCLUSIVE DATES OF		AND THE STREET	Type of LD		
<ol> <li>TITLE OF LEARNING AND DEVELOPMENT INTER (Write in full)</li> </ol>			ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	( Managerial/ Supervisory/	CONDUCTED/ SPONSORED BY (Write in full)	
			From To			Technical/etc)		
RIENTATION ON DATA PRI ORKSHOP ON REVISITING		OF ODAS AND GSO	04/08/2022	04/08/2022	16.00	Technical Technical	VISAYAS STATE UNIVERSITY VISAYAS STATE UNIVERSITY	
VOMEN INSPIRING WOMEN		ND SHARED DRIVE	03/07/2022	03/07/2022	4.00 8.00	Technical Technical	VISAYAS STATE UNIVERSITY VISAYAS STATE UNIVERSITY	
IRTUAL RE-ORIENTATION WE	BINAR ON EMPLOYEES' DU	TIES AND RESPONSIBILITIES AND GOOD		7/23/2021	8.0	Technical	VISAYAS STATE UNIVERSITY	
USTOMER SERVICES FOR CL SO 900:01 AWARENESS AN	194		7/13/2021	7/13/2021	4.0	Technical	VISAYAS STATE UNIVERSITY	
		F THE PHILIPPINES (NAP) ON VSU						
ECORDS DISPOSITION SC	HEDULE (RDS)		5/17/2021	5/17/2021	4.0	Technical	VISAYAS STATE UNIVERSITY	
IUMAN RESOURCE: KEEPI	NG UP WITH THE MILLEN	INIALS	12/3/2016	12/3/2016	4.0	Technical	UNIVERSITY OF BANILAD-JPMAP	
A Special Control of the Control of								
	ta de la companya de			269		M300 -	16028 17, 20 1	
		Art model to						
				_				
						a to a		
			-					
		1.82						
		The form the			1-1			
				A comment		San San	4 Trust Scott	
					J 70 1 5 5			
				1				
				-				
			ian, in	=		0.00	5 14 - 14 - 14 - 14 - 14 - 14 - 14 - 14	
		(C)	netinua on conse	ate sheet if neces	sand		· · · · · · · · · · · · · · · · · · ·	
VIII. OTHER INFORM	ATION	(60	munde on Separ	ander ii necest				
		NO NO		STINCTIONS / REC	COGNITION		MEMBERSHIP IN ASSOCIATION/ORGANIZATI	
31. SPECIAL SK	(ILLS and HOBBIES	32. (Write in full) 33. (Write in full)						
PROFICIENT	IN MS OFFICE	N/A P/A						
GOOD INTERPE	RSONAL SKILLS							
WATCHING MOVIE	S/COOKING SHOW							
LISTENING	TO MUSIC							
		-				A ne		
		10	Continue on sepa	erate sheet if neces	ssary)			
SIGNI	ATURE	- Andel	_	and the second second second		DATE	5/29/23	
							CS FORM 212 (Revised 2017), Pag	

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?	H (14) (18) (18) H (18) (18) (18) (18) (18) (18) (18) (18)		☑ NO			
b. within the fourth degree (for Local Government Unit - Can		☑ 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 ar by 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 out (abolition) in the public or private sector?		☐ YES ☑ NO If YES, give details:				
A. Have you ever been a candidate in a national or local electron Barangay election)?      b. Have you resigned from the government service during the service d		☐ YES ☑ NO  If YES, give details: ☐ YES ☑ NO				
election to promote/actively campaign for a national or local  39. Have you acquired the status of an immigrant or permanent	If YES, give details:  ☐ YES ☑ NO If YES, give details (country):					
<ul> <li>40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972),</li> <li>a. Are you a member of any indigenous group?</li> <li>b. Are you a person with disability?</li> <li>c. Are you a solo parent?</li> </ul>	☐ 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 applican	nt /appointee)					
NAME	ADDRESS	TEL. NO.				
RYSAN C. GUINOCOR	ViscA, Baybay City, Leyte	09173126264	In -			
NELIA GABRILLO	CEBU CITY	09458550979				
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 repre I agree that any misrepresentation made in this docuadministrative/criminal case/s against me.	ent laws, rules and regulations of the lesentative to verify/validate the contents	Republic of the stated herein.	AIZA B BESAVILLA			
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)  PLEASE INDICATE ID Number and Date of Issuance  Government Issued ID: Resident Mestignation Cord  ID/License/Passport No.: 83708089 - 752 - 3477  Date/Place of Issuance: San Uidar, Beybay City, wyld	)X)	Right Thumbmark				
SUBSCRIBED AND SWORN to before me this 22	, affiant exhibit ATY, RYAN C GUINOCOR VSU Legal Officer  Person Administering Oath		government ID as indicated above.			