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

concerned. READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM. (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. 1. CS ID No. I. PERSONAL INFORMATION 2. SURNAME **ARRIBADO** NAME EXTENSION (JR., SR) N/A FIRST NAME **JEROME** MIDDLE NAME **ORCALES** DATE OF BIRTH 9/24/1992 16. CITIZENSHIP ☑ Filipino □ Dual Citizenship (mm/dd/yyyy) ☑ by birth □ by naturalization 4. PLACE OF BIRTH SAN ISIDRO, LEYTE If holder of dual citizenship, Pls. indicate country: please indicate the details. ☑ Male □ Female 5. SEX Single □ Married 17. RESIDENTIAL ADDRESS 6 CIVIL STATUS House/Block/Lot No □ Widowed □ Separated PANGASUGAN □ Other/s: Subdivision/Village Barangay BAYBAY LEYTE 7. HEIGHT (m) 1.57 City/Municipality Province 8. WEIGHT (kg) 57 ZIP CODE 6521 PUROK 4 18. PERMANENT ADDRESS 9. BLOOD TYPE N/A House/Block/Lot No. CABULIHAN 10. GSIS ID NO 2005872158 Subdivision/Village Barangay ORMOC 11. PAG-IBIG ID NO. I FYTF 121144845454 City/Municipality Province 12. PHILHEALTH NO. 13-2018612384 ZIP CODE 6541 13. SSS NO. 0111-5754908-6 19. TELEPHONE NO N/A 14 TIN NO 20. MOBILE NO. 09306768674 474-147-880 15. AGENCY EMPLOYEE NO N/A 21. E-MAIL ADDRESS (if any) arribadojerome22@gmail.com FAMILY BACKGROUND 22. SPOUSE'S SURNAME N/A 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yvyy) NAME EXTENSION (JR., SR) N/A FIRST NAME N/A N/A N/A MIDDLE NAME N/A N/A OCCUPATION N/A N/A N/A EMPLOYER/BUSINESS NAME N/A N/A N/A **BUSINESS ADDRESS** N/A N/A N/A TELEPHONE NO N/A N/A N/A N/A 24. FATHER'S SURNAME **ARRIBADO** N/A N/A FIRST NAME WIL FREDO N/A N/A MIDDLE NAME MALINAO N/A N/A 25. MOTHER'S MAIDEN NAME N/A N/A SURNAME **ORCALES** N/A N/A FIRST NAME LOLITA N/A MIDDLE NAME VILLA ESTER (Continue on separate sheet if necessary) **EDUCATIONAL BACKGROUND** HIGHEST LEVEL SCHOLARSHIP! PERIOD OF ATTENDANCE YEAR GRADUATED NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE LEVEL UNITS EARNED ACADEMIC HONOR (Write in full) (Write in full) (if not graduated) RECEIVED From To 2ND **ELEMENTARY** T. AVILES ELEMENTARY SCHOOL PRIMARY EDUCATION 2001 2007 GRADUATE 2007 HONORABLE MENTION FAST SECONDARY VALENCIA NATIONAL HIGH SCHOOL HIGH SCHOOL 2007 2011 GRADUATE 2011 ACHIEVER VOCATIONAL / N/A N/A N/A N/A N/A N/A N/A TRADE COURSE VISAYS STATE UNIVERSITY, MAIN IAL ENT., INC. COLLEGE BACHELOR OF ANIMAL SCIENCE 2015 GRADUATE 2011 2015 CAMPUS SCHOLAR DOST-VISAYS STATE UNIVERSITY, MAIN **GRADUATE STUDIES** MS ANIMAL SCIENCE 2018 2020 GRADUATE 2020 ASTHRDP **CAMPUS** SCHOLAR (Continue on separate sheet if necessary) SIGNATURE DATE March 20 2023

V. CIVIL SERVICE 7. CAREER SERVICE		UNDER SPECIAL LAWS/	RATING	DATE OF EVALUATION				LICENSE (if ap	plicable)
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE			(If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT		ERMENT	NUMBER	Date of Validity
LICENSURE EXAMINATION FOR AGRICULTURISTS			75.0	10/19-21/2016 TACLO		OBAN CITY		0023926	9/24/202
LTO DRIVER'S LICENSE			TANATT I	11/2019	BAYBAY CITY		H12-19-003014	9/24/202	
			(Continue	on separate sheet if necessary	)				
. WORK EXPERII nclude private emp		your recent work) D	escription (	of duties should be indica	ated in the attach	ed Work Ex	perience	sheet.	
	NATES (mm/dd/yyyy)	POSITION TITE (Write in full/Do not a	TLE	DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)		MONTHLY SALARY	JOB/ PAY GRADE (if applicable)& STEP (Format "00-	STATUS OF APPOINTMENT	GOVT SERVICE (Y/ N)
01/2023	PRESENT	INSTRUCTO	DR 1	ECOLOGICAL FARM AND RESOURCE MANAGEMENT INSTITUTE		P29,165	SG12	PERMANENT REGULAR	YES
01/2022	12/2022	INSTRUCTO	DR 1	ECOLOGICAL FARM AND RESOURCE MANAGEMENT INSTITUTE		P27,609	SG 12	TEMPORARY REGULAR	YES
03/2021	12/2021	INSTRUCTO	DR 1	MANAGEMENT IN	NSTITUTE	P26,052	SG 12	TEMPORARY REGULAR	YES
08/2020	02/2021	PART-TIME INST	RUCTOR	DEPARTMENT OF ANIMAL SCIENCE, VISAYAS STATE UNIVERSITY, MAIN		P24,426		CONTRACTUAL	YES
07/2018	08/2018	TRAINING ASS	ISTANT	AGRICULTURAL TRAINING INSTITUTE REGION 8 INAKI A. LARRAZABAL ENTERPRISES,		P16,000		CONTRACTUAL	YES
04/2015	02/2018	ADMINISTRATIV		INCORPORA	ATED	P9,400		REGULAR	NO
216-210-72			3677123			V 1 1 1 1 1 1			
			307.08.	97 - 7 - 77 - 188					
			(Continu	e on separate sheet if necessar	7)				
SIGN	ATURE		q	Aud Just	DATE		March 2	0, 2023	

		RY ORGANIZ	11701170				
9. NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)  From To		NUMBER OF HOURS		POSITION / NATURE OF WORK		
A	N/A	N/A	N/A		N/A		
President in the second							
		- 30	i i	No. 1 Market	Fight a by All Salt Teles by Byself at		
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100 C37 V C37 V				3-00-950	SCORES HAVE AS CONTRACTOR		
	ue on separate sheet						
I. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRA	CONTRACTOR OF STREET						
TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)  From To		NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)		
RAINING-WORKSHOP ON RISK ASSESSMENT	11/24/2022	11/25/2022	16		VISAYAS STATE UNIVERSITY		
ST ANIMAL WELFARE TRAINING	11/23/2022	11/23/2022	8	TECHNICAL	COLLEGE OF VETERINARY MEDICINE VISAYAS STATE UNIVERSITY		
RAINING-WORKSHOP PROPOSAL: IDENTIFICATION OF BUSINESS OPPORTUNITIES ND FEASIBILITY STUDY PREPARATION FOR THE IGP MANAGERS	7/18/2022	7/20/2022	24		VISAYAS STATE UNIVERSITY		
RD JOINT VICARP AND RRDEN REGIONAL RDEI SYMPOSIUM (TENSION IN THE NEW NORMAL	11/17/2021 9/29/2021	11/18/2021 9/29/2021	16 3.0	TECHNICAL TECHNICAL	VISAYAS STATE UNIVERSITY CENTRAL LUZON STATE UNIVERSITY		
ANAGING GENETICALLY SUPERIOR DUCK LINE: ITIK PINAS	4/24//2021	4/24/2021	2.0	TECHNICAL	CENTRAL LUZON STATE UNIVERSITY		
MART FARMING: THE FUTURE OF AGRICULTURE PRODUCTION VESTOCK BIOTECHNOLOGY CENTER: RESEARCH DEVELOPMENT AND EXTENSION GENDA - TECHNICAL CAUCUS WEBINAR SERIES (PART IV)	3/24/2021 1/18/2021	3/24/2021 1/18/2021	3.0	TECHNICAL	CENTRAL LUZON STATE UNIVERSITY DEPARTMENT OF AGRICULTURE-PHILIPPIN CARABAO CENTER AND LIVESTOCK		
RANSCENDING BOUNDARIES TOWARDS FOOD SECURITY AND SAFETY THROUGH CIENCE AND TECHNOLOGY INNOVATIONS IN ANIMAL PRODUCTION (DAY 1 & 2)	11/11/2020	11/18/2020	6.0	TECHNICAL	PHILIPPINE ASSOCIATION OF AGRICULTURISTS, INC.		
FRICAN SWINE FEVER UPDATE (PART 2)	11/17/2020	11/17/2020	3.0	TECHNICAL	NATIONAL ACADEMY OF SCIENCE AND TECHNOLOGY		
HILIPPINE SOCIETY OF ANIMAL NUTRITIONISTS VIRTUAL ANIMAL NUTRITION ONFERENCE (PART 4)	10/28/2020	10/28/2020	3.0	TECHNICAL	THE PHILIPPINE SOCIETY OF ANIMAL NUTRITIONISTS		
HILIPPINE SOCIETY OF ANIMAL NUTRITIONISTS VIRTUAL ANIMAL NUTRITION ONFERENCE (PART 3)	10/21/2020	11/21/2020	3.0	TECHNICAL	THE PHILIPPINE SOCIETY OF ANIMAL NUTRITIONISTS		
HICKEN BEHAVIOUR & WELFARE	10/18/2020	10/18/2020	24.0	TECHNICAL	COURSERA (ONLINE COURSE)		
HILIPPINE SOCIETY OF ANIMAL NUTRITIONISTS VIRTUAL ANIMAL NUTRITION ONFERENCE (PART 2)	10/14/2020	10/14/2020	3.0	TECHNICAL	THE PHILIPPINE SOCIETY OF ANIMAL NUTRITIONISTS		
ONFERENCE (PART 2) SIAN ASSOCIATION OF AGRICULTURAL COLLEGES & UNIVERSITIES 22ND BIENNIAL ONFERENCE & GENERAL ASSEMBLY	10/16/2028	10/18/2020	18.0	TECHNICAL	ASIAN ASSOCIATION OF AGRICULTURAL COLLEGES & UNIVERSITIES (AAACU) &		
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(Confir	nue on separate she	et if necessary)					
VIII. OTHER INFORMATION	CADEMIO DISTRICT	IONS (DECOCALITY	W		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATIO		
31. SPECIAL SKILLS and HOBBIES 32. NON-AI	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)						
N/A	N/A						
amount seasoned his from a rearry due to the technical proporties have							
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# If confi	inue on separate she	et if necessary)					
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34.	Are you related by consanguinity or affinity to the appointing chief of bureau or office or to the person who has immediate	λ ,	`			
	Bureau or Department where you will be apppointed,					
	a. within the third degree?	□ YES □ NO				
	b. within the fourth degree (for Local Government Unit - Care	□ 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:			
		A SECTION OF THE SECT	Status of Case/s:			
36.		□ YES ☑ NO				
	any court or tribunal?		If YES, give details:			
37.	Have you ever been separated from the service in any of the		□ YES ☑ NO			
	dropped from the rolls, dismissal, termination, end of term, fi	inished contract or phased out (abolition)	If YES, give details:			
	in the public or private sector?	All - bald within the back year (average				
38.	a. Have you ever been a candidate in a national or local elements are also as a second	ction held within the last year (except	☐ YES ☑ NO			
		THE STATE OF THE S	If YES, give details:			
	b. Have you resigned from the government service during the	□ YES □ NO				
	election to promote/actively campaign for a national or local		If YES, give details:			
39.	Have you acquired the status of an immigrant or permanent	resident of another country?	□ YES ☑ NO			
			If YES, give details (country):			
		Control of the second of the s				
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag					
	and (c) Solo Parents Welfare Act of 2000 (RA 8972), please	answer the following items:				
a.	Are you a member of any indigenous group?		☐ YES ☐ NO If YES, please specify:			
b.	Are you a person with disability?	□ YES ☑ NO				
			If YES, please specify ID No:			
C.	Are you a solo parent?		□ YES ☑ NO			
			If YES, please specify ID No:			
41.	REFERENCES (Person not related by consanguinity or affinity to applicant	/appointee)				
	NAME	ADDRESS	TEL. NO.			
	DR. JULIUS V. ABELA	DEPARTMENT OF ANIMAL SCIENCE, VSU	9208553990	-		
	IÑIGO DLS LARRAZABAL	ORMOC CITY	9173061264			
-						
	DR. VICTOR B. ASIO	CAFS, VSU	9176341438			
42.	I declare under oath that I have personally accomplishe					
	complete statement pursuant to the provisions of pertir Philippines. I authorize the agency head/authorized represe			Ш		
	agree that any misrepresentation made in this doct					
	administrative/criminal case/s against me.		No. 1 May 1			
F				-		
	Covernment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)  PLEASE INDICATE ID Number and Date of Issuance					
۱r	Sovernment Issued ID: PRC License	0. 11)				
lŀ		Chi-July				
	D/License/Passport No.: 0023926	ox)				
	ate/Place of Issuance: June 7, 2022/Ormoc City	Right Thumbmark				
F		Date Accomplished				
	SUBSCRIBED AND SWORN to before me this	, affiant exhibiting	ng his/her validly issued government ID as indicated above.			
-		2/1/				
1	Man					
	ATTY, RYSA/C, GUINCCOR					
	888	A20 OTA 12851 Augus				
		Person Administering Oat	1			