CS Form No. 212

SIGNATURE

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. 1. CS ID No. (Do not fill up. For CSC use only) Print legibly. Tick appropriate boxes ( ) a use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. CALIPAYAN 2. SURNAME NAME EXTENSION (JR., SR) FIRST NAME RUEL MIDDLE NAME **BAGARINAO** 3. DATE OF BIRTH 05/04/1978 16. CITIZENSHIP ✓ Filipino Dual Citizenship (mm/dd/yyyy) by birth by naturalization BAYBAY CITY, LEYTE 4. PLACE OF BIRTH If holder of dual citizenship, Pls. indicate country: please indicate the details. 5 SFX ✓ Male ☐ Female ☐ Single ✓ Married 17. RESIDENTIAL ADDRESS 6 CIVIL STATUS House/Block/Lot No. Street Widowed ☐ Separated Marcos Other/s: Subdivision/Village Barangay BAYABAY LEYTE 5'6 7. HEIGHT (m) City/Municipality Province 75-kg 8. WEIGHT (kg) 7IP CODE 18. PERMANENT ADDRESS 9. BLOOD TYPE "0" House/Block/Lot No. Street Marcos 10. GSIS ID NO None Subdivision/Village Barangay BAYBAY LEYTE 11 PAG-IBIG ID NO None 121010588556 City/Municipality Province 23-002249767-2 ZIP CODE 6521-A 12. PHILHEALTH NO 13. SSS NO. 0111-8816898 19. TELEPHONE NO. None 14. TIN NO. 928-637-232-000 09999063362 20 MOBILE NO 15. AGENCY EMPLOYEE NO 21. E-MAIL ADDRESS (if any) ruel.calipayan@vsu.edu.ph AMILY BACKGROUND 23. NAME of CHILDREN (Write full name and list all) 22. SPOUSE'S SURNAME **CALIPAYAN** DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) Caristy Marie Calipayan JOSEPHINE FIRST NAME 05/03/2004 CASCAS Kirstien Liann Calipayan 10/10/2010 MIDDLE NAME OCCUPATION **House Wife** EMPLOYER/BUSINESS NAME N/A **BUSINESS ADDRESS** NIA TELEPHONE NO. N/A FATHER'S SURNAME **CALIPAYAN** NAME EXTENSION (JR., SR) RICARDO FIRST NAME MIDDLE NAME 25 MOTHER'S MAIDEN NAME **BAGARINAO** SURNAME **EVELYN** FIRST NAME POSAS MIDDLE NAME (Continue on separate sheet if necessary) EDUCATIONAL BACKGROUND SCHOLARSHIP/ HIGHEST LEVEL/ PERIOD OF ATTENDANCE NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE YEAR ACADEMIC LEVEL UNITS FARNED GRADUATED HONORS (Write in full) (Write in full) (if not graduated) RECEIVED From To Marcos, Elem. School Graduated **ELEMENTARY** 1991 Graduated 1991 none Bunga, National High School Graduated Graduated SECONDARY 1991 1994 1994 none VOCATIONAL / N/A N/A N/A N/A N/A N/A N/A TRADE COURSE Palompon Institute Technology ( BSMT) Graduated 1998 COLLEGE Graduated none GRADUATE STUDIES N/A N/A

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27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE RATING			DATE OF EXAMINATION / PLACE OF EXAMINA		ATION / CONFERMENT		LICENSE (if applicable)		
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V. WORK	EXPERIENCE		(Co	ntinue on separate sheet if	rrocossary)				
Company or design to the contract of	representation of the second contract of the second	Start from your recent	work) Description	of duties should be i	ndicated in the attached	d Work Expe	rience sheet.		
28. INCLUSIVE DATES (mm/dd/yyyy)		POSITION TITLE (Write in full/Do not abbreviate)		DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)		MONTHLY SALARY	GRADE (if applicable)& STEP (Format *00-0*)/	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/N)
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08/16/06	07/01/2008	Maintenar		California Energy		10.			no
09/01/2009	03/16/2011	Burner Ope Maintenance Elsour			Toledo Cebu City	2007			no
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	-681								

VI. VOLUNTARY WÜRK OR INVOLVEMEN	T IN CIVIC / NON-GOVERNMENT	/PEOPLE/V	OLUNTARY C	RGANIZATION	/S	
29. NAME & ADDRESS OF ORGANIZATION (Write in full)			INCLUSIVE DATES (mm/dd/yyyy) From To		POSITION / NATURE OF WORK	
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VII. LEARNING AND DEVELOPMENT (L&I						
(Start from the most recent L&D/training program and incl	ude only the relevant L&D training taken for th	e last five (5) years for Division Chief/Executive/Manager INCLUSIVE DATES OF				
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)			ATTENDANCE (mm/dd/yyyy)		Type of LD ( Managerial/ Supervisory/	CONDUCTED/ SPONSORED BY (Write in full)
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VIII. OTHER INFORMATION						
31. SPECIAL SKILLS and HOBBIES	32. NO	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)			33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
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		of Legal Officer	WY UN			55 . Oldin 212 (1.071566 2017), 1 age 5 01

34.	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?	F ( 10	YES NO			
	b. within the fourth degree (for Local Government Unit - Card	reer Employees)?	☐ YES ☑ NC  If YES, give details:			
35.	a. Have you ever been found guilty of any administrative offe	fense?	☐ YES ☑ NO			
			If YES, give details:	¥		
	b. Have you been criminally charged before any court?		☐ YES ☑ N	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 ☑ N If YES, give details:	NO :			
	dropped from the rolls, dismissal, termination, end of term, fin the public or private sector?	Have you ever been separated from the service in any of the following modes: resignation, retirement, dropped from the rolls, dismissal, termination, end of term, finished contract or phased out (abolition) in the public or private sector?				
38.	a. Have you ever been a candidate in a national or local election)?	☐ YES ☑ If YES, give details:	NO Verification of the Control of th			
	b. Have you resigned from the government service during the election to promote/actively campaign for a national or local	☐ YES ☑ If YES, give details:	NO SERVICE SELECTION OF THE SECOND			
39.	Have you acquired the status of an immigrant or permanent	AND THE PROPERTY OF THE PROPER	☐ YES ☑ NO If YES, give details (country):			
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag and (c) Solo Parents Welfare Act of 2000 (RA 8972), please	가득 없지만 지어 있는 것이 없는 그들이 되었다면 하지만 않는데 하는데 하는데 하는데 하는데 하는데 하는데 하는데 하는데 하는데 하				
a.	Are you a member of any indigenous group?	YES If YES, please specify:	] NO			
b.	Are you a person with disability?		NO			
C.	Are you a solo parent?		NO			
41.	REFERENCES (Person not related by consanguinity or affinity to applicant	nt /appointee)				
	NAME	ADDRESS	TEL. NO.			
The second second	Engr. Marlon G. Burlas	VSU	0917434 1577			
	Dr. Oscar B. Posas	Marcos, Baybay City, Leyte	0906747844			
	Claudio Ababat	Son toutire	0975 3014755			
	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 entative to verify/validate the contents state	Republic of the ed herein.	JEL B. CALIPAYAN PHOTO		
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		V5U Office Legal Officer  Person Administering Oath	h			

## **WORK EXPERIENCE SHEET**

Instructions: 1. Include only the work experiences relevant to the position being applied to.

- The duration should include start and finish dates, if known, month in abbreviated form, if known, and year in full. For the current position, use the word Present, e.g., 1998-Present. Work experience should be listed from most recent first.
- Duration: July 2012 to Present
   Position: Floatrician/ Sound On
- Position: Electrician/ Sound Operator
- Name of Office/Unit: Power Plant Electrical & Sound System Unit
- Immediate Supervisor: Engr. Marlon G. Burlas
  - Name of Agency/Organization and Location: VSU, Baybay City, Leyte
  - List of Accomplishments and Contributions (if any)
  - Summary of Actual DutiesRepair and maintenance of Electrical
  - Sound Operator/Driver
  - Building Electrician
  - \_a...a...g \_..ooa..o.a.

(Signature over Printed Name of Employee/Applicant)

Date: 11-08-202