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. Print legibly. Tick appropriate boxes () [i 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 CAPIN NAME EXTENSION (JR., SR) ORLAN FIRST NAME MIDDLE NAME CABATINGAN 3 DATE OF BIRTH 4/7/1977 16. CITIZENSHIP ✓ Filipino □ Dual Citizenship (mm/dd/yyyy) by birth by naturalization 4. PLACE OF BIRTH CARMEN, CEBU If holder of dual citizenship, Pls. indicate country: please indicate the details. ✓ Male ☐ Female 5. SEX ☐ Single ✓ Married 17. RESIDENTIAL ADDRESS 6 CIVIL STATUS ☐ Widowed House/Block/Lot No. Street ☐ Separated VISCA FARMER'S VILLAGE PANGASUGAN Other/s: Subdivision/Village Barangay **BAYBAY CITY** LEYTE 7. HEIGHT (m) 1.73 m City/Municipality Province 8. WEIGHT (kg) 74 KG ZIP CODE 6521 18. PERMANENT ADDRESS 9. BLOOD TYPE 0+ House/Block/Lot No. Street **DAWIS NORTE** X/4 10 GSIS ID NO Subdivision/Village Barangay CARMEN CEBU 11. PAG-IBIG ID NO. 1212-0356-3686 City/Municipality Province 12-050385416-9 12. PHILHEALTH NO. ZIP CODE 6005 NIK 13 SSS NO. 19 TELEPHONE NO N/A 456-539-060 14. TIN NO. 20. MOBILE NO. 09632656465 15. AGENCY EMPLOYEE NO. NA 21. E-MAIL ADDRESS (if any) orlan. capin@vsu.edu.ph 22. SPOUSE'S SURNAME CAPIN 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) ARVIE CAPIN **ALMIRA** 10/19/2007 FIRST NAME CABRALES MIDDLE NAME CASHIER OCCUPATION EMPLOYER/BUSINESS NAME VISAYAS STATE UNIVERSITY **BUSINESS ADDRESS** TELEPHONE NO. 24. FATHER'S SURNAME CAPIN NAME EXTENSION (JR., SR) FIRST NAME **MAXIMIANO** MIDDLE NAME **ESCOTON** 25. MOTHER'S MAIDEN NAME SURNAME CABATINGAN **EVANGELINE** FIRST NAME MIDDLE NAME SOLLANO (Continue on separate sheet if necessary) SCHOLARSHIP HIGHEST LEVEL PERIOD OF ATTENDANCE BASIC EDUCATION/DEGREE/COURSE NAME OF SCHOOL YEAR **ACADEMIC** LEVEL UNITS EARNED GRADUATED (Write in full) (Write in full) (if not graduated) RECEIVED From То ELEMENTARY DAWIS NORTE ELEMENTARY SCHOOL PRIMARY 1986 1992 1991 SECONDARY CARMEN NATIONAL HIGH SCHOOL SECONDARY 1993 1999 1999 VOCATIONAL / N/A N/A N/A N/A N/A N/A N/A TRADE COURSE CEBU STATE COLLEGE OF SCIENCE AND TECHNOLOGY ASSOCIATE IN FISHERIES TECHNOLOGY 2000 2003 2003 GRADUATE STUDIES N/A NIA N/A N/A N/A N/A N/A SIGNATURE DATE November 29, 2024 CS FORM 212 (Revised 2017), Page 1 of 4

CIVIL SERVICE ELIGIBILITY CARÉER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE RATING (If Applicable)			RATING	DATE OF	DI ACE CE EVAMINAT	W. 30		LICENSE (if ap	artistica con
			(If Applicable)	EXAMINATION / PLACE OF EXAMINATION / CONFERMENT		ATION / CONFERMENT		NUMBER	Date of Validity
N/A N			N/A	N/A	IA		N/A	N/A	
•									
	EXPERIENCE vate emplovment.	Start from your recent		ontinue on separate sheet n of duties should be	if necessary) indicated in the attached	Work Expe	erience sheet.		
	INCLUSIVE DATES (mm/dd/yyyy) POSITION TITLE (Write in full/Do not abbreviate)		DEPARTMENT / AGE (Write in full	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOVT SERVIO (Y/ N)		
/1/2024	PRESENT	ADMINISTRATIV	E VIDE III	A STATE OF THE PROPERTY OF THE	OPICAL ECOLOGY AND	202.06		CASUAL	YES
		ADMINISTRATIV		INSTITUTE OF TR	OPICAL ECOLOGY AND	693.86	GRADE 3	CASUAL	YES
//1/2023 //12/2014	3/12/2020 3/12/2020	SCIENCE RESEA		INSTITUTE OF TR	TAL MANAGEMENT OPICAL ECOLOGY AND	9408.80	GRADE 3	JOB ORDER	YES
6/6/2013	3/11/2014	LABORE		DEPARTMENT OF	PLANT BREEDING AND	2880.00	N/A	JOB ORDER	YES
8/3/2010	11/5/2011	MARKET COLL			ENETICS IENT OF CARMEN CEBU	3520.00	N/A	JOB ORDER	YES
3/30/2009	1/2/2010				3570.00	N/A	JOB ORDER	YES	
10/18/2007	10/2/2009	TRAFFIC ENFORCER LINEMAN INSTALLER			REET CEBU CITY	3600.00	N/A	GUB CONSTRUCTOR	NO
SIGN	VATURE		05.	ontinue on separate sheet		November 29	0, 2024		

CS FORM 212 (Revised 2017), Page 2 of 4

NAME & ADDRESS OF ORG (Write in full)	ANIZATION	(mm/c	VE DATES ld/yyyy)	NUMBER OF HOURS	POSITION / NATURE OF WORK		
		From N/A	N/A	N/A	N/A		
		100	The state of the s	I I	lun l		
•							
-							
	(D)	ontinue on separate	shoot if accessor	4			
LEARNING AND DEVELOPMENT (L&D) IN		NAME AND ADDRESS OF THE OWNER, TH	THE RESERVE OF THE PERSON NAMED IN	"			
from the most recent L&D/training program and include o	nly the relevant L&D/training taken for			ef/Executive/Manage	erial positions)		
TITLE OF LEARNING AND DEVELOPMENT INTER	/ENTIONS/TRAINING PROGRAMS	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)	II)					(Write in full)	
OBioS SCUBAsurero and Coastal C		11/20/2024	11/20/2024	8	N/A	VISAYAS STATE UNIVERSITY	
ISO 9001:2015 AWARENESS & RE-AWA TRAINING ON CORAL TRANSPLANTATION AND		9/9/2024 7/1/2024	9/9/2024 7/4/2024	32	N/A N/A	VISAYAS STATE UNIVERSITY VISAYAS STATE UNIVERSITY	
CORAL REEF IDENTIFICATION using TAXONOMI		6/24/2024	6/28/2024	32	N/A	VISAYAS STATE UNIVERSITY	
HANDS-ON CARDIOPULMONAI	RY RESUSCITATION	07/21/2022	07/22/2022	16	N/A	VISAYAS STATE UNIVERISTY	
INTRODUCTION TO METROLOGY AND AN	INDUSTRIAL CALIBRATION	07/12/2022	07/13/2022	16	N/A	DEPARTMENT OF SCIENCE AND TECHNOLOGY	
COASTAL ZONING AND SPATIAL PLA	ANNING OF BAYBAY CITY	07/08/2022	07/08/2022	3	N/A	VISAYAS STATE UNIVERSITY	
ISO9001 2015 AWARENESS/REAWAR	ENESS WEBINAR	11/27/2020	11/27/2020	3	N/A	VISAYAS STATE UNIVERSITY	
FOLIOSE CORAL TAXONOMY AND INTRODUCT	ON OF RUGOSITY METHOD	3/5/2019	3/5/2019	2	N/A	VISAYAS STATE UNIVERSITY	
CRTR METHOD AND IDENTIFICATION OF	FAMILY FUNGIIDAE	10/4/2019	10/4/2019	2	N/A		
PARTICIPATORY COASTAL RESOURCE ASSESS	MENT TRAINING JUNKSHOP	11/29/2018	11/30/2018	16	N/A	VISAYAS STATE UNIVERSITY	
PCRA HABITAT ASSESSI		6/3/2018	03/25/2018	160	N/A	INOPOCAN, LEYTE	
		-		-		BAYBAY CITY, LEYTE	
PARTICIPATORY COASTAL RESOURCE AS TRAINING COURSE ON FEEDS, FEEDING, AND I		4/11/2015	6/22/2015	24	N/A	BAYBAY-MATALOM	
AGRICULTURE SPECI		05/19/2015	05/22/2015	40.0	N/A	SOUTHEAST ASIAN FISHERIES DEVELOPMENT CE	
		-					
	(Co	ontinue on separate	sheet if necessary	1)			
OTHER INFORMATION							
SPECIAL SKILLS and HOBBIES	32. NO	33. MEMBERSHIP IN ASSOCIATION/ORGANIZA (Write in full)					
DIVING		PROFESSIONAL ASSOCIATION OF DIV					
PLUMBING					interference in the second		
CARPENTRY							
DRIVING							
WELDING							
			ELINE EL				

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 approinted,					
	a. within the third degree?		☐ YES 🗹	NO		
	b. within the fourth degree (for Local Government Unit - Care	er Employees)?	☐ YES ☑ NO			
			If YES, give details:			
35.	a. Have you ever been found guilty of any administrative offe	nse?	☐ 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 an	Y YES ☑ NO				
	any court or tribunal?	If YES, give details:				
37.	Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, end (abolition) in the public or private sector?	☐ YES ☑ NO If YES, give details:				
38.	a. Have you ever been a candidate in a national or local election and election and election are set of the set	☐ 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 of	☐ YES ☑ NO If YES, give details:				
39.	Have you acquired the status of an immigrant or permanent	☐ YES ☑ NO If YES, give details (country):				
a. b.	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 ☑ NO If YES. please specify ID No:				
41.	REFERENCES (Person not related by consanguinity or affinity to applicant //	appointee)				
	NAME	ADDRESS	TEL. NO.	The second secon		
	DR. ELIZA D. ESPINOSA	VISAYAS STATE UNIVERISTY	563-7997			
	DR. MARLITO M. BANDE	VISAYAS STATE UNIVERISTY	563-1011			
	DR. TEOFANES A. PATINDOL	VISAYAS STATE UNIVERISTY	563-1052)-(
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 representagree that any misrepresentation made in this document administrative/criminal case/s against me.	ent laws, rules and regulations of the lattive to verify/validate the contents state	Republic of the d herein.	PHOTO		
3 1995	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) LEASE INDICATE ID Number and Date of Issuance					
-	overnment Issued ID: PHILHEALTH					
ID	//License/Passport No.: 12-050385416-9	ox)				
D	Date/Place of Issuance: BAYBAY CITY, LEYTE November 29, 2024 Date Accomplished Right Thumbmark					
	SUBSCRIBED AND SWORN to before me this	DFC 2024 , affiant exhibit	ing his/her validly issued g	overnment ID as indicated above.		
		ATTY, RYSAN C GUINOCOR				

Person Administering Oath

WORK EXPERIENCE SHEET

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

- 2. 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 1, 2024 present
- Position: Administrative Aide III
- Name of Office/Unit: ITEEM
- Immediate Supervisor: TEOFANES A. PATINDOL
- Name of Agency/Organization and Location: Visayas State University, Baybay City, Leyte.
 - List of Accomplishments and Contributions (if any)
 - o Participated in Coral Reef Identification using Taxonomic Amalgation Unit (TAUs)
 - Attended Training on Coral Transplantation and Bleaching Monitoring
 - Attended ISO 9001:2015 Awareness and RE-Awareness Seminar
 - o Participated in OBioS SCUBAsurero and Coastal Clean up Activity
 - Assisted Students in their Field Activities
 - Summary of Actual Duties
 - Works as laboratory technician in the AED Marine Laboratory, which includes the regular care and maintenance of the SCUBA diving gears and equipment;
 - o Take charge on the maintenance of the Hatchery for Tilapia production;
 - SCUBA dives to assist in the Coastal Resource Management (CRM), artificial reef monitoring in the 5th district of Leyte, and other research and extension activities of the AED.
 - Incharge refill scuba tanks.
 - o Takes charge of the AED archive;
 - o Incharge on the refilling of scuba tanks;
 - Maintains the cleanliness of the Marine Laboratory, its offices and its sorroundings;
 - Does messengerial tasks when necessary.
 - o Performs other related jobs as assigned by the superior.

(Signature over Printed Name of Employee/Applicant)

Date: 11 29 24