| CS Form No. 212  |  |  |   |                            |                                 |  |  | 3                        |
|--|--|--|---|----------------------------|---------------------------------|--|--|--------------------------|
| Revised 2017   | PERSO  | DNAL DA  | TAS   | HEE                        | Т                               |  |  |                          |
| WARNING: Any misrepre  | esentation made in the Personal Data Sheet and                 | the Work Experience Shee   | t shall cause th                                    | e filing of ac             | lministrati                     | ve/criminal case/s   | against the p  | erson                    |
| READ THE ATTACHED  | GUIDE TO FILLING OUT THE PERSONAL DATA                         | SHEET (PDS) BEFORE AC  | COMPLISHING   | THE POS E                  |                                 |  | -game trop   |                          |
| Print legibly. Tick appropriate  | bo and use separate sheet if necessary. Indi                   | cate N/A if not applicable. DO N   | OT ABBREVIAT  | E.                         | 1. CS ID N                      | 0.   | (Do not fill up  | . For CSC use on         |
| I. PERSONAL INFORM   |  |  |   |                            |                                 |  |  |                          |
| 2. SURNAME   | VALENCERINA  |  |   |                            |                                 |  |  |                          |
| FIRST NAME   | SUSAN  |  | NAME EXTEN:   |                            |                                 |  | JR., SR) N/A   |                          |
| MIDDLE NAME  | MORENO   |  |   |                            |                                 |  |  |                          |
| DATE OF BIRTH     (mm/dd/yyyy)   | 22/10/1961   | 16. CITIZENSHIP  | zenship,  |                            | Dual Citizenshi                 | ual Citizenship  ✓ by birth □ by naturalization  |  |                          |
| 4. PLACE OF BIRTH  | BRGY. GABAS, BAYBAY,LEYTE                                      | If holder of dual citiz  |   |                            | Pls. indicate                   | /  | nzauori  |                          |
| 5. SEX   | ☐ Male   | please indicate the  |   |                            |                                 |  |  |                          |
| 6 CIVIL STATUS   | ☐ Single ☑ Married   | 17. RESIDENTIAL ADDRESS  |   |                            |                                 |  |  |                          |
|  | ☐ Widowed ☐ Separated ☐ Other/s:                               |  | Hou   | use/Block/Lot N<br>ZONE-1  | lo.                             |  | Street   |                          |
| STATE OF THE STATE |  |  | Subdivision/Village                                 |                            | NAGA<br>Barangay                |  |  |                          |
| 7. HEIGHT (m)  | 1.55m  |  | BAYBAY City/Municipality 6521                       |                            | LEYTE<br>Province               |  |  |                          |
| 8. WEIGHT (kg)   | 62kg.  | ZIP CODE   |   |                            |                                 |  | 1-90   |                          |
| 9. BLOOD TYPE  | A  | entroll of the guide and   | Hou   | use/Block/Lot N            | 2                               |  | 0.   |                          |
| 10. GSIS ID NO.  | N/A  | The Name of Page 2 and a second  | Taste 3   | ZONE-1                     |                                 |  | Street   | ,                        |
| 11. PAG-IBIG ID NO.  | 121109601616   |  | Subdivision/Village BAYBAY                          |                            |                                 | Barangay  LEYTE  |  |                          |
| 12. PHILHEALTH NO.   | 13-025010572-0   | ZIP CODE   | City/Municipality 6521                              |                            |                                 | Province   | Co-Hall-Astrania gradunos destributados de secuciones de vica en venidos de la composição de la composição de composição de la composição de l |                          |
| 13. SSS NO.  | 09-1110748-7   | 19. TELEPHONE NO.  |   |                            |                                 | N/A  |  |                          |
| 14. TIN NO.  | 926-679-694  | 20. MOBILE NO.   | 09982525798   |                            |                                 |  |  |                          |
| 15. AGENCY EMPLOYEE NO.  | N/A  | 21. E-MAIL ADDRESS (if any)  |   | vale                       | encerina                        | .susan@gma   | ail com  |                          |
| II. FAMILY BACKGRO   | UND  |  |   |                            |                                 | The state of the s |  |                          |
| 22. SPOUSE'S SURNAME   | VALENCERINA  | SOUL AROUND  | 23. NAME of CHILDREN (Write full name and list all) |                            | DATE OF BIR                     | TH (mm/dd/yyyy)  |  |                          |
| FIRST NAME   | EDGAR  | NAME EXTENSION (JR., SR)   | EDMUND MO   | DRENO VAL                  | ENCERIN                         | IA   | 19/03/1988   |                          |
| MIDDLE NAME  | SACUROM  |  | LESTER MORENO VALENCERINA                           |                            | 14/05/1989                      |  |  |                          |
| OCCUPATION   | Brgy. Councilor  |  |   |                            |                                 |  |  |                          |
| EMPLOYER/BUSINESS NAM  | ME N/A   |  |   |                            |                                 |  |  |                          |
| BUSINESS ADDRESS   | N/A  |  |   |                            |                                 |  |  |                          |
| TELEPHONE NO.  | N/A  |  |   |                            |                                 |  |  |                          |
| 24. FATHER'S SURNAME   | MORENO   |  |   |                            |                                 |  |  |                          |
| FIRSTNAME  | RAYMUNDO   |  |   |                            |                                 |  |  |                          |
| MIDDLE NAME  | LORETO   | A second the branch of the property of the pro |   |                            |                                 |  | 3  |                          |
| 5. 10THER'S MAIDEN NAME  | ESCUADRA   |  |   |                            |                                 |  |  |                          |
| FIRSTNAME  | SOLEDAD  | Production of the production of  |   |                            |                                 |  |  |                          |
| MIDDLE NAME  | POLEA  |  |   |                            |                                 |  |  | -                        |
|  |  |  |   |                            |                                 |  |  |                          |
| II. EDUCATIONAL BAC  | CKGROUND   |  |   |                            |                                 |  |  |                          |
| 6. LEVEL   | NAME OF SCHOOL   | BASIC EDUCATION/DEGREE/COURSE  |   | OURSE PERIOD OF ATTENDANCE |                                 | HIGHEST LEVEL/   | YEAR   | SCHOLARSHIP/<br>ACADEMIC |
|  | (Write in full)  | (Write in full)  | From To   |                            | UNITS EARNED (if not graduated) | GRADUATED  | HONORS<br>RECEIVED   |                          |
| ELEMENTARY   | Baybay East Central School Baybay,<br>Leyte                    | Elementary   |   | 1968                       | 1974                            | N/A  | 1974   | N/A                      |
| SECONDARY  | Franciscan College of the Immaculate Conception, Baybay, Leyte | Secondary  |   | 1974                       | 1978                            | N/A  | 1978   | N/A                      |

Bachelor of Science in Commerce Major in Accounting COLLEGE Southwestern University, Cebu City 1978 1982 N/A 1982 N/A System Technology Institute City VOCATIONAL / TRADE COURSE Ormoc Basic Computer "Power Pack 1.7" Oct.2001 Oct. 2001 N/A

SIGNATURE

DATE

June 10, 2022

|  | ERVICE ELI                  |   |                                | * DATE OF  |                         |                   |  | LICENSE (if ap           | olicable)                 |
|--|-----------------------------|---|--------------------------------|--|-------------------------|-------------------|--|--------------------------|---------------------------|
| 27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE |                             | RATING<br>(If Applicable)               | EVAMINATION / PLACE OF EVAMINA |  | ION / CONFER            | RMENT             | NUMBER   | Date of                  |                           |
|  | TOTAL PERSON                | HTT BRIVERO LIGEROL                     |                                | CONFERNIENT  |                         |                   |  | 0                        | Validity                  |
|  | N                           | /A                                      |                                |  |                         |                   |  |                          |                           |
|  |                             |   |                                |  |                         |                   |  |                          |                           |
|  |                             |   |                                |  |                         |                   |  |                          |                           |
|  |                             |   |                                |  |                         |                   |  |                          |                           |
|  |                             |   | (Cont                          | inue on separate sheet   | if necessary)           |                   |  |                          |                           |
|  | EXPERIENCE<br>rate employme | Ent. Start from your recen              | t work) Descri                 | ption of duties sho  | uld be indicated in the | attached V        |  |                          |                           |
|  | USIVE DATES nm/dd/yyyy) To  | POSITION TITL (Write in full/Do not ab) |                                | DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate) |                         | MONTHLY<br>SALARY | SALARY/ JOB/<br>PAY GRADE (if<br>applicable)&<br>STEP (Format<br>"00-0")/<br>INCREMENT | STATUS OF<br>APPOINTMENT | GOV'T<br>SERVICE<br>(Y/N) |
| 1/09/2011  | Present                     | Clerk                                   |                                | Accounting Office  | , VSU, Baybay City      | 14,125.10         | I TO NEME OF   | Casual                   | Yes                       |
| 1/11/2002  | 01/07/2007                  | Accounting Clerk                        |                                | Rubetan Finance (<br>Baybay, Leyte                                       | Corporation             | 8,000.00          |  | Regular                  | No                        |
| 990  | 2000                        | OFW                                     |                                | Prince Sultan Bin Abdulaziz Palace<br>Al-Khobar, K.S.A                   |                         | 15,000.00         |  | Contractual              | No                        |
| 986  | 1990                        | Clerk/Bookkeepper                       |                                | Hi-Quality Trading, Davao City   |                         | 1,200.00          |  | Regular                  | No                        |
| 985  | 1986                        | Clerk                                   |                                | Accounting Office<br>Visca, Baybay, Le                                   | 659.30                  |                   | Casual   | Yes                      |                           |
| pril 1985  | May 1985                    | Census Enumerator                       |                                | NCSO, Tacloban City  |                         | 700.00            |  | Emergency                | Yes                       |
| oct. 1984  | March 1985                  | Typist                                  |                                | Commission On Audit, Cebu City   |                         | 660.00            |  | Emergency                | Yes                       |
| 983  | 1984                        | Secretary/Clerk                         |                                | LRT Project-LORC-ICSI<br>Vito Cruz, Metro Manila                         |                         | 800.00            |  | Contractual              | No                        |
| lune 1982  | Oct. 1982                   | Apprentice                              |                                | Bureau Of Forest<br>Cebu City  |                         |                   | Apprenticeship   | Yes                      |                           |
|  |                             |   |                                |  |                         |                   |  |                          |                           |
|  |                             |   |                                |  |                         |                   |  |                          |                           |
|  |                             |   |                                |  |                         |                   |  |                          |                           |
|  |                             |   |                                |  |                         |                   |  |                          |                           |
|  |                             |   |                                |  |                         |                   |  |                          |                           |
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| -  |                             | S                                       |                                |  |                         |                   |  |                          |                           |
|  |                             |   |                                |  |                         |                   |  |                          |                           |
|  |                             |   |                                |  |                         |                   |  |                          |                           |
|  |                             |   |                                |  |                         |                   |  | ar r <sub>a</sub>        |                           |
|  |                             |   |                                | 270  |                         |                   |  |                          |                           |
|  |                             |   | (Con                           | tinue on separate sheet  | if necessary)           |                   |  |                          |                           |
| SIGN   | ATURE                       | EMES                                    |                                |  | DATE                    | June 10, 202      | 22   |                          |                           |

| (Write in full)   | ORESS OF ORGANIZATION (Write in full) |                            | INCLUSIVE DATES (mm/dd/yyyy)          |   | POSITION / NATURE OF WORK                   |  |
|---|---------------------------------------|----------------------------|---------------------------------------|---|---|--|
| ·····   |                                       | From                       | То                                    | HOURS                                   |   | TOURIST TOUR                                 |
|   |                                       |                            |                                       |   | H 7   |  |
| N/A   | N/A                                   |                            |                                       |   | N/A   |  |
|   |                                       |                            |                                       |   |   |  |
|   |                                       |                            |                                       |   |   |  |
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| III. LEARNING AND DEVELOPMENT (L&L  | )) INTERVENTION                       |                            | PROGRAMS A                            | TTENDED                                 |   |  |
| TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)   |                                       | ATTENDANCE<br>(mm/dd/yyyy) |                                       | NUMBER OF<br>HOURS                      | Type of LD<br>( Managerial/<br>Supervisory/ | CONDUCTED/ SPONSORED BY (Write in full)      |
|   |                                       | From To                    |                                       |   | Technical/etc)                              | 1  |
| Webinar: RA11313 Safe Space Act   | 12/10/2020                            | 10/12/2020                 | 3 Hours                               | Technical                               | VSU-ISRDS                                   |  |
| Webinar ISO 9001:2015 Awareness/Re-awa  |                                       | 11/27/2020                 | 27/11/2020                            | 4 Hours                                 | Technical                                   | Ms. Elvira E. Ongy                           |
| Orientation Workshop Among JO, Clerk & L  | ab. Tech.                             | 1/15/2019                  | 15/01/2019                            | 8 Hours                                 | Technical                                   | Dr. Lourdes B. Cano                          |
| rontline Orientation Customer & Work Va   | ues                                   | 09/09/2019                 | 09/09/2019                            | 8 Hours                                 | Technical                                   | Dr. Lourdes B. Cano                          |
| Farget Setting Workshop (IPCR)  |                                       | 20/08/2018                 | 21/08/2018                            | 16 Hours                                | Technical                                   | Dr. Lourdes B. Cano                          |
| Orientation Basic Customer Service  | 05/09/2017                            | 05/09/2017                 | 8 Hours                               | Technical                               | Dr. Lourdes B. Cano                         |  |
| SO Orientation and Writeshop  |                                       | 21/09/2015                 | 21/09/2015                            | 8 Hours                                 | Technical                                   | Dr. Lourdes B. Cano                          |
| Service Staff Training (OFW)  |                                       | Dec. 8, 1991               | Dec. 12, 1991                         | 5 Days                                  | Technical                                   | International Center Services Corp.          |
| Pre-departure Orienatation Seminar (OFW)  |                                       | March 6,1991               | March 6,1991                          | 4 Hours                                 | Technical                                   | OWWA, Manila, Philippines                    |
| Training and Seminar At National Census Office  |                                       | 03/05/1985                 | 07/05/1985                            | 5 days                                  | Technical                                   | NCSO Tacloban City                           |
|   |                                       | 2 1911 19                  | DAFTER DOT                            | P. S. V. S. P. S.                       |   |  |
| 76 P.,  |                                       |                            |                                       |   |   |  |
| and the second second   |                                       |                            |                                       |   |   |  |
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|   |                                       |                            | 32/188                                | i adv                                   |   |  |
|   | 37-3                                  |                            |                                       |   |   | 1 22   |
|   | (0                                    | ontinue on separat         | e sheet if necessa                    | ry)                                     |   |  |
|   |                                       |                            |                                       |   |   |  |
| VIII. OTHER INFORMATION   |                                       |                            |                                       |   |   |  |
| VIII. OTHER INFORMATION  31. SPECIAL SKILLS and HOBBIES   | 32.                                   | NON-ACADEMIC               | C DISTINCTIONS / F<br>(Write in full) | RECOGNITION                             |   |  |
| VIII. OTHER INFORMATION  31. SPECIAL SKILLS and HOBBIES  Computer literate  | 32.                                   | NON-ACADEMIC               |                                       | RECOGNITION                             |   |  |
| 31. SPECIAL SKILLS and HOBBIES  Computer literate   | 32                                    | NON-ACADEMIC               |                                       | RECOGNITION                             |   | 33. ASSOCIATION/ORGANIZATIO                  |
| 31. SPECIAL SKILLS and HOBBIES Computer literate  yping   | 32                                    | NON-ACADEMIC               | (Write in full)                       | RECOGNITION                             |   | 33. ASSOCIATION/ORGANIZATION (Write in full) |
| 31. SPECIAL SKILLS and HOBBIES  Computer literate  Typing   | 32.                                   | NON-ACADEMIC               | (Write in full)                       | RECOGNITION                             |   | 33. ASSOCIATION/ORGANIZATION (Write in full) |
| 31. SPECIAL SKILLS and HOBBIES  Computer literate  Typing   | 32                                    | NON-ACADEMIC               | (Write in full)                       | RECOGNITION                             |   | 33. ASSOCIATION/ORGANIZATIO (Write in full)  |
| 31. SPECIAL SKILLS and HOBBIES  Computer literate  Typing   | 32.                                   | NON-ACADEMIC               | (Write in full)                       | RECOGNITION                             |   | 33. ASSOCIATION/ORGANIZATIO (Write in full)  |
| 31. SPECIAL SKILLS and HOBBIES  | 32.                                   | NON-ACADEMIC               | (Write in full)                       | RECOGNITION                             |   | 33. ASSOCIATION/ORGANIZATION (Write in full) |
| 31. SPECIAL SKILLS and HOBBIES  Computer literate  Typing   |                                       | NON-ACADEMIC               | (Write in full)  N/A                  | RECOGNITION                             |   | 33. ASSOCIATION/ORGANIZATION (Write in full) |

| -        |  |  | A  | i .                              |  |  |
|----------|--|--|--|----------------------------------|--|--|
| 34.      | Are you related by consanguinity or affinity to the appointin chief of bureau or office or to the person who has immedia Bureau or Department where you will be appointed, a. within the third degree?   |  |  |                                  |  |  |
|          | b. within the fourth degree (for Local Government Unit - Ca  | YES NO YES NO If YES, give details:  |  |                                  |  |  |
| 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?  | ☐ YES ☑ NO  If YES, give details:  Date Filed:  Status of Case/s:  |  |                                  |  |  |
| 36.      | any court or tribunal?   | ☐ YES ☑ NO If YES, give details:   |  |                                  |  |  |
|          | Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, et (abolition) in the public or private sector?  | YES If YES, give details resignation   | □ NO<br>::   |                                  |  |  |
| 38.      | a. Have you ever been a candidate in a national or local ele<br>Barangay election)?  | ☐ YES ☑ NO If YES, give details:   |  |                                  |  |  |
|          | b. Have you resigned from the government service during to election to promote/actively campaign for a national or local   | ☐ YES If YES, give detai   | ☑ NO<br> s:  |                                  |  |  |
| 39.      | Have you acquired the status of an immigrant or permanen   | ☐ YES ☑ NO If YES, give details (country):   |  |                                  |  |  |
| a.<br>b. | Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma 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 applicar  | it /appointee)   | The second secon |                                  |  |  |
|          | NAME   | POSITION/ADDRESS   | TEL. NO.   |                                  |  |  |
| Ms. I    | ouella C. Ampac  | Director of Finance, VSU<br>Baybay City  | 9175423297   | 93                               |  |  |
| M        | r. Nick Freddy R. Bello  | OIC, Accounting Office VSU,<br>Baybay City   | 9292255015   |                                  |  |  |
| Ms. \    | Nilma V. Napiere   | Administrative Assistant II Accounting Office, VSU, Baybay City  | 9359633220   | Alam I                           |  |  |
| 42.      | I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertin Philippines. I authorize the agency head/authorized represe agree that any misrepresentation made in this docu administrative/criminal case/s against me. | If this Personal Data Sheet which is a trend the laws, rules and regulations of the land the contents state.                     | Republic of the ed herein.   | РНОТО                            |  |  |
| PL       | EASE INDICATE ID Number: Philhealth 13-  |  |  |                                  |  |  |
| Go       | vernment Issued ID: Tax Identification Number  | 1  |  |                                  |  |  |
| ID/      | .icense/Passport No.: 926-679-694  | ox)  |  |                                  |  |  |
| Dat      | le/Place of Issuance: June 10, 2002  |  | Right Thumbmark  |                                  |  |  |
|          | SUBSCRIBED AND SWORN to before me this   | 0 4 AUG 2022 , affiant exhibitin   | g his/her validly issued go  | overnment ID as indicated above. |  |  |
|          |  | ATTY, RYSAN A GUINOCOR<br>VSU Chier yeşal Officer<br>Person Administering Oath   | 1  |                                  |  |  |