

PERSONAL DATA SHEET

WARNING: Any misinterpretation 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 (☐ and 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)

I. PERSONAL INFORMATION

2. SURNAME	CAINGCOY		
FIRST NAME	KIMBERLY	NAME EXTENSION (JR., SR)	
MIDDLE NAME	VANZUELA		
3. DATE OF BIRTH (mm/dd/yyyy)	4/23/1995	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:
4. PLACE OF BIRTH	BAYBAY CITY, LEYTE	If holder of dual citizenship, please indicate the details.	
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		
6 CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	
7. HEIGHT (m)	1.47	House/Block/Lot No.	Street
8. WEIGHT (kg)	57	Subdivision/Village	GUADALUPE
9. BLOOD TYPE	A+	CITY/Municipality	BAYBAY CITY, LEYTE
10. GSIS ID NO.	02005193586	ZIP CODE	6521
11. PAG-IBIG ID NO.	121178738132	18. PERMANENT ADDRESS	
12. PHILHEALTH NO.	132506600352	House/Block/Lot No.	Street
13. SSS NO.	34-6171397-5	Subdivision/Village	MALINAO
14. TIN NO	474-522-430	CITY/Municipality	MAHAPLAG LEYTE
15. AGENCY EMPLOYEE NO.	V-00992	ZIP CODE	6512
		19. TELEPHONE NO.	NONE
		20. MOBILE NO.	09175047993
		21. E-MAIL ADDRESS (if any)	kimberly.caingcoy@vsu.edu.ph

II. FAMILY BACKGROUND


22. SPOUSE'S SURNAME	N/A		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME		NAME EXTENSION (JR., SR)	N/A	N/A
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	CAINGCOY			
FIRST NAME	ALVIN	NAME EXTENSION (JR., SR)		
MIDDLE NAME	VILLAVER			
25. MOTHER'S MAIDEN NAME				
SURNAME	VANZUELA			
FIRST NAME	EDELINA			
MIDDLE NAME	PANAL			

(Continue on separate sheet if necessary)

III. EDUCATIONAL BACKGROUND

26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE		HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	MALINAO ELEMENTARY SCHOOL	ELEMENTARY EDUCATION	2001	2007	N/A	2007	SECOND HONOR
SECONDARY	MAHAPLAG NATIONAL HIGH SCHOOL SAN ISIDRO LOWER CAMPUS	SECONDARY EDUCATION	2007	2011	N/A	2011	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN COMPUTER SCIENCE	2011	2015	N/A	2015	N/A
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	June 3, 2019	CS FORM 212 (Revised 2017), Page 1 of 4
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[illegible]

V. WORK EXPERIENCE

[illegible]

SIGNATURE

DATE _____

June 3, 2019

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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATIONS

29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		
	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

(Start from the most recent L&D training program and include only the relevant L&D training taken for the last five (5) years for Division Chief/Executive/Managerial positions)

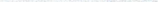
[illegible]

(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
TROUBLESHOOT PC/LAPTOP	N/A	COMPUTER SCIENCE STUDENT SOCIETY (CS3)
I LIKE LEARNING NEW STUFF THROUGH INTERNET		
LISTENING TO MUSIC		

(Continue on separate sheet if necessary)

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34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to the chief of bureau or office or to the person who has immediate supervision over you in the Office, Bureau or Department where you will be appointed,
a. within the third degree?
b. within the fourth degree (for Local Government Unit - Career Employees)?

☐ YES☒ NO

☐ YES☒ NO

If YES, give details:

35. a. Have you ever been found guilty of any administrative offense?

b. Have you been criminally charged before any court?

☐ YES☒ NO

☐ YES☒ NO

If YES, give details:

If YES, give details:

Date Filed: _____

Status of Case/s: _____

36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?

☐ YES☒ NO

If YES, give details:

37. 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?

☐ YES☒ NO

If YES, give details:

38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?

b. Have you resigned from the government service during the three (3)-month period before the last election to promote/actively campaign for a national or local candidate?

☐ YES☒ NO

☐ YES☒ NO

If YES, give details:

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):

40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), please answer the following items:
a. Are you a member of any indigenous group?
b. Are you a person with disability?
c. Are you a solo parent?

☐ 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 applicant /appointee)

NAME	ADDRESS	TEL. NO.
ENGR. MARITO V. CATORCE	CUATRO DE AGOSTO, MAHAPLAG, LEYTE	NONE
PROF. WINSTON M. TABADA	VISCA, BAYBAY CITY, LEYTE	NONE
DR. VICTOR B. ASIO	VISCA, BAYBAY CITY, LEYTE	NONE

42. I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I authorize the agency head / authorized representative to verify/validate the contents stated herein. I agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me.

PHOTO

Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)
PLEASE INDICATE ID Number and Date of Issuance

Government Issued ID: DRIVER'S LICENSE

ID/License/Passport No.: H1217000102

Date/Place of Issuance: 1/25/2017 BAYBAY CITY, LEYTE

Signature (Sign inside the box)

June 3, 2019

Date Accomplished

Right Thumbmark

SUBSCRIBED AND SWORN to before me this 10 JUN 2019, affiant exhibiting his/her validly issued government ID as indicated above.

ATTY. RYSAN C. GUINOCOR

VS LEGAL OFFICER

Person Administering Oath

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