

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 () 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	VASQUEZ		
FIRST NAME	ATOZ	NAME EXTENSION (JR., SR)	
MIDDLE NAME	APOLINAR		
3. DATE OF BIRTH (mm/dd/yyyy)	10/24/1991	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:
4. PLACE OF BIRTH	ORMOC CITY	If holder of dual citizenship, please indicate the details.	
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		
6 CIVIL STATUS	<input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	PUROK 2 House/Block/Lot No. Street BRGY. ALTA VISTA Subdivision/Village Barangay ORMOC CITY LEYTE City/Municipality Province
7. HEIGHT (m)	1.60	ZIP CODE	6541
8. WEIGHT (kg)	60		
9. BLOOD TYPE	AB+	18. PERMANENT ADDRESS	PUROK 2 House/Block/Lot No. Street BRGY. ALTA VISTA Subdivision/Village Barangay ORMOC CITY LEYTE City/Municipality Province
10. GSIS ID NO.	NA	ZIP CODE	6541
11. PAG-IBIG ID NO.			
12. PHILHEALTH NO.	010513863794	19. TELEPHONE NO.	NA
13. SSS NO.	06-3231862-3	20. MOBILE NO.	+639166983702
14. TIN NO.	311-193-204	21. E-MAIL ADDRESS (if any)	
15. AGENCY EMPLOYEE NO.	NA		

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	VASQUEZ		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	JONALYN	NAME EXTENSION (JR., SR)		09/25/1992
MIDDLE NAME	GELIM		AJ YSABELLE GELIM VASQUEZ	03/27/2016
OCCUPATION	HOUSEWIFE			
EMPLOYER/BUSINESS NAME	NA			
BUSINESS ADDRESS	NA			
TELEPHONE NO.	NA			
24. FATHER'S SURNAME	VASQUEZ			08/26/1959
FIRST NAME	ALFREDO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	ORTEGA			
25. MOTHER'S MAIDEN NAME	REGINA ANDO APOLINAR			08/05/1961
SURNAME	VASQUEZ			
FIRST NAME	REGINA			
MIDDLE NAME	APOLINAR		(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	PUNTA ELEMENTARY SCHOOL (PES)	BASIC EDUCATION (ELEMENTARY)	1996	2003		2003	VALEDICTORIAN
SECONDARY	NEW ORMOC CITY NATIONAL HIGH SCHOOL (NOCNHS)	BASIC EDUCATION (HIGH SCHOOL)	2003	2007		2007	1ST HONORABLE MENTION
VOCATIONAL / TRADE COURSE	NA	NA	NA	NA	NA	NA	NA
COLLEGE	VISAYAS STATE UNIVERSITY (VSU)	BACHELOR OF SCIENCE IN CHEMISTRY	2007	2011		2011	MAGNA CUM LAUDE
GRADUATE STUDIES	UNIVERSITY OF OREGON	SPECIAL COURSE ON WATER-ROCK INTERACTION	MAR 2015	JUN 2015	NA	JUN 2015	CERTIFICATION

IV. CIVIL SERVICE ELIGIBILITY

[illegible]

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE		DATE	01/30/2020	CS FORM 212 (Revised 2017), Page 2 of 4
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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

[illegible]

(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]








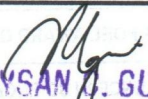
(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
COOKING	FLORENCIO GABRIEL G NOEL AWARD OF EXCELLENCE	NGAP (NATIONAL GEOTHERMAL ASSOCIATION OF THE PHILIPPINES)
PIANO PLAYING	DOST AWARD OF EXCELLENCE IN SCIENCE & TECHNOLOGY	
GEOCHEMICAL MODELLING	GOV. CARLOS JERICO L. PETILLA AWARD FOR MOST OUTSTANDING STUDENT	
R SOFTWARE CODING	EDGARDO J. ANGARA AWARD OF EXCELLENCE	

(Continue on separate sheet if necessary)

SIGNATURE		DATE	01/30/2020	CS FORM 212 (Revised 2017), Page 3 of 4
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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)?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____												
39. Have you acquired the status of an immigrant or permanent resident of another country?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____												
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)													
<table><thead><tr><th>NAME</th><th>ADDRESS</th><th>TEL. NO.</th></tr></thead><tbody><tr><td>JOEFFREY A. CARANTO</td><td>EDC, ORTIGAS CENTER, PASIG</td><td>(02) 7755 2332</td></tr><tr><td>VAL MAVERICK ABECIA</td><td>EDC, ORTIGAS CENTER, PASIG</td><td>(02) 7755 2332</td></tr><tr><td>JACQUELINE MENDOZA-DUCLAYAN</td><td>EDC, ORTIGAS CENTER, PASIG</td><td>(02) 7755 2332</td></tr></tbody></table>	NAME	ADDRESS	TEL. NO.	JOEFFREY A. CARANTO	EDC, ORTIGAS CENTER, PASIG	(02) 7755 2332	VAL MAVERICK ABECIA	EDC, ORTIGAS CENTER, PASIG	(02) 7755 2332	JACQUELINE MENDOZA-DUCLAYAN	EDC, ORTIGAS CENTER, PASIG	(02) 7755 2332	
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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 cases against me.													
<table><tr><td>Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</td><td rowspan="4"> Signature (Sign inside the box) 01/30/2020 Date Accomplished</td><td rowspan="4"> Right Thumbmark</td></tr><tr><td>Government Issued ID: PASSPORT</td></tr><tr><td>ID/License/Passport No.: EC3329710</td></tr><tr><td>Date/Place of Issuance: JANUARY 31, 2015/DFA MANILA</td></tr></table>	Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance	 Signature (Sign inside the box) 01/30/2020 Date Accomplished	 Right Thumbmark	Government Issued ID: PASSPORT	ID/License/Passport No.: EC3329710	Date/Place of Issuance: JANUARY 31, 2015/DFA MANILA	 VASQUEZ, ATOZ A.						
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SUBSCRIBED AND SWORN to before me this FEB 13 2020, affiant exhibiting his/her validly issued government ID as indicated above.													
 ATTY. RYSAN G. GUINOCOR VSU LEGAL OFFICER Person Administering Oath													