

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	DARGANTES		
FIRST NAME	TONI MARC	NAME EXTENSION (JR., SR)	
MIDDLE NAME	LORETO		
3. DATE OF BIRTH (mm/dd/yyyy)	29 04 1983	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	Baybay 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	26 House/Block/Lot No. Street Villa Trinidad Gaas Subdivision/Village Barangay Baybay Leyte City/Municipality Province
7. HEIGHT (m)	1.52	ZIP CODE	
8. WEIGHT (kg)	64		
9. BLOOD TYPE	B	18. PERMANENT ADDRESS	26 House/Block/Lot No. Street Villa Trinidad Gaas Subdivision/Village Barangay Baybay City Leyte City/Municipality Province
10. GSIS ID NO.	02004558960	ZIP CODE	6521
11. PAG-IBIG ID NO.	121147839201		
12. PHILHEALTH NO.	13-000103153-9		
13. SSS NO.	0629708699	19. TELEPHONE NO.	NA
14. TIN NO.	287-276-670	20. MOBILE NO.	0916-4317303 / 0917-6431474
15. AGENCY EMPLOYEE NO.	V000854	21. E-MAIL ADDRESS (if any)	tmdargantes@vsu.edu.ph

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	DARGANTES		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	DEARLY	NAME EXTENSION (JR., SR)	ANGEL ZIYA M. DARGANTES	20 12 2007
MIDDLE NAME	MANAGBANAG		DEA NIBELLE M. DARGANTES	4 07 2013
OCCUPATION	TELLER			
EMPLOYER/BUSINESS NAME	OCCCI BAYBAY BRANCH			
BUSINESS ADDRESS	BAYBAY CITY, LEYTE			
TELEPHONE NO.	053-563-8037			
24. FATHER'S SURNAME	DARGANTES			
FIRST NAME	BUENAVENTURA	NAME EXTENSION (JR., SR)		
MIDDLE NAME	BOHOLST			
25. MOTHER'S MAIDEN NAME				
SURNAME	LORETO			
FIRST NAME	FE ISABLE			
MIDDLE NAME	TIGOL			

(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	VISCA FOUNDATION ELEMENTARY SCHOOL	PRIMARY EDUCATION	1990	1996		1996	
SECONDARY	VISCA LABORATORY HIGH SCHOOL	SECONDARY EDUCATION	1996	2000		2000	
VOCATIONAL / TRADE COURSE	DUALTECH TRAINING CENTER MANILA	ELECTROMECHANICS	2000	2002		2002	
COLLEGE	VISAYAS STATE UNIVERSITY	BS IN COMPUTER SCIENCE	2004	2008		2008	
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY	MASTER OF MANAGEMENT	2015	2018		2018	

(Continue on separate sheet if necessary)

SIGNATURE		DATE	8-9-2019	CS FORM 212 (Revised 2017), Page 1 of 4
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[illegible]

#### V. WORK EXPERIENCE

*(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.*

[illegible]

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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

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

(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)


30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
	From	To			
Philippine Government Electronic Procurement System (PhilGEPS) Training for Buyers	7-17-2019	7-18-2019	16.0	Technical	PhilGEPS
In-House Training on Republic Act 9184 and the 2016 Revised Implementing Rules and Regulations	6 10 2019	6 12 2019	24.0	Managerial	GPPB-TSO / Visayas State University
Seminar Workshop on Implementation Ready Project Proposal Preparation	5-15-2019	5-15-2019	8.0	Managerial	Visayas State University
Workshop on the Development of Higher Education Data Dictionary and Alignment of Indicators, Data Sets and Data Elements for Monitoring the Pubic	12 10 2019	12 10 2019	8.0	Managerial	Commission on Higher Education
Information System Strategic Planning Seminar-Workshop	10-24-2018	10-26-2018	24.0	Managerial	Depatment of Information and Communications Technology
Target Setting Workshop	8-20-2018	8-21-2018	16.0	Managerial	Visayas State University
Training Course on the International Classification of Diseases version 10 (ICD-10) for Coders	12 04 2017	12 08 2017	40.0	Technical	Department of Health
Open Data Workshop	15 03 2017	15 03 2017	8.0	Technical	College of Management and Economics, VSU
OVPAF Strategic Planning Workshop	15 02 2017	16 02 2017	16.0	Managerial	OVPAF, VSU
30th Annual Conference of the Asian Association of Open Universities	26 10 2016	28 10 2016	24.0	Technical	Asian Association of Open Universities
Workshop on RA 9184, Goods and Procurement Planning	8 09 2016	8 09 2016	8.0	Technical	Visayas State University
Workshop to Review and Improve Citizens' Charter	1 09 2016	1 09 2016	8.0	Technical	Visayas State University
Curriculum Review for Graduate Programs	21 01 2016	22 01 2016	16.0	Technical	Graduate School, VSU
	19 01 2015	21 01 2015	24.0	Technical	Visayas State University

(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)
		VSU Administrative Personnel Association

(Continue on separate sheet if necessary)

SIGNATURE		DATE	8-9-2019	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>DR. REMBERTO A. PATINDOL</td><td>OVPAF, VSU, VISCA, BAYBAY CITY</td><td>053-563-7108</td></tr><tr><td>DR. OTHELLO B. CAPUNO</td><td>OVPRE, VSU, VISCA, BAYBAY CITY</td><td>053-563-7485</td></tr><tr><td>DR. WINSTON M. TABADA</td><td>DCST, VSU, VISCA, BAYBAY CITY</td><td></td></tr></tbody></table>		NAME	ADDRESS	TEL. NO.	DR. REMBERTO A. PATINDOL	OVPAF, VSU, VISCA, BAYBAY CITY	053-563-7108	DR. OTHELLO B. CAPUNO	OVPRE, VSU, VISCA, BAYBAY CITY	053-563-7485	DR. WINSTON M. TABADA	DCST, VSU, VISCA, BAYBAY CITY					
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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 case/s against me.																	
<table><tr><td colspan="2">Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</td></tr><tr><td>Government Issued ID:</td><td>DRIVER'S LICENSE</td></tr><tr><td>ID/License/Passport No.:</td><td>H12-10-000670</td></tr><tr><td>Date/Place of Issuance:</td><td>05/25/2019 / BAYBAY CITY</td></tr></table>	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.:	H12-10-000670	Date/Place of Issuance:	05/25/2019 / BAYBAY CITY	<table><tr><td colspan="2"></td></tr><tr><td colspan="2">Signature (Sign inside the box)</td></tr><tr><td colspan="2">8-9-2019</td></tr><tr><td colspan="2">Date Accomplished</td></tr></table>			Signature (Sign inside the box)		8-9-2019		Date Accomplished	
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SUBSCRIBED AND SWORN to before me this <u>09 AUG 2019</u> , affiant exhibiting his/her validly issued government ID as indicated above.																	
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