CS Fc No. 212 Revised 2017

RSONAL 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 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 10 No. (Do not fill up. For CSC use only 2 SURNAME . SALOMON NAME EXTENSION (JR., SR) JEDESS MILADEL FIRST NAME MIDDLE NAME NUÑEZ 3 DATE OF BIRTH 16 CITIZENSHIP 9/13/1985 ☑ Filipino Dual Citizenship (mm/dd/yyyy) ☐ by birth ☐ by naturalization HILONGOS, LEYTE 4 PLACE OF BIRTH If holder of dual citizenship, Pls. indicate country: please indicate the details ☐ Male ☑ Female 5 SEX v ☑ Married ☐ Single 17 RESIDENTIAL ADDRESS CHRIST BAPTIST CHURCH 6 CIVIL STATUS ☐ Widowed House/Block/Lot No. ☐ Separated GUADALUPE Other/s: Subdivision/Village Barangay BAYBAY CITY LEYTE 7. HEIGHT (in) 1.53 City/Municipality Province 8. WEIGHT (kg) 51 ZIP CODE 6521 8 PERMANENT ADDRESS CHRIST BAPTIST CHURCH 9. BLOOD TYPE 0 House/Block/Lat No GUADALUPE 10 GSIS ID NO. 006-0096-0006-5 Subdivision/Village Barangay BAYBAY CITY LEYTE 11. PAG-IBIG ID NO 1700-0032-6216 Province City/Municipality 12 PHILHEALTH NO 13-000089571-8 ZIP CODE 13. SSS NO. 053 563 7484 9 TELEPHONE NO. 14 TIN NO 265-207-498 20 MOBILE NO 09754776692 / 09121568513 15. AGENCY EMPLOYEE NO. V00363 1. E-MAIL ADDRESS (If any) jedess.salomon@vsu.edu.ph FAMILY BACKGROUND 22. SPOUSE'S SURNAME SALOMON 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyr) AME EXTENSION (JR., SR) JOSHUA JIREH AETHAN JOHN N. SALOMON FIRST NAME 8/23/2014 SOFIA YSSABELA N. SALOMON MIDDLE NAME SALA 12/15/2015 OCCUPATION PASTOR CHRIST BAPTIST CHURCH EMPLOYER/BUSINESS NAME BUSINESS ADDRESS GUADALUPE, BAYBAY CITY, LEYTE 053 563 7484 TELEPHONE NO 24 FATHER'S SURNAME NUÑEZ NAME EXTENSION UR., SRI FIRST NAME ELMER MIDDLE NAME MORENO 25. MOTHER'S MAIDEN NAME SURNAME CABELA FIRST NAME TESSIE MIDDLE NAME UNSON (Continue on separate sheet if necessary) SCHOLARSHIP PERIOD OF ATTENDANCE IGHEST LEVEL/ NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE YEAR **ACADEMIC** LEVEL UNITS EARNED GRADUATED (Write in full) HONORS (if not graduated) RECEIVED From To VISCA FOUNDATION ELEMENTARY **CHAIRMAN'S** ELEMENTARY 1990 1998 1998 SCHOOL (VFES) LIST LEYTE STATE UNIVERSITY SECONDARY 1998 2002 2002 WITH HONORS LABORATORY HIGH SCHOOL (LSULHS) VOCATIONAL! TRADE COURSE BACHELOR OF SCIENCE IN DEVELOPMENT MAGNA CUM COLLEGE LEYTE STATE UNIVERSITY (LSU) COMMUNICATION (DEVELOPMENT 2002 2006 2006 LAUDE JOURNALISM)
MASTER OF APPLIED ANTHROPOLOGY AND THE AUSTRALIAN NATIONAL ENDEAVOUR **GRADUATE STUDIES** PARTICIPATORY DEVELOPMENT (SOCIETY 2011 2010 2011 UNIVERSITY (ANU) AWARD AND ENVIRONMENT) SIGNATURE DATE 07/08/2019 CS FORM 212 (Revised 2017), Page 1 of 4

Manager Parkers	SERVICE ELIC	140000000000000000000000000000000000000				1	2037		201-1
7. CAR		1080 (BOARD/ BAR) UNDER	RATING	DATE OF			THE REPLY OF	LICENSE (if a	
В	SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE		(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT		Western .	NUMBER	Date of Validity
HONO	R GRADUATE	GRADUATE ELIGIBILITY (PD907)		Apr-06	LEYTE STATE UNIVERSITY (NO STATE UNIVERSITY)		W VISAYAS		
NON-PROFESSIONAL DRIVER'S LICENSE			12/19/2018	ANSPORTATION LAND BAYBAY DISTRICT OFFICE		H121001343	9/13/202		
. WORK	EXPERIENCE		(0	ontinue on seperate sheet	il'necessary)				
nclude pri	vate employme	nt. Start from your recen	t work) Descripti	on of duties should	be indicated in the attach	ed Work Ex	perience shee	t.	Bull.
	LUSIVE DATES mm/dd/yyyy)	POSITION T (Write in full/Do not			ENCY / OFFICE / COMPANY I/Do not abbreviate)	MONTHLY	SALARY/ JOB/ PAY GRADE (If upploable) & STEP (Format "00-0") INCREMENT	STATUS OF APPOINTMENT	GOVT SERVICE (Y/N)
1/2017	PRESENT	INSTRUCTO	OR III	1 P. C.	NATIONAL ABACA RESEARCH CENTER, VISAYAS STATE UNIVERSITY			PERMANENT	Y
/1/2015	12/31/2016	INSTRUCT	OR II	NATIONAL ABAC	A RESEARCH CENTER,	24000.00	SG 14 SG 13	CONTRACTUAL	Y
/1/2008	12/31/2014	INSTRUCT	ORI	NATIONAL ABAC	VISAYAS STATE UNIVERSITY NATIONAL ABACA RESEARCH CENTER, VISAYAS STATE UNIVERSITY			CONTRACTUAL	Y
1/2008	5/31/2008	SCIENCE RESEARC	H ASSISTANT	COMMISSION OF	COMMISSION ON HIGHER EDUCATION			CONTRACTUAL	Υ
/1/2007	10/31/2007	GRADUATE TEACHIN	IG ASSISTANT	DEPARTMENT	4000.00		CONTRACTUAL	Υ	
0/1/2006	2/28/2007	SCIENCE RESEA	RCH AIDE	PLANT OIL TE	8000.00		CONTRACTUAL	N	
/16/2006	9/15/2006	JOB ORDER		UNIVERSITY	4000.00		CONTRACTUAL	Υ	
8/01	IATURE	- Rome	(0	DATE	07/08/2019		CS FORM :	212 (Revised 2017), F	Page 2 of 4

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC /GO	VERNMENT	/ PEOPLE / V	OLUNTARY	ORGANIZA)	JS	8,1	
29 NAME & ADDRESS OF ORGANIZATION (Write in full)		(mm/c	VE DATES (d/yyyy)	NAMER OF HOURS		POSITIO	N/NATURE OF WORK
		From	To				
				1			
	Il root	inue on separatir s	hast Waterstein				
VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/	TRAINING P	ROGRAMS AT	TENDED				
(Start from the most recent L&D training program and include only the reinwart L&D				hief Executive Mana	gerial pasitional		
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING F	YOO OO ALLO		DATES OF DANCE		Type of LD		MANAGE TO THE STATE OF THE STAT
(Write in full)	THUSHAMS		td/yyyy)	NUMBER OF HOURS	(Managerial/ Sapervsory/		CONDUCTED/ SPONSORED BY (Write in full)
		From	To		Technical/etc)		
TRAINING-WORKSHOP ON IEC MATERIALS PRODUCTION		11/14/2017	11/15/2017	16.0	TECHNICAL		VISAYAS STATE UNIVERSITY
SEMINAR ON THE PHILIPPINE TECHNOLOGY TRANSFER ACT OF 2009 AI INTELLECTUAL PROPERTY POLICIES FOR VSU RESEARCHEI	RS	9/15/2016	9/15/2016	4.0	TECHNICAL		VISAYAS STATE UNIVERSITY
TRAINING-WORKSHOP ON WRITING AND PRESENTING PROPOSAL TOWA SCIENCE CULTURE IN EASTERN VISAYAS REGION	RDS BUILDING	10/1/2015	10/2/2016	16.0	TECHNICAL	ANTONIAL ACAD	WHIT OF SCENCE AND TECHNOLOGY, PHILIPPINES, DUTSTANDING UND SCENTIST, INC. AND WISHARD STATE UNMERSELY
					Alle-Artherites		Control and State Control of the State Control of t
						-	
	-						
	(Cont	loue on separate s	heef If necessary	1			
VIII. OTHER INFORMATION	S STATE	The same of	10000	EUR IN	1930 PH		and the state of t
31 SPECIAL SKILLS and HOBBIES 32.	NON	ACADEMIC DISTIN	ICTIONS / RECOX ir in full)	SNITION		33. MEM	BERSHIP IN ASSOCIATION/ORGANIZATION (Write in fulf)
						WOMEN	'S MISSIONS SOCIETY (WOMISSO)
						VISAYA	AS STATE UNIVERSITY FACULTY
							ASSOCIATION (VSUFA) AS STATE UNIVERSITY CREDIT
							COOPERATIVE (VISCCO)
	Enni	inse on separate s	heat If necessary	4			
SIGNATURE		The state of the s	DATE		07/08/2019		CS FORM 212 (Revised 2017), Page 3 of 4
25400	NO	_		1	- KONTONE (SE)		

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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 apppointed, a. within the third degree?		TI VES TIMO			
	b. within the fourth degree (for Local Government Unit - Care	☐ YES ☑ NO ☐ YES ☑ NO If YES, give details:				
35.	a. Have you ever been found guilty of any administrative offe	☐ 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 any court or tribunal?	☐ YES ☑ NO If YES, give details:				
37.	Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, en (abolition) in the public or private sector?	✓ YES NO If YES, give details: FINISHED CONTRACT				
38.	a. Have you ever been a candidate in a national or local electron are selection)?	☐ 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	☐ 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.	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, please specify ID No:				
41.	REFERENCES (Person not related by contanguantly or affinity to applican	f Appointee)				
	NAME	ADDRESS	TEL NO.			
	ROTACIO S. GRAVOSO	UNIVERSITY REVIEW CENTER, VSU	~ 6			
	CHRISTINA A. GABRILLO	DEPARTMENT OF DEVELOPMENT COMMUNICATION, VSU DEPARTMENT OF PEST MANAGEMENT.	525-0140-1023			
42.	RUBEN M. GAPASIN I declare under oath that I have personally accomplished the statement pursuant to the provisions of pertinent laws, authorize the agency head / authorized representative to misrepresentation made in this document and its attachmagainst me.	vsu is Personal Data Sheet which is a true, corules and regulations of the Republic overify/validate the contents stated herein	f the Philippines. I			
G E	overnment Issued ID (.e. Passport, GSIS, SSS, PRC, Driver's Loense, etc.) LEASE INDICATE ID Number and Date of Issuance overnment Issued ID: VSU EMPLOYEE ID //License/Passport No.: V00363 ate/Place of Issuance: 01/01/2017VISAYAS STATE UNIVERSITY	Signature (Sign inside the bo 07/08/2019 Date Accomplished	x) Right Thumbmark			
	SUBSCRIBED AND SWORN to before me this	TTY RYSAN CONTRIBUTION OF THE PROPERTY OF T	g his/har validly issued government ID as indicated above.			