CS Form No. 212									
Revised 2017	PERSO	ONAL DAT	A SL	IEE.	r				
concerned.	tation made in the Personal Data Sheet and					criminal case/s a	gainst the pe	rson	
READ THE ATTACHED GUIDE Print legibly. Tick appropriate box	E TO FILLING OUT THE PERSONAL DATAS tes (	SHEET (PDS) BEFORE ACCOM dicate N/A if not applicable. DO N	IPLISHING THE	PDS FORM	1. CS ID No.		(Do not fill up.	For CSC use on	
I. PERSONAL INFORMATI									
2. SURNAME	LAYOLA								
FIRST NAME	LESTER					NAME EXTENSION (J	R., SR) N/A		
MIDDLE NAME	GUARTE								
DATE OF BIRTH     (mm/dd/yyyy)	1/5/1988	16. CITIZENSHIP		☑ Filip	по Г	Dual Citizenship			
							by naturali	zation	
4. PLACE OF BIRTH	MAASIN CITY, SO.LEYTE	If holder of dual citiz				Pls. indicate	country:	r.	
5. SEX	☑ Male ☐ Female	please indicate the	details.				•		
6 CIVIL STATUS	☐ Single ☑ Married ☐ Widowed ☐ Separate	17. RESIDENTIAL ADDRESS	Ho	una/Dlank/Lat I			Street		
	☐ Widowed ☐ Separated ☐ Other/s:		CABULI			CABULIHAN	LIHAN		
7. HEIGHT (m)	1.70			ubdivision/Villag MAASIN			Barangay SO. LEYTE  Province		
8. WEIGHT (kg)	78	ZIP CODE		City/Municipality	1	6600			
9. BLOOD TYPE	0+	18. PERMANENT ADDRESS							
10. GSIS ID NO.	N/A		Ho	use/Block/Lot I	Vo.		Street SANTA CRUZ		
			St	ibdivision/Villag	je .		Barangay		
11. PAG-IBIG ID NO.	1212-0137-3331			BAYBAY City/Municipality			LEYTE Province		
12. PHILHEALTH NO.	13-000103431-7	ZIP CODE	6521 - A		6521 - A				
13. SSS NO.	06-2644013-8	19. TELEPHONE NO.	N/A						
14. TIN NO.	413-564-615	20. MOBILE NO.	09164079553						
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)	lester.layola@vsu.edu.ph						
II. FAMILY BACKGROUND	D						Section 1		
22. SPOUSE'S SURNAME	LAYOLA		23. NAME of CH	IILDREN (Writ	e full name and	i list all)	DATE OF BIR	TH (mm/dd/yyyy	
FIRST NAME	BRENDA	NAME EXTENSION (JR., SR)	ZEITH IVAN G. LAYOLA		3/18/2013				
MIDDLE NAME	GUALBERTO		ZOEY IVORY G. LAYOLA			1/4	/2019		
OCCUPATION	HOUSEWIFE								
EMPLOYER/BUSINESS NAME	N/A								
BUSINESS ADDRESS	N/A								
TELEPHONE NO.	N/A								
24. FATHER'S SURNAME	LAYOLA								
FIRST NAME	EFREN	NAME EXTENSION (JR., SR) SR							
MIDDLE NAME	AROY								
25. MOTHER'S MAIDEN NAME									
SURNAME	GUARTE								
FIRST NAME	VIRGINIA								
MIDDLE NAME	CARINO			(0	ontinue on se	parate sheet if neces	ssary)		
III. EDUCATIONAL BACK	GROUND							SCHOLARSHIP	
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGF (Write in full)		PERIOD OF	ATTENDANCE To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	ACADEMIC HONORS RECEIVED	
ELEMENTARY	CABULIHAN ELEMENTARY SCHOOL	ELEMENTARY	,	1995	2001	N/A	2001	N/A	
SECONDARY	GUADALUPE NATIONAL HIGH SCHOOL	HIGH SCHOOL		2001	2005	N/A	2005	N/A	
VOCATIONAL / TRADE COURSE	N/A	N/A		N/A	N/A	N/A	N/A	N/A	
COLLEGE	SAINT JOSEPH COLLEGE, MAASIN, SO.LEYT	E BS IN BUSINESS ADMINISTRATION RESOURCE DEVELOPMENT			2022	170 units	N/A	N/A	

GRADUATE STUDIES

SIGNATURE

N/A

N/A

N/A

June 29, 2022

N/A

DATE

NIA

N/A

7. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE RATING		DATE OF	TION / OCHECT	MENT	LICENSE (if applicable)				
BAF		LITY / DRIVER'S LICENSE	(If Applicable)	EXAMINATION / PLACE OF EXAMINATION / CONFERMENT CONFERMENT		NUMBER	Date of Validity		
	N	Α,	N/A	N/A	N/A		N/A	N/A	
	,								
									-
-									
			(Cont	inue on separate sheet if	nanassani)				
V. WORK E	XPERIENCE		Cont	indo on separate sireet n	Hetessery				
		nt. Start from your recent	t work) Description (	of duties should be in	ndicated in the attached	Work Exper	EMISSION CONTRACTOR OF THE PERSON NAMED IN		
	SIVE DATES n/dd/yyyy)	POSITION T (Write in full/Do not			ICY/OFFICE/COMPANY	MONTHLY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP	STATUS OF APPOINTMENT	GOV'T SERVICE
From	То	(write in full/Do not	appreviate)	(VALUE IN TUINE	o not abbreviate)	SALARY	(Format *00-0*)/ INCREMENT	APPOINTMENT	(Y/N)
09/15/2015	PRESENT	BUYER / CANV	ASSER	PROCURE	MENT OFFICE	9,964.80	N/A	JO	NO
1/15/2011	3/31/2020	WELDER FABRICATOR (MAIN	TENANCE PROVIDER)	KIMES FOOD IN	TERNATIONAL INC.	20,000.00	N/A	TEMP.	NO
10/1/2009	9/14/2015	MACHINE OPE	RATOR	VSU SPR	ING WATER	8,640.00	N/A	JO	NO
	***************************************								
			(Comb	inue on separate sheet if i	nacassarul				
SIGNA	TURE	1	1	Ton Soparato Silvet II	DATE			June 29, 2022	
		(//1	1						017), Page 2 of

VI. VOLUNTARY WORK OR INVOLVEMENT IN	CIVIC / NON-GOVERNMENT	/PEOPLE/\	OLUNTARY	ORGANIZATIOI	V/S		
29. NAME & ADDRESS OF ORGA (Write in full)	NIZATION	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POOLITION ANATURE OF WORK		
<b>(</b>		From To		Transcription for the state of	POSITION / NATURE OF WORK		
N/A		N/A	N/A	N/A		N/A	
	*						
		1					
-							
VII. LEARNING AND DEVELOPMENT (L&D) IN	(Col TERVENTIONS/TRAINING PI	ntinue on separate ROGRAMS A1	sheet if necessary				
Start from the most recent L&D/training program and include on				f/Executive/Manager	ial positions)		
30. TITLE OF LEARNING AND DEVELOPMENT INTERVE	ENTIONS/TRAINING PROCRAMS		E DATES OF NDANCE		Type of LD		
(Write in full)	A HONOL HANNING I ROCKHING	(mm/dd/yyyy)		NUMBER OF HOURS	(Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
Target Setting Workshop		From	То		Tearnicaretty		
		8/20/2018	8/21/2018	16	TECHNICAL	VSU	
Orientation Workshop Among J.O. Clerks & Laboratory Technicia	ins	1/15/2019	1/15/2019	8	TECHNICAL	VSU	
In- House Training on Republic Act 9184 and the 2016 Revised	mplementing Rules and Regulations						
firtual Training on 9184 and its Revised Implementing Rules and	Regulations						
Philippine Government Electronic Procurement System (PhiliGEP	S) Online Training for Buyers	5/30/2022	5/31/2022	16	TECHNICAL	VSU	
	(Cont	tinue on separate :	sheet if necessary)				
III. OTHER INFORMATION			1.20				
31. SPECIAL SKILLS and HOBBIES 32	NON-	ACADEMIC DISTIN (Write	ICTIONS / RECOG! in full)	NITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
N/A	1972 A	)/A				KNIGHTS OF COLUMBUS	
		•					
SIGNATURE	(Conf	inue on separate s	neet if necessary)	043	re I	L	
ONTATIONE	- CALA	1		DAT	E	June 29, 2022	
	100					CS FORM 212 (Revised 2017), Page 3 of	

MANAGAGINA SA							
34.	Are you related by consanguinity or affinity to the appointing thief of bureau or office or to the person who has immediately bureau or Department where you will be appointed,	ng or recommending authority, or to the ate supervision over you in the Office,					
	a. within the third degree?	YES V	O				
	b. within the fourth degree (for Local Government Unit - C	☐ YES ☑ N	NO				
		If YES, give details:					
35.	a. Have you ever been found guilty of any administrative of	offense?	☐ YES ☑ N	NO.			
			If YES, give details:	VO			
			ii i Lo, 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	any law, decree, ordinance or regulation by	☐ YES ☑	NO.			
	any court or tribunal?		If YES, give details:	NO			
			ii i Lo, give details.				
07							
37.	Have you ever been separated from the service in any of t	he following modes: resignation, retirement,		NO			
	dropped from the rolls, dismissal, termination, end of term in the public or private sector?	, illustied contract or phased out (abolition)	If YES, give details:				
00		action hald within the Let	A				
38.	a. Have you ever been a candidate in a national or local el Barangay election)?	ection held within the last year (except	☐ YES ☑ NO				
	Samuel State of State		If YES, give details:				
	b. Have you resigned from the government service during		☐ YES ☐	Z NO			
	election to promote/actively campaign for a national or local	al candidate?	If YES, give details:				
39.	Have you acquired the status of an immigrant or permaner	nt resident of another country?	☐ YES ☑ NO				
			☐ YES ☑ If YES, give details (cou				
			11 1 LO, give details (ood	muy).			
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma	anna Carta for Disabled Persons (RA 7077)					
	and (c) Solo Parents Welfare Act of 2000 (RA 8972), please	se answer the following items:					
a.	Are you a member of any indigenous group?			7			
	,		YES Specify:	√ NO			
b.	Are you a person with disability?			Z NO			
			If YES, please specify ID N				
C.	Are you a solo parent?		☐ YES ☑ NO				
			If YES, please specify ID N				
41.	REFERENCES (Person not related by consanguinity or affinity to applica	ant (annointee)					
		ant rappointee)		A 1980			
	NAME	ADDRESS	TEL. NO.				
	Moises Neil V. Serino, PhD	VSU	9363706515				
	Jessamine C. Ecleo	VSU	0005550400	(00)			
	- Cooperation of Editor	750	9985550106				
	Alicia M. Flores	VSU	9176341430				
42.	I declare under oath that I have personally accomplished	ed this Personal Data Sheet which is a tr	ue, correct and				
	complete statement pursuant to the provisions of perti	nent laws, rules and regulations of the f	Republic of the				
	Philippines. I authorize the agency head/authorized repres	entative to verify/validate the contents state	d herein.				
	agree that any misrepresentation made in this doc administrative/criminal case/s against me.	sument and its attachments shall cause	the filing of	PĤOTO			
	and the second against me,						
Go	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)			All the same of th			
PL	EASE INDICATE ID Number and Date of Issuance						
Go	overnment Issued ID:	1 (1.4)					
ID/	/License/Passport No.:	700					
10/1	Licenser assport No	x)					
Dat	te/Place of Issuance:		Right Thumbmark				
-		Date Accomplished		Ngit Humbhaix			
	SUBSCRIBED AND SWORN to before me this	, affiant exhibit	ng his/her validly issued govern	nment ID as indicated above.			
	_	Al					
	2000 - 1200 S						