

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	BANTUGAN		
FIRST NAME	MARIO	NAME EXTENSION (JR., SR)	
MIDDLE NAME	COSMIANO		
3. DATE OF BIRTH (mm/dd/yyyy)	5/7/1965	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	SURIGAO DEL SUR	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:		
7. HEIGHT (m)	5'5	17. RESIDENTIAL ADDRESS	House/Block/Lot No. Street VSU PANGASUGAN Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
8. WEIGHT (kg)	58 KG.	ZIP CODE	6521-A
9. BLOOD TYPE	"AB"	18. PERMANENT ADDRESS	House/Block/Lot No. Street PATAG Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
10. GSIS ID NO.		ZIP CODE	6521
11. PAG-IBIG ID NO.	1700-0024-2125	19. TELEPHONE NO.	NONE
12. PHILHEALTH NO.	13-000014459-3	20. MOBILE NO.	09102014159
13. SSS NO.	NONE	21. E-MAIL ADDRESS (if any)	NONE
14. TIN NO.	116-623-153		
15. AGENCY EMPLOYEE NO.	V000089		


II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	BANTUGAN		23. NAME OF CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	JULIA	NAME EXTENSION (JR., SR)	MONIEN A. BANTUGAN	9/13/1987
MIDDLE NAME	ABRILLO		MA. LOREMAE A. BANTUGAN	3/1/1991
OCCUPATION	NONE			
EMPLOYER/BUSINESS NAME	JM. STORE / SARI-SARI STORE			
BUSINESS ADDRESS	VSU, BAYBAY CITY, LEYTE			
TELEPHONE NO.	NONE			
24. FATHER'S SURNAME	BANTUGAN			
FIRST NAME	ANTONIO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	TORION			
25. MOTHER'S MAIDEN NAME				
SURNAME	COSMIANO			
FIRST NAME	MAURA			
MIDDLE NAME	ARIATE		(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	FALCON ELEM. SCHOOL	N/A	1971	1977	GRADUATED	1977	NONE
SECONDARY	PURISIMA HIGH SCHOOL	N/A	1977	1983	GRADUATED	1983	NONE
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	N/A	N/A	N/A	N/A	N/A	N/A	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	April 25, 2017	CS FORM 212 (Revised 2017), Page 1 of 4
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IV. CIVIL SERVICE ELIGIBILITY

[illegible]


(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

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

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE		DATE	April 25, 2017	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

[illegible]

(Continue on separate sheet if necessary)

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

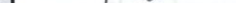
(Start from the most recent L&D/training program and include only the relevant L&D/training taken for the last five (5) years for Division Chief/Executive/Managerial positions)




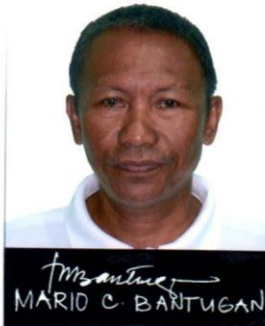

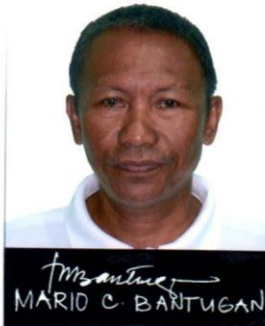

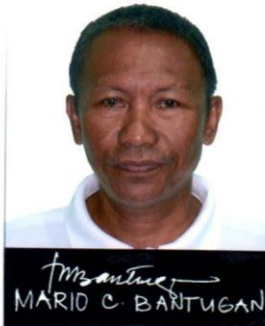




[illegible]

(Continue on separate sheet if necessary)

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
DRIVING	N/A	AdPA
CARPENTER, FURNITURE	N/A	KNIGHT OF COLUMBUS
PLAYING OF GUITAR	N/A	

(Continue on separate sheet if necessary)

SIGNATURE		DATE	April 25, 2017	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>ENGR. NESTOR M. ISRAEL</td><td>BAYBAY CITY, LEYTE</td><td>NONE</td></tr><tr><td>DR. SERENA L. SANCHEZ</td><td>MARCOS, BAYBAY CITY, LEYTE</td><td>NONE</td></tr><tr><td>DR. NERELITO P. PASCUAL</td><td>VSU, BAYBAY CITY, LEYTE</td><td>NONE</td></tr></tbody></table>		NAME	ADDRESS	TEL. NO.	ENGR. NESTOR M. ISRAEL	BAYBAY CITY, LEYTE	NONE	DR. SERENA L. SANCHEZ	MARCOS, BAYBAY CITY, LEYTE	NONE	DR. NERELITO P. PASCUAL	VSU, BAYBAY CITY, LEYTE	NONE
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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>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: VSU ID V000089</td></tr><tr><td>ID/License/Passport No.: DRIVERS LICENSE H03-93-017952</td></tr><tr><td>Date/Place of Issuance: 2013, VSU, BAYBAY CITY, LEYTE</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: VSU ID V000089	ID/License/Passport No.: DRIVERS LICENSE H03-93-017952	Date/Place of Issuance: 2013, VSU, BAYBAY CITY, LEYTE	<table><tr><td></td></tr><tr><td>Signature (Sign inside the box)</td></tr><tr><td>Date Accomplished</td></tr></table>		Signature (Sign inside the box)	Date Accomplished					
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SUBSCRIBED AND SWORN to before me this <u>APR 25 2017</u> , affiant exhibiting his/her validly issued government ID as indicated above.													
<table><tr><td></td></tr><tr><td>ATTY. RYSAN J. GUINOCOR</td></tr><tr><td>NOTARY PUBLIC</td></tr><tr><td>UNTIL DEC 31, 2017</td></tr><tr><td>Person Administering Oath</td></tr><tr><td>DTR 819585 - BAYBAY/LEYTE - 1/12/17</td></tr><tr><td>IBP 1836424 - TAGLOBAN CITY - 12/19/16</td></tr><tr><td>MCLE COMP. NO. V. 082201 - 11/20/15</td></tr><tr><td>ROLL OF ATTORNEYS NO. 57467</td></tr></table>			ATTY. RYSAN J. GUINOCOR	NOTARY PUBLIC	UNTIL DEC 31, 2017	Person Administering Oath	DTR 819585 - BAYBAY/LEYTE - 1/12/17	IBP 1836424 - TAGLOBAN CITY - 12/19/16	MCLE COMP. NO. V. 082201 - 11/20/15	ROLL OF ATTORNEYS NO. 57467			
													
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