

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	Torion		
FIRST NAME	Charlindo	NAME EXTENSION (JR., SR)	
MIDDLE NAME	Siega		
3. DATE OF BIRTH (mm/dd/yyyy)	9/6/1992	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, Leyte	If holder of dual citizenship, please indicate the details.	
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		
6. CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	Curba 2 House/Block/Lot No. Street Villa Solidaridad Subdivision/Village Barangay Baybay Leyte City/Municipality Province ZIP CODE 6521
7. HEIGHT (m)	1.65	18. PERMANENT ADDRESS	Curba 2 House/Block/Lot No. Street Villa Solidaridad Subdivision/Village Barangay Baybay Leyte City/Municipality Province ZIP CODE 6521
8. WEIGHT (kg)	64		
9. BLOOD TYPE	B+		
10. GSIS ID NO.			
11. PAG-IBIG ID NO.	121136827336	19. TELEPHONE NO.	
12. PHILHEALTH NO.	002019957202	20. MOBILE NO.	09057164184
13. SSS NO.	3449522191	21. E-MAIL ADDRESS (if any)	charlindotorion@gmail.com
14. TIN NO.	337-866-195-000		
15. AGENCY EMPLOYEE NO.	V00934		

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	NA		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME		NAME EXTENSION (JR., SR)		
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	Torion			5/28/1967
FIRST NAME	Charlito	NAME EXTENSION (JR., SR)		
MIDDLE NAME	Peders			
25. MOTHER'S MAIDEN NAME				11/11/1963
SURNAME	Siega			
FIRST NAME	Teresita			
MIDDLE NAME	Amolato		(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	Villa Solidaridad Elem. School	NA	6/1/1999	3/31/2005	Graduated	2005	Valedictorian
SECONDARY	Makinhas Nat'l High School	NA	6/1/2005	3/31/2009	Graduated	2009	1st Hon. Mention
VOCATIONAL / TRADE COURSE	NA						
COLLEGE	Visayas State University	BS Meteorology	6/1/2009	5/10/2014	Graduated	2014	NA
GRADUATE STUDIES	University of the Philippines-Diliman	MS Meteorology	8/8/2016	present	continuing	NA	NA

(Continue on separate sheet if necessary)

SIGNATURE		DATE	June 29, 2020	CS FORM 212 (Revised 2017), Page 1 of 4
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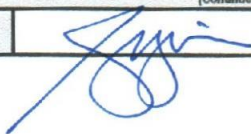
[illegible]

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







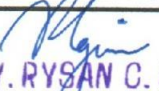
(Continue on separate sheet if necessary)

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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			
DOST-SEI Science Explorer Camp - Iloilo	2/25/2018	3/4/2018	40.0	Facilitator/Resource Person	
DOST-SEI Science Explorer Camp - Northern Samar	6/18/2018	6/22/2018	40.0	Facilitator/Resource Person	
(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			
International School on Atmospheric Radars 2018 (ISAR-2018)	11/12/2018	11/16/2018	40 hours	Technical	National Central University, Taoyuan District, Taiwan
International School on Equatorial Atmosphere 2019 (ISQUAR-2019)	3/18/2019	3/22/2019	40 hours	Technical	Kyoto University, Japan and National Institute for Space and Aeronautics, Bandung, Indonesia
Advance Supervisory Skills	11/12/2019	11/15/2019	32 hours	Administrative	Personnel Officers Association of the Phils.
(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)	
Python Programming Language	NA			Terrestrial and Aquatic Restoration by Students Immersed in Environmental Reform	
Badminton					
(Continue on separate sheet if necessary)					
SIGNATURE		DATE		CS FORM 212 (Revised 2017), Page 3 of 4	



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<p>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,</p> <p>a. within the third degree?</p> <p>b. within the fourth degree (for Local Government Unit - Career Employees)?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>35. a. Have you ever been found guilty of any administrative offense?</p> <p>b. Have you been criminally charged before any court?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p style="text-align: right;">Date Filed: _____</p> <p style="text-align: right;">Status of Case/s: _____</p>												
<p>36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>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?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?</p> <p>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?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>39. Have you acquired the status of an immigrant or permanent resident of another country?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details (country): _____</p>												
<p>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:</p> <p>a. Are you a member of any indigenous group?</p> <p>b. Are you a person with disability?</p> <p>c. Are you a solo parent?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p>												
<p>41. REFERENCES (Person not related by consanguinity or affinity to applicant/appointee)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 40%;">NAME</th> <th style="width: 40%;">ADDRESS</th> <th style="width: 20%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>Engr. Epifania G. Loreto</td> <td>Visca Baybay City, Leyte</td> <td></td> </tr> <tr> <td>Dr. Roberto C. Guarte</td> <td>Visca Baybay City, Leyte</td> <td></td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	Engr. Epifania G. Loreto	Visca Baybay City, Leyte		Dr. Roberto C. Guarte	Visca Baybay City, Leyte				
NAME	ADDRESS	TEL. NO.											
Engr. Epifania G. Loreto	Visca Baybay City, Leyte												
Dr. Roberto C. Guarte	Visca Baybay City, Leyte												
<p>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.</p>													
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)</td> </tr> <tr> <td colspan="2">PLEASE INDICATE ID Number and Date of Issuance</td> </tr> <tr> <td>Government Issued ID:</td> <td>SSS</td> </tr> <tr> <td>ID/License/Passport No.:</td> <td>3449522191</td> </tr> <tr> <td>Date/Place of Issuance:</td> <td>BGC Taguig 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:	SSS	ID/License/Passport No.:	3449522191	Date/Place of Issuance:	BGC Taguig City	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center; height: 100px;">  Signature (Sign inside the box) Date Accomplished: 6/29/2020 </td> <td style="text-align: center; height: 100px;">  Right Thumbmark </td> </tr> </table>	 Signature (Sign inside the box) Date Accomplished: 6/29/2020	 Right Thumbmark
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<p>SUBSCRIBED AND SWORN to before me this <u>03 AUG 2020</u>, affiant exhibiting his/her validly issued government ID as indicated above.</p> <div style="text-align: center; margin-top: 20px;">  ATTY. RYSAN C. GUINOCOR SOLICITOR GENERAL Person Administering Oath </div>													

WORK EXPERIENCE SHEET

Instructions: 1. Include only the work experiences relevant to the position being applied to.

2. The duration should include start and finish dates, if known, month in abbreviated form, if known, and year in full. For the current position, use the word Present, e.g., 1998-Present. Work experience should be listed from most recent first.

- Duration: 2016-Present
- Position: Instructor 1
- Name of Office/Unit: Department of Meteorology
- Immediate Supervisor: Daniel C. Lor
- Name of Agency/Organization and Location: Visayas State University, Visca, Baybay, Leyte
- List of Accomplishments and Contributions (if any)
-N/A
- Summary of Actual Duties
 - Handle lectures and laboratory exercises in Meteorology and physical sciences
 - Conduct researches in Meteorology and physical sciences


CHARLINDO S. TORRION
(Applicant)

Date: 7/20/2020