CS Form No. 212 Revised 2017	Trabutes A	201	IAI DAT			gady etad 3	1965 Jun 1873 1875	909-12:0 -42		
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concerned.	ion made in the Personal Data Sheet					nistrative/c	riminal case/s ag	ainst the per	rson	
READ THE ATTACHED GUIDE Print legibly. Tick appropriate boxes	TO FILLING OUT THE PERSONAL DA	Indicate N/A	(PDS) BEFORE ACCOMPL if not applicable. DO NOT ABI	ISHING THE I		1. CS ID No.	rada textili bile	(Do not fill up.	For CSC use only	
I. PERSONAL INFORMATIO										
2. SURNAME	BUSTILLO	du.								
FIRST NAME	NOEL						NAME EXTENSION (JR	L, SR)		
MIDDLE NAME	CENTINO									
DATE OF BIRTH (mm/dd/yyyy)	August 15, 1961	. 11	16. CITIZENSHIP			☑ Filipino ☐ Dual Citizenship ☐ by birth ☐ by naturalization				
4. PLACE OF BIRTH	BAYBAY, LEYTE		If holder of dual citizen	ship,			by birth by naturalization Pls. indicate country:			
5. SEX	☑ Male ☐ Fem	male	please indicate the de	tails.			3 1 1		-	
6 CIVIL STATUS	☐ Single ☑ Marr	illeu	7. RESIDENTIAL ADDRESS		672			A. BONIFACIO		
	☐ Widowed ☐ Sepa	parated		Ног	use/Block/Lot No).		Street ZONE 12		
	Other/s:	e e e e e e e e e e e e e e e e e e e	TO COLUMN TO THE PARTY.	Su	bdivision/Village)		Barangay		
7. HEIGHT (m)	5'3"		SNB CONTRACTOR CONTRACTOR	C	BAYBAY http://www.icipality	The Market Trans		LEYTE Province		
8. WEIGHT (kg)	70kg	Your e	ZIP CODE		iye Aide gi	ad Solmin	6521	0851 9 110	minuto	
9. BLOOD TYPE	H A COS 100.74	11	8. PERMANENT ADDRESS	Ног	672 use/Block/Lot No	la dintab.	A ale	A. BONIFACIO Street	Crods	
10. GSIS ID NO.	B61QFNCB018 / 6108150294	142	Vient State United	Su	bdivision/Village	latiament.	A	ZONE 12 Barangay	051P0/3049	
11. PAG-IBIG ID NO.	1700-0024-3857	y die	Visigna State Univ		BAYBAY city/Municipality		3	LEYTE Province	12000	
12. PHILHEALTH NO.	13-00001567-4	V4	ZIP CODE		THE RESERVE THE PERSON NAMED IN COLUMN	W yEERy W	6521	MARIE NO	STO OF E	
13. SSS NO. 304 . 1999 (1999)	N/A	erunipoing 19	9. TELEPHONE NO.		l healto	W O TH	N/A S	ocucied to	05/104/20	
14. TIN NO. 239 / / / / / / / / / / / / / / / / / / /	116-623-475	nalledis 2	0. MOBILE NO.		Tasko	+639	268465816	usius anti ove	Q11101/20	
15. AGENCY EMPLOYEE NO.	V000123	nutiushe 2	1. E-MAIL ADDRESS (if any)		orker	norienoe	el@yahoo.cor	nurser ce	10/01/11	
II. FAMILY BACKGROUND									No. of Control	
22. SPOUSE'S SURNAME	BAT	THAN		23. NAME of CH	ILDREN (Write	full name and	list all)	DATE OF BIR	RTH (mm/dd/yyyy)	
FIRST NAME	NORIETA	. N	AME EXTENSION (JR., SR)	N	ORIEL JOH	N B. BUST	TILLO	8/3	0/1991	
MIDDLE NAME	DIC	DAL	30 ejjuhuJ alsjd as jsciv	N	ORIEL GAY	Y B. BUST	TILLO	8/5	5/1993	
OCCUPATION	Gov't E	Employee	de Agaile College of	N	ORIEL JED	B. BUST	TLLO	10/1	11/1995	
EMPLOYER/BUSINESS NAME	VISAYAS STAT	TE UNIVER	VISAVAS STATE VIIS		NORWEL	B. BUSTIL	LO	8/2	4/1999	
BUSINESS ADDRESS	N	N/A								
TELEPHONE NO.	N	N/A								
24. FATHER'S SURNAME	BUSTILLO	(Decease	ed)							
FIRST NAME	VICENTE	N	AME EXTENSION (JR., SR)							
MIDDLE NAME	DA	JAO								
25. MOTHER'S MAIDEN NAME										
SURNAME	CEN	NTINO								
FIRST NAME		RMINA				-				
MIDDLE NAME		YONE			(Co	untinua on ear	parate sheet if neces	e and		
III. EDUCATIONAL BACKG		OIIL			the second of th	manue on sep	Anate Sheet II heces	sury/		
26.							HIGHEST LEVEL/		SCHOLARSHIP/	
LEVEL	NAME OF SCHOOL (Write in full)		BASIC EDUCATION/DEGRE (Write in full)	E/COURSE	PERIOD OF A	To	UNITS EARNED (if not graduated)	YEAR GRADUATED	ACADEMIC HONORS RECEIVED	
ELEMENTARY	ESQUINA COMMUNITY SCHOOL		Primary Educati	on ,	1967	1974		1974	N/A	
SECONDARY	BAYBAY HIGH SCHOOL		High School		1974	1980		1980	N/A	
VOCATIONAL / TRADE COURSE										
COLLEGE .	FRANCISCAN COLLEGE OF IMMACUL CONCEPTION	ILATE	BS COMMERCE (Accou	unting)	1980	1985		1985	N/A	
GRADUATE STUDIES				-	0.1			300 TE P59 IS		

DATE

SIGNATURE

7. CAREE	R SERVICE/ RA 108	ERVICE/ RA 1080 (BOARD/ BAR) UNDER RATING DATE OF			, LICENSE (if applicable)				
		//DRIVER'S LICENSE	(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT			NUMBER	Date of Validity
	di tamiga amaa		re the filing of ad	so lianz 1996 a sone	heet and the Work Oxphile LDATA SHEET (F.OS) BE		LUNG DULL	HO3-97-017157	
·	rofessional Driv	ver License	N/A	N/A	Some on IrAM evenual tress	UHG DUTTHE PERSONAL DATA SHEAT (PDS) B diese senselestere i Nacasen, licerore NA illeri eur			08/15/2019
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OU STATE	serval j	2 /gF3				Tre In	AT .		1
			(0	Continue on separate she	eet if necessary)		- 4		
	EXPERIENCE		cent work) Descrin	tion of duties shoul	d he indicated in the attac	hed Work Fx	nerience she		
INCLU (mr	SIVE DATES n/dd/yyyy)	POSITION T (Write in full/Do not	ITLE	DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)		MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/	STATUS OF APPOINTMENT	GOVT SERVICE (Y/N)
From 1/01/2017	Present	Administrative	Aide III	Vicavas	State University	11,387.00	SG 3	Permanent	yes
1/01/2016	12/31/2016	Administrative			State University	10,400.00	\$G3	Permanent	yes
/01/2015	12/31/2015	Administrative	e Aide III	Visayas	State University	10,040.00	SG 3	Permanent	yes
/01/2004	07/31/2015	Administrativ	re Aide I	Visayas	State University	9,365.00	SG1-S5	Permanent	yes
/01/2002	11/30/2004	Utility Wo	rker I	Leyte S	5,208.94	SG1-S2	Permanent	yes	
701/2001	09/30/2002	Utility Wo	rker I	Visayas State	5,082.00		Permanent	yes	
/01/2000	06/30/2001	Utility Wo	rker I	Visayas State	4,840.00		Permanent	yes	
701/1999	12/31/1999	Utility Wo	rker I	Visayas State	4,400.00		Permanent	yes	
/01/1996	09/30/1999	Utility Wo	rker I	Visayas State	4,400.00		Casual	yes	
I/01/1995	12/31/1995	Utility Wo	rker I	Visayas State College of Agriculture		3,800.06		Casual	yes
1/01/1994	12/31/1994	Utility Wo	rker I	Visayas State College of Agriculture		2,799.72		Casual	yes
7/01/1989	12/31/1993	Utility Wo	rker LIAOM	Visayas State College of Agriculture		1,999.80		Casual	yes
5/22/89	06/30/1989	O LINE Labore	PWRON	Visayas State	College of Agriculture	722.90		Casual	yes
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A\u 1	801 ·	(66)	1261	High School		CHOS NOS Y	E/AB		9 qs.
SIGN	ATURE		lally		DATE	HOITSTON	1/29/	17	+

CIVIL SERVICE ELIGIBILITY

	NAME & ADDRESS OF ORGANIZATION (Write in full)		INCLUSIVE DATES (mm/dd/yyyy)			POSITION / NATURE OF WORK
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	(6	Continue on separate	sheet if necessary			
LEARNING AND DEVELOPMENT (L&D) II						
t from the most recent L&D/training program and includ	e only the relevant L&D training taken.	for the last five (5) yea	ars for Division Ch	iel/Executive/Manag	erial positions)	
TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TR	AINING PROGRAMS (Write		S OF ATTENDANCE	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY
full)						(Write in full)
V" in the WorkPlace Seminar	Mr. 2/6, 2-11 f	From .	To		recinicaretc)	THE BOOK YELDER
Life [V]	- D. D. Jan	12/9/2016	12/9/2016	4hrs	19.11 N	Visayas State University
ing Workshop on the Preparation and Processing	g of Documents Relative to	05/27/15	05/27/15	4hrs	15/10/01/2	Supply Procurement and Property Management
curement.		Sylveton	Landryig 1s to	en and and	200 12 12 12	Office 10 0 10 10 10 10 10 10 10 10 10 10 10 1
trical Installation & Maintenance NCII	61 LJ .	03/'03/2011	03 / '04 /2011	16 hrs		(TESDA) Technical Educational and
Name on DA 0494 and Name of Day	Mahash out a least	07/00/0040	27/ 22/22/2			Skills Development Authority
ing on RA. 9184 and its revised (Module I,liand V)		07/ 29/ 2010	07/ 29/2010	8hrs	10000	DBM RO VIII Misayas State University
inar on Basic Wifi and Windows Operating Syst.		04/ '07/ 2010	04/ '07/ 2010	8hrs	A STATE OF THE STA	ICTU, Visayas State University
Care Seminar		02/24/2010	'02/ 24/ 2010	4hrs	SHOP IN W	College of Veterinary Medicine
puter Maintainace, Security & Appriciation Open	######################################					a sa a stranga and a stranga a
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OTHER INFORMATION		*				
SPECIAL SKILLS and HOBBIES	32. N	ION-ACADEMIC DISTIN		NITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZA
		(Write	e in full)		T.	(Write in full)
Electrical Installation Maintenance	113					
Minor Repair of Plumbing	- fragalisa	and Assistances				ADAMAS NU OMEGA
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chief of bureau or office or to the person who has immedia						
Bureau or Department where you will be apppointed,	Harris Control	_	A 'gra,			
a. within the third degree?		☑ NO				
b. within the fourth degree (for Local Government Unit - Co	☐ YES If YES, give details	☑ NO				
35. a. Have you ever been found guilty of any administrative of	☐ 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 any court or tribunal?	any law, decree, ordinance or regulation by	☐ YES ☑ NO If YES, give details:				
37. Have you ever been separated from the service in any of retirement, dropped from the rolls, dismissal, termination, (abolition) in the public or private sector?	☐ YES ☑ NO If YES, give details:					
38. a. Have you ever been a candidate in a national or local e Barangay election)?	YES If YES, give deta	✓ NO ills:				
b. Have you resigned from the government service during election to promote/actively campaign for a national or loc	☐ YES ☑ NO If YES, give details:					
39. Have you acquired the status of an immigrant or permane	☐ YES ☑ NO If YES, give details (country):					
 Pursuant to: (a) Indigenous People's Act (RA 8371); (b) N 7277); and (c) Solo Parents Welfare Act of 2000 (RA 897) 			(Modele Liverery) Sent on Euric William in down Operating Syst			
Are you a member of any indigenous group?	☐ YES ☑ NO					
2. Are you a person with disability?	If YES, please specify: ☐ YES					
Are you a person with disability?	Are you a person with disability?					
c. Are you a solo parent?	If YES, please specify ID No: ☐ YES ☑ NO If YES, please specify ID No:					
41. REFERENCES (Person not related by consanguinity or affinity to applica	nt /appointee)					
NAME	ADDRESS	TEL NO.				
BAGOT, MELVIN A.	Visayas State University	N/A	100			
TULIN, ALIX P.	Visayas State University	N/A				
POTUGALIZA, HARVIE	Visayas State University	N/A				
42. I declare under oath that I have personally accomplish complete statement pursuant to the provisions of per Philippines. I authorize the agency head/authorized repre agree that any misrepresentation made in this do administrative/criminal case/s against me.	tinent laws, rules and regulations of the sentative to verify/validate the contents state	Republic of the ed herein.	Noel C. BUSTILLO			
Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance	11		200			
Government Issued ID: 61081502942	(dally)					
ID/License/Passport No.: HO3-97-017157		E-100H				
Date/Place of Issuance: Baybay City	Signature Signingide the b	Right Thumbmark				
SUBSCRIBED AND SWORN to before me this	Ann 2 5 2007	ng his/her validly issued	government ID as indicated above.			
	ATTY RVSAA C GUINO	COR	Computer Herals and Mitros Repair and Maintenahos			
NATION OF SUMMERS AND STREET	PTR 019 5859 - BAV SAV/LEYT	-1/12/17	CS FORM 212 (Revised 2017), Page 4 of			
	MCLE COMP. NO. V-0002580	12/19/16	US FURM 212 (Revised 2017), Page 4 0			

ROLL OF ATTORNEYS NO. 57467