CS Form No. 212 Revised 2017 PERSONAL DATA SHEET esentation made in the Personal Data Sheet and the Work Experience Sheet shall cause the filing of administrative/criminal case/s against the person concerned. WARNING: Any misrepre READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM. Print legibly. Tick appropriate boxes () d 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) 2. SURNAME ESTILLORE MA FIRST NAME CHELYN NAME EXTENSION (JR., SR) MIDDLE NAME **GALUPO** 3. DATE OF BIRTH 26/11/1983 16. CITIZENSHIP (mm/dd/yyyy) Dual Citizenship ✓ Filipino A by birth by naturalization 4. PLACE OF BIRTH SURIGAO CITY If holder of dual citizenship, Pls. indicate country: please indicate the details. Male 5 SEX ✓ Female V Single ✓ Married 17. RESIDENTIAL ADDRESS 6 CIVIL STATUS Widowed Separated House/Block/Lot No. Street Other/s: GABAS Subdivision/Village Barangay 7. HEIGHT (m) BAYBAY 1.524 m LEYTE City/Municipality Province 8. WEIGHT (kg) 62 kg ZIP CODE 6521 18. PERMANENT ADDRESS 9. BLOOD TYPE 55 AR+ Kawit House/Block/Lot No Street 10. GSIS ID NO 2003494809 Ermita Subdivision/Village Barangay 11. PAG-IBIG ID NO 1700-0032-4429 Cebu City Cebu City/Municipality Province 12. PHILHEALTH NO 12-050534840-6 **ZIP CODE** 6000 13. SSS NO. 06-2632407-6 19. TELEPHONE NO. n/a 14. TIN NO 248-481-761-000 20. MOBILE NO. 09771565235 / 09993752310 15. AGENCY EMPLOYEE NO. V00203 21. E-MAIL ADDRESS (if any) chelynestillore@gmail.com SPOUSE'S SURNAME **ESTILLORE** MA 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) FIRST NAME JUNE ESTILLORE, NENIA JUNE G. 11/26/2007 MIDDLE NAME ABELLANA ESTILLORE, JUNE ACHECO G. 06/01/2014 ESTILLORE, JUNE NECORY OCCUPATION LETTER CARRIER 01/05/2016 EMPLOYER/BUSINESS NAME PHILIPPINE POSTAL CORPORATION BUSINESS ADDRESS PIGAFETTA STREET, CEBU CITY TELEPHONE NO N/A 24. FATHER'S SURNAME **GALUPO** NA FIRST NAME ACHEL MIDDLE NAME UBAY 25 MOTHER'S MAIDEN NAME SURNAME **CERO** CELENIA FIRST NAME MIDDLE NAME MINDAJAO SCHOLARSHIP HIGHEST LEVEL/ NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE PERIOD OF ATTENDANCE ACADEMIC HONORS LEVEL YEAR UNITS FARNED (Write in full) (Write in full) GRADUATED (if not graduated) RECEIVED To ELEMENTARY JESUS CABARRUS CATHOLIC SCHOOL MARY EDUCATION ND HONORABLE 1990-1991 1995-1996 N/A 1996 SECONDARY JESUS CABARRUS CATHOLIC SCHOOL WITH IGH SCHOOL 1996-1997 1999-2000 2000 **HONORS** VOCATIONAL / N/A N/A N/A N/A N/A N/A TRADE COURSE

BACHELOR OF SCIENCE IN HOTEL AND RESTAURANT MANAGEMENT MAJOR IN FOOD AND BEVERAGE COLLEGE UNIVERSITY OF SAN JOSE-RECOLETOS N/A 2000-2001 2003-2004 2004 N/A MASTER IN MANAGEMENT MAJOR IN **GRADUATE STUDIES** UNIVERSITY OF SAN CARLOS 2017-2018 PRESENT N/A CHED K12 HOSPITALITY MANAGEMENT SIGNATURE Castellaw

DATE

February 08, 2020

CS FORM 212 (Revised 2017), Page 1 of 4

7. CARE		80 (BOARD/ BAR) UNDER	RATING	DATE OF				LICENSE (if a	pplicable)
BAI		\$/ CES/ CSEE Y / DRIVER'S LICENSE	(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINA	ATION / CONFE	RMENT	NUMBER	Date o Validity
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	m/dd/yyyy)	POSITION T (Write in full/Do not			ENCY / OFFICE / COMPANY I/Do not abbreviate)	MONTHLY SALARY	GRADE (if applicable)& STEP (Format "00-0")/	STATUS OF APPOINTMENT	GOV'T SERVIC (Y/N)
From 1/06/2008	To PRESENT	INSTRUCT	NR 1	VISAVAS S	TATE UNIVERSITY	DUD24 626 00	SG-12/2	TEMPODADY	
/06/2009	31/10/2009	ASSISTANT DORMIT			TATE UNIVERSITY	PHP21,626.00 NONE	NONE	TEMPORARY BY APPOINTMENT	YES
1/11/2008	31/03/2009	ASSISTANT DORMIT		-	TATE UNIVERSITY	NONE	NONE	BY APPOINTMENT BY APPOINTMENT	YES
3/06/2008	31/10/2008	ASSISTANT DORMIT			TATE UNIVERSITY	NONE	NONE	BY APPOINTMENT BY APPOINTMENT	YES
1/06/2006	31/03/2008	COLLEGE INST		CEBU ROOS	EVELT MEMORIAL	Php8000.00	NOT APPLICABLE	CONTRACTUAL	NO
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NAME & ADDRESS OF ORGANIZATION (Write in full)		m/dd/yyyy)	NUMBER OF HOURS		DOCITION ANATHER OF MEDIA	
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TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAM	AS INCLUS	IVE DATES OF ENDANCE		Type of LD (Managerial/	COMPLICATED COOMICODED BY	
(Write in full)		m/dd/yyyy)	NUMBER OF HOURS	Supervisory/	CONDUCTED/ SPONSORED BY (Write in full)	
	From	То		Technical/etc)		
m and Digital Transformation Conference	11/10/2018	11/10/2018	6	technical	Department of Tourism	
entation on CHED MEMORANDUM ORDER NO. 22 S. 2013 and other CHED ICCS relative to the STUDENT INTERNSHIP ABROAD PROGRAM (SIAP)	16/12/2016	16/12/2016	3	supervisory	Commission on Higher Education	
iation of Administrators in Hospitality, Hotel and Restaurant Management	01/12/2016	03/12/2016	20		Association of Administrators in Hospitality, Hotel and Res	
tional Institutions 16th National Annual Convention		03/12/2010	20	technical	Management Educational Institutions	
Cost Control Made Easy Seminar-Workshop	24/10/2016	24/10/2016	8	technical	Ascendens-Asia; Association of Administrators in Hospitality, Hotel and Restau Management Educational Institutions; Visayas State University	
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SPECIAL SKILLS and HOBBIES 32.	NON-ACADEMIC DIST		GNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION	
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READING, COLLECTING STUFF National Certificate II in	Bread and Pastry P	roduction (Cert	ificate No. 1608	3702009143)	VISAYAS STATE UNIVERSITY FACULTY ASSOCIATION	
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34.	The year content by contenting and the appoint	ting or recommending authority, or to the	A Thomas I a Maria whose from the same and t
	chief of bureau or office or to the person who has immed	diate supervision over you in the Office,	the state of the s
	Bureau or Department where you will be apppointed,		
	a. within the third degree?		☐ YES ☑ NO
	b. within the fourth degree (for Local Government Unit -	Carper Employees\?	
	the second control of	Odroci Employees):	YES NO
			If YES, give details:
_			
35.	a. Have you ever been found guilty of any administrative	offense?	YES V NO
			If YES, give details:
10.0			
	h Ummana haar airia III I I I I I I I I I I I I I I I I I		
	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	of any law decree ordinance or regulation	
00.	by any court or tribunal?	any law, decree, ordinance or regulation	YES V NO
	by any court of albunda.		If YES, give details:
27	Have you ever been separated from the service in any or	CAL- C-II	
	retirement, dropped from the rolls, dismissal, termination		✓ YES
		, end of term, finished contract or phased	If YES, give details:
-	out (abolition) in the public or private sector?		END OF CONTRACT
	a. Have you ever been a candidate in a national or local	election held within the last year (except	☐ YES ✓ NO
	Barangay election)?		If YES, give details:
	b. Have you resigned from the government service during	g the three (3)-month period before the last	YES V NO
	election to promote/actively campaign for a national or lo	cal candidate?	If YES, give details:
30	Have you acquired the status of an immigrant or permane	ent recident of another country?	
39.	Trave you acquired the status of an intilligrant of permant	ent resident of another country?	☐ YES ☑ NO
			If YES, give details (country):
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) N	Manna Carta for Disabled Pareons /PA	
	7277); and (c) Solo Parents Welfare Act of 2000 (RA 897	2) places answer the following items:	
	7277, and (0) 00101 dicitis Wellale Act 01 2000 (104 037	2), please answer the following items.	
a.	Are you a member of any indigenous group?		
	The year a member of any margorious group:		YES NO
b.	Are you a person with disability?		If YES, please specify:
b.	Are you a person with disability?		☐ YES ☑ NO
	Are you a person with disability? Are you a solo parent?		☐ YES ☑ NO If YES, please specify ID No: ☐ YES ☑ NO
			☐ YES ☑ NO If YES, please specify ID No:
c.			☐ YES ☑ NO If YES, please specify ID No: ☐ YES ☑ NO
c.	Are you a solo parent?		☐ YES ☑ NO If YES, please specify ID No: ☐ YES ☑ NO
c.	Are you a solo parent?		☐ YES ☑ NO If YES, please specify ID No: ☐ YES ☑ NO
c.	Are you a solo parent? REFERENCES NAME	ADDRESS	☐ YES ☑ NO If YES, please specify ID No: ☐ YES ☑ NO If YES, please specify ID No:
c.	Are you a solo parent?		☐ YES ☑ NO If YES, please specify ID No: ☐ YES ☑ NO If YES, please specify ID No:
c.	Are you a solo parent? REFERENCES NAME EUNICE I. BERAY	ADDRESS CARIDAD, BAYBAY CITY, LEYTE	☐ YES ☑ NO If YES, please specify ID No: ☐ YES ☑ NO If YES, please specify ID No: TEL. NO.
c.	Are you a solo parent? REFERENCES NAME	ADDRESS	☐ YES ☑ NO If YES, please specify ID No: ☐ YES ☑ NO If YES, please specify ID No:
c.	Are you a solo parent? REFERENCES NAME EUNICE I. BERAY	ADDRESS CARIDAD, BAYBAY CITY, LEYTE VISCA, BAYBAY CITY, LEYTE	☐ YES ☑ NO If YES, please specify ID No: ☐ YES ☑ NO If YES, please specify ID No: TEL. NO.
c. 41.	Are you a solo parent? REFERENCES NAME EUNICE I. BERAY AIREEN Y. CLORES NANCY V. DUMAGUING	ADDRESS CARIDAD, BAYBAY CITY, LEYTE VISCA, BAYBAY CITY, LEYTE VISCA, BAYBAY CITY, LEYTE	☐ YES
41.	Are you a solo parent? REFERENCES NAME EUNICE I. BERAY AIREEN Y. CLORES NANCY V. DUMAGUING I declare under oath that I have personally accomplis	ADDRESS CARIDAD, BAYBAY CITY, LEYTE VISCA, BAYBAY CITY, LEYTE VISCA, BAYBAY CITY, LEYTE hed this Personal Data Sheet which is a	☐ YES ☑ NO If YES, please specify ID No: ☐ YES ☑ NO If YES, please specify ID No: TEL. NO. 09173002798 09268014558 true, correct and
41.	Are you a solo parent? REFERENCES NAME EUNICE I. BERAY AIREEN Y. CLORES NANCY V. DUMAGUING I declare under oath that I have personally accomplis complete statement pursuant to the provisions of personal complete.	ADDRESS CARIDAD, BAYBAY CITY, LEYTE VISCA, BAYBAY CITY, LEYTE VISCA, BAYBAY CITY, LEYTE hed this Personal Data Sheet which is a rinent laws, rules and regulations of the	☐ YES ☑ NO If YES, please specify ID No: ☐ YES ☑ NO If YES, please specify ID No: TEL. NO. 09173002798 09268014558 true, correct and a Republic of the
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ROLL NO. 46969, IBP NO. 018188 LIFE TIMI COMMISSION NO. 64-16

WORK EXPERIENCE SHEET

Duration

: June 2008 to present

Position

: Instructor 1

Name of Office/Unit: Department of Consumer and Hospitality Management

Immediate Supervisor: Venice B. Ibañez

Name of Agency/Location: Visayas State University, Brgy. Pangasugan, Baybay City,

List of Accomplishments:

- Developed a draft manual for on-the-job training of BSHRTM curriculum
- Helped in curriculum planning
- Managed the DCHM Resto
- Prepared instructional materials
- Computed grades of students and submitted it to the registrar
- Checked outputs of students, recorded them and returned it to students
- Supervised students with activities related to my handled subjects
- Coordinated with hospitality establishments and tourism offices outside the region for on-the-job training opportunities
- Supervised on-the-job trainees
- Registered student-advisees during enrolment
- Attended and participated activities organized by the department, college and university
- Attended seminars and trainings to acquire new knowledge
- Currently enrolled in Masters in Management major in Hospitality Management at the University of San Carlos

Summary of Actual Duties:

- Teaches subjects in Hospitality Management
- Member in the different committee in the department and university
- Performs other duties assigned by the department head

Chelyn G. Estillore Signature over Printed Name of Employee/Applicant

Date: February 07, 2020