CS Form No. 212 Revised 2017	PERSO	NAL DAT	A SH	IEE1						
concerned.	tion made in the Personal Data Sheet and th			A. III		criminal case/s ag	gainst the per	son		
	TO FILLING OUT THE PERSONAL DATA SHE () and use separate sheet if necessary. Indicate	The state of the s		PDS FORM.	1. CS ID No.	4.0000.000.000	(Do not fill up. F	or CSC use or		
I. PERSONAL INFORMATIO)N									
2. SURNAME	GERALDO									
FIRST NAME	MONA NENA		NAME EXTENSION (JR., SR) NONE					NE .		
MIDDLE NAME	BESTUDIO			Car Kalanda (1924)						
3. DATE OF BIRTH	04/11/1986	16. CITIZENSHIP								
(mm/dd/yyyy)	0 11 11 1000	NO. OTTLESTON	☐ Filipino ☐ Dual Citizenship ☐ by birth ☐ by naturalizat			ation				
4. PLACE OF BIRTH	BAYBAY, LEYTE	If holder of dual citizen								
5. SEX	☐ Male ☑ Female	please indicate the de								
	☐ Single ☑ Married	17. RESIDENTIAL ADDRESS	206			1	M. L. QUEZON			
6 CIVIL STATUS	☐ Widowed ☐ Separated	TO THE OBJECT OF	Ho	use/Block/Lot N	lo.		Street			
	Other/s:		Su	ibdivision/Villag	je	DO	MINGO VELOSO Barangay			
7. HEIGHT (m)	1.51 m	end or south a successful to the contract of the south of the contract of		BAYBAY City/Municipality	,	and the transfer	LEYTE Province			
8. WEIGHT (kg)	60kg	ZIP CODE		ngrifiui IIG(AIII)		6521	1 1 Jenilot			
9. BLOOD TYPE	B+	18. PERMANENT ADDRESS		206		A	M. L. QUEZON			
531 1980/09/200		- tabbus (Ib)	Ho	use/Block/Lot N	Vo.	200	Street OMINGO VELOSO			
10. GSIS ID NO.	NONE	BXX/OR YERESE HEBYA	Su	ubdivision/Villag	је	200	Barangay			
11. PAG-IBIG ID NO.	1211-7591-5190			BAYBAY City/Municipality	,		LEYTE Province			
12. PHILHEALTH NO.	13-025323588-9	ZIP CODE		6521			77041100			
13. SSS NO.	34-1533412-2	19. TELEPHONE NO.								
				NONE						
4. TIN NO.	334-723-256	20. MOBILE NO.	-	0935-946-8586						
15. AGENCY EMPLOYEE NO.	NONE	21. E-MAIL ADDRESS (if any)	1	mo	nanena.g	eraldo@vsu.e	edu.ph			
II. FAMILY BACKGROUND										
22. SPOUSE'S SURNAME	GERALDO		23. NAME of Ch	HILDREN (Writ	te full name and	l list all)	DATE OF BIRTH (mm/dd/yyyy			
FIRST NAME	ARIAN WEN	NAME EXTENSION (JR., SR) NONE	ATHENA CHARLOTTE B. GERALDO			ERALDO	21/03/2004			
MIDDLE NAME	RESANO			ATTIENT OFFICE D. DETVIEDO						
OCCUPATION	MACHINE OPERATOR		-							
EMPLOYER/BUSINESS NAME	HIWIN CORP.	* 17.00								
BUSINESS ADDRESS	TAICHUNG, TAIWAN									
TELEPHONE NO.	NONE									
24. FATHER'S SURNAME	BESTUDIO									
		NAME EXTENSION (JR., SR)	* }							
FIRST NAME	MARFELITO	NONE								
MIDDLE NAME	AUTIDA									
25. MOTHER'S MAIDEN NAME	NENA CABALLES CALA									
SURNAME	BESTUDIO									
FIRST NAME	NENA									
MIDDLE NAME	CALA			(0	Continue on se	parate sheet if neces	sary)			
III. EDUCATIONAL BACKG	GROUND									
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGRI (Write in full)	EE/COURSE		ATTENDANCE	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSH ACADEMIC HONORS RECEIVED		
ELEMENTARY	BAYBAY SOUTH CENTRAL SCHOOL	PRIMARY		1993	To 1999	GRADUATED	1999	NONE		
SECONDARY	BAYBAY NATIONAL HIGH SCHOOL	HIGH SCHOOL		1999	2003	GRADUATED	2003	NONE		
VOCATIONAL / TRADE COURSE	NONE									
COLLEGE	VISAYAS STATE UNIVERSITY	BS in AGRIBUSINI	ESS	2011	2015	GRADUATED	2015	NONE		
GRADUATE STUDIES	NONE									
SIGNATURE	(A)	(Continue on separate sheet if nec	essary)		ATE	ola	2020	V-04-4-1-50-404		
CIONATORE		And the second process of the second second	(Anti-Vi)	, 1	AIL	-	FORM 212 (Revise	d 2017). Page		

CARE	ERVICE ELIGIBIL ER SERVICE/ RA 1080	(BOARD/ BAR) UNDER	RATING	DATE OF		E inches de la company		LICENSE (if ap	plicable)
	SPECIAL LAWS/ RANGAY ELIGIBILITY /	CES/ CSEE	(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT			NUMBER	Date o Validity
CAR	EER SERVICE PR	OFESSIONAL	82.22	06/08/2017	SAINT JOSEPH COLLEGE MAASIN CITY				
2013	-63								
	EXPERIENCE			ntinue on separate sheet					
INCL	usive DATES Im/dd/yyyy)	Start from your recent POSITION TO (Write in full/Do not	TLE	DEPARTMENT / AGE	e indicated in the attache ENCY / OFFICE / COMPANY /Do not abbreviate)	d Work Expe Monthly Salary	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV'I SERVIC (Y/ N)
/17/2017	PRESENT	ADMINISTRATIV	/E AIDE I	VSU, BUDGET OFFICE		9,961.20	SGI	JOB ORDER	YES
/01/2016	04/01/2017	CASHIER/STOR	E CREW	FRESH BERRY F	OODS CORPORATION	275.00	N/A	REGULAR	YES
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							00 NAIN		
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							CARDON CONTRACTOR		
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CS FORM 212 (Revised 2017), Page 3 of 4		100000	Marine Construction of the			
9/3/2020	311	AG		LEICES	.8	SIGNATURE
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	Carlotte Santa Spec				and the first term of the second seco	MOTORCYCLE DRIVING
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NONE	27 × 620 × 1		3	NON		DANCING
33. (Write in full)			(Mut ni s		35	34 SPECIAL SKILLS and HOBBIES
MEMBERSHIP IN ASSOCIATION/ORGANIZATION		NOILIN	ICTIONS / BECOG	N-ACADEMIC DISTIN	ON comparing the assessment of the comparing	
						VIII. OTHER INFORMATION
			sheet if necessary	apeuedes uo enuņu	00)	
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DOLE AND POEA	TECHNICAL	гл48	04/17/2015	04/17/2015	(MENT	PRE-EMPLOYMENT SEMINAR AND LABOR EMPLO
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VICANAS STATE IINIVEPSITY	azwopin		02/06/2017	02/03/5017	SHI IAV NROW C	ORIENTATION ON BASIC CUSTOMER SERVICE ANI
YISAYAS STATE UNIVERSITY	SymanzinimoA		6102/81/10	01/17/2019	NG	RISK ASSESSMENT AND DOCUMENTATION TRAIN
ODAHRD, VSU BAYBAY CITY LEYTE	NECHNICA V ADMINISTREME		1/28/2019	1/28/2019	Emerican Committee	2ND ORIENTATION WORKSHOP FOR JOB ORDERS
Vell CONVENTION CENTER		ordat.	12/19/2019	12/18/2019		CYBER SECURITY TRAINING
(fluf ni eth/W)	Supervisoryl Technical/etc)	NUMBER OF HOURS	(AAAA)	D/mm)		u) ni elinW)
CONDUCTED/ SPONSORED BY	Type of LD (Managerial)		DANCE DANCE		ERVENTIONS/TRAINING PROGRAMS	30. TITLE OF LEARNING AND DEVELOPMENT INT
	(anoilizod laineg	jeneM.evitusex33ei	irs for Division Ch	eaγ (č) avā tesi adt τ	ide only the relevant L&D/baining taken to	Slart from the most tecent L&D training program and incit.
			a aa n	TTA SMARĐO	NTERVENTIONS/TRAINING PR	VII. LEARNING AND DEVELOPMENT (L&D)
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POSITION (ALT IN TO THE OF WASHINGTON	e de la companya de l	37,30 G36N N	(E DATES	ALCOHOLD THE STATE OF THE STATE		S9. NAME & ADDRES\$ OF C
		CNOUPZING	NO INPINO	704 / 77 107 1	/ LETHINGTAGO HON / OLAIO N	AL VOLUMENT WORK OF REMENT

Are you related by consanguinity or affinity to the appointing of chief of bureau or office or to the person who has immediate s Bureau or Department where you will be apppointed,		1			
a. within the third degree?		YES VNO			
b. within the fourth degree (for Local Government Unit - Caree	er Employees)?	YES NO			
		If YES, give details:			
5. a. Have you ever been found guilty of any administrative offer	ise?	YES V NO			
		If YES, give details:			
		☐ YES ☑ NO			
b. Have you been criminally charged before any court?		If YES, give details:			
		Date Filed:			
		Status of Case/s:	garan and make an all the control of the control of		
Have you ever been convicted of any crime or violation of any	law decree ordinance or regulation by	THE THE PARTY OF T			
any court or tribunal?	☐ YES ☑ NO If YES, give details:				
7. Have you ever been separated from the service in any of the	following modes: resignation,				
retirement, dropped from the rolls, dismissal, termination, end (abolition) in the public or private sector?	of term, finished contract or phased out	If YES, give details: Resignation due to tr	ansfer of work		
a. Have you ever been a candidate in a national or local elect Barangay election)?	a. Have you ever been a candidate in a national or local election held within the last year (except				
b. Have you resigned from the government service during the election to promote/actively campaign for a national or local or	☐ YES ☑ NO If YES, give details:				
Bay. Have you acquired the status of an immigrant or permanent r	resident of another country?	☐ YES ☑ N	n		
	If YES, give details (country):				
10 D 11 A 1/DA 2074): (1) Mar	- Code for Disabled Domone (DA				
 Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magnetic (Page 1) 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), 	na Carra for Disabled Persons (RA				
Are you a member of any indigenous group?	bloade anover the following norms.		10		
Are you a member of any indigenous group?		☐ YES ☑ N If YES, please specify:	0		
Are you a person with disability?		☐ YES ☑ N	10		
Ale you a person wan aloubing.		If YES, please specify ID No:			
Are you a solo parent?		YES If YES, please specify ID No:	10		
41. REFERENCES (Person not related by consanguinity or affinity to applicant la	appointee)				
NAME	ADDRESS	TEL. NO.			
MYRNA S. PANCITO	Budget Office	1009	152		
LOUELLA C. AMPAC	ODF	1061			
42. I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertine Philippines. I authorize the agency head/authorized represe agree that any misrepresentation made in this docu administrative/criminal case/s against me.	ent laws, rules and regulations of the ntative to verify/validate the contents star	Republic of the led herein.	MONA NENA B. GERALDO PHOTO		
Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance	Series -				
Government Issued ID: Drivers License	% .				
ID/License/Passport No.: 047245444	Signature (Sign inside the	box)			
Date/Place of Issuance: LTO,BAYBAY CITY,LEYTE	Date Accomplished		Right Thumbmark		
SUBSCRIBED AND SWORN to before me this	0 SEP 2020, affiant exhibit	ting his/her validly issued governme	ent ID as indicated above.		
	TTY. RYSAN C. GUINOCOR VSULEGAL OFFICER Person Administering O	ath			
20,000					