

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	VILBAR		
FIRST NAME	CARREN MAE	NAME EXTENSION (JR., SR)	
MIDDLE NAME	BASA		
3. DATE OF BIRTH (mm/dd/yyyy)	06/17/1990	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 CITY LEYTE	If holder of dual citizenship, please indicate the details.	
5. SEX	<input type="checkbox"/> Male <input checked="" 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:	17. RESIDENTIAL ADDRESS	House/Block/Lot No. Street PUROK 1 PANGASUGAN Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
7. HEIGHT (m)	1.57 M.	ZIP CODE	6521
8. WEIGHT (kg)	67 KG.		
9. BLOOD TYPE	A+	18. PERMANENT ADDRESS	House/Block/Lot No. Street PUROK 1 PANGASUGAN Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
10. GSIS ID NO.	N/A	ZIP CODE	6521
11. PAG-IBIG ID NO.	121066973737		
12. PHILHEALTH NO.	13-201308652-8	19. TELEPHONE NO.	N/A
13. SSS NO.	05-32038-107	20. MOBILE NO.	09078033394
14. TIN NO.	705908905	21. E-MAIL ADDRESS (if any)	cm.vilbar@vsu.edu.ph
15. AGENCY EMPLOYEE NO.	N/A		

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	VILBAR		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	ALDREN	NAME EXTENSION (JR., SR)	CARL ALDREI B VILBAR	03/18/2011
MIDDLE NAME	LAGUNA			
OCCUPATION	UTILITY/MESSENGER			
EMPLOYER/BUSINESS NAME	VFES			
BUSINESS ADDRESS	VISCA,BAYBAY CITY, LEYTE			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	BASA			
FIRST NAME	CARLITO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	QUETERO			
25. MOTHER'S MAIDEN NAME	SIMANGCA			
SURNAME	BASA			
FIRST NAME	EMELDA			
MIDDLE NAME	DALUGDUGAN		(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	SAN JUAN ELEM. SCHOOL	Elementary Education	01/06/1997	01/03/2003	Graduated	2003	Valedictorian
SECONDARY	SANTO NIÑO ACADEMY	High School	01/03/2003	01/03/2007	Graduated	2007	1st Honorable
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A			N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN NURSING	01/06/2007	01/10/2010	4TH YEAR	2010	N/A
GRADUATE STUDIES							

(Continue on separate sheet if necessary)			
SIGNATURE		DATE	03/23/2022
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[illegible]

V. WORK EXPERIENCE

[illegible]

SIGNATURE		DATE	03/23/2022	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/S

29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		
	WORLD VISION CHILDREN'S ASSOCIATION	01/05/2003	01/05/2007	N/A	CHAIRPERSON
	FEDERATION OF OMEGA BENEFECIARIES INC. CHILDREN'S SECTOR	01/05/2003	01/05/2007		PRESIDENT
	SK FEDERATION	01/01/2007	01/01/2009		SK KAGAWAD

(Continue on separate sheet if necessary)


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

[illegible]

VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
GOOD COMMUNICATION SKILLS	TOP SALES AGENT SPECIALIST	ADPA
COMPUTER LITERATE	TOP AGENT SPECIALIST	
TRAVEL AGENT SKILLS		
DANCING, SINGING		

(Continue on separate sheet if necessary)

SIGNATURE		DATE	03/23/2022	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: 35%;">NAME</th> <th style="width: 35%;">ADDRESS</th> <th style="width: 30%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>MS. JENNIFER E. ANDO</td> <td>VSU</td> <td>9176569577</td> </tr> <tr> <td>MS. HONEY SOFIA V. COLIS</td> <td>VSU</td> <td>9176341490</td> </tr> <tr> <td>MS. TERESITA L. QUIÑANOLA</td> <td>BAYBAY</td> <td>9981517122</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	MS. JENNIFER E. ANDO	VSU	9176569577	MS. HONEY SOFIA V. COLIS	VSU	9176341490	MS. TERESITA L. QUIÑANOLA	BAYBAY	9981517122
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<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>													
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<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>SUBSCRIBED AND SWORN to before me this <u>07 APR 2022</u>,</p> <p style="text-align: center;"> ATTY. RYSAN L. GUINOCOR VSU Chief Legal Officer </p> <p style="text-align: center;">Person Administering Oath</p> </div> <div style="width: 50%; text-align: center;"> PHOTO Right Thumbmark </div> </div>													