

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	JAYME		
FIRST NAME	JENEFER	NAME EXTENSION (JR., SR) NA	
MIDDLE NAME	BAGARINAO		
3. DATE OF BIRTH (mm/dd/yyyy)	12/10/1991	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 BRGY. HIBUNAWAN Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
7. HEIGHT (m)	1.81M	ZIP CODE	
8. WEIGHT (kg)	68 KG		
9. BLOOD TYPE	O+		
10. GSIS ID NO.	CRN-021-1759-0731-2		
11. PAG-IBIG ID NO.	1211-0832-9176	18. PERMANENT ADDRESS	House/Block/Lot No. Street BRGY. HIBUNAWAN Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
12. PHILHEALTH NO.	13-025202659-3	ZIP CODE	6521
13. SSS NO.	0634850338	19. TELEPHONE NO.	NONE
14. TIN NO.	452-660-397	20. MOBILE NO.	09651332555
15. AGENCY EMPLOYEE NO.	V00948	21. E-MAIL ADDRESS (if any)	jebhang22@gmail.com


II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	JAYME	23. NAME OF CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	DAVE PETER	DAYNE PAUL B. JAYME	11/5/2011
MIDDLE NAME	GODOY	JAVERN MYKE B. JAYME	9/29/2014
OCCUPATION	OFFICE CLERK	JYDEI PHIL B. JAYME	6/26/2020
EMPLOYER/BUSINESS NAME	VSU		
BUSINESS ADDRESS	VSU, BAYBAY CITY, LEYTE		
TELEPHONE NO.	9061332555		
24. FATHER'S SURNAME	NA		
FIRST NAME	NA	NAME EXTENSION (JR., SR)	
MIDDLE NAME	NA		
25. MOTHER'S MAIDEN NAME			
SURNAME	BAGARINAO		
FIRST NAME	FLORENCIA		
MIDDLE NAME	TOLERO		

(Continue on separate sheet if necessary)

III. EDUCATIONAL BACKGROUND

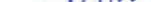
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE		HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	ORMOC CITY CENTRAL SCHOOL	PRIMARY	1998	2004	GRADUATED	2004	NA
SECONDARY	BAYBAY NATIONAL HIGH SCHOOL	SECONDARY	2004	2008	GRADUATED	2008	HONORABLE MENTION
VOCATIONAL / TRADE COURSE	NA	NA					
COLLEGE	VISAYAS STATE UNIVERSITY	BS IN HOTEL RESTAURANT TOURISM MANAGEMENT	2008	2013	GRADUATED	2013	NA
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY	MASTER IN MANAGEMENT	8/1/2019	12/31/2019	12 UNITS		NA

(Continue on separate sheet if necessary)			
SIGNATURE		DATE	NOVEMBER 16, 2020
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27.	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
					NUMBER	Date of Validity
	CS SUBPROFESSIONAL EXAM	80.7	5/3/2015	Tacloban City, Leyte		
	CS PROFESSIONAL EXAM	81.0	3/18/2018	ORMOC CITY, LEYTE		
	Driver's License		1/6/2020	LTO, BAYBAY CITY, LEYTE	H1220000107	12/10/2024

V. WORK EXPERIENCE

[illegible]

SIGNATURE		DATE	NOVEMBER 16, 2020	CS FORM 212 (Revised 2017), Page 2 of 4
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29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		
NA					

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

INCLUSIVE DATES OF	Type of LD	

(Continue on separate sheet if necessary)

(Continue on separate sheet if necessary)

SIGNATURE		DATE	NOVEMBER 16, 2020	CS FORM 212 (Revised 2017), Page 3 of 4
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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,
a. within the third degree?
b. within the fourth degree (for Local Government Unit - Career Employees)?

☐ YES☒ NO

☐ YES☒ NO

If YES, give details:

35. a. Have you ever been found guilty of any administrative offense?

☐ 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 law, decree, ordinance or regulation by any court or tribunal?

☐ YES☒ NO

If YES, give details:

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?

☐ YES☒ NO

If YES, give details:

38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?

☐ YES☒ NO

If YES, give details: _____

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?

☐ YES☒ NO

If YES, give details: _____

39. Have you acquired the status of an immigrant or permanent resident of another country?

☐ YES☒ NO

If YES, give details (country):

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:

a. Are you a member of any indigenous group?

☐ YES☒ NO

If YES, please specify: _____

b. Are you a person with disability?

☐ YES☒ NO

If YES, please specify ID No: _____

c. Are you a solo parent?

☐ YES☒ NO

If YES, please specify ID No: _____

41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)

NAME	ADDRESS	TEL. NO.
DR. LOURDES B. CANO	VSU, BAYBAY CITY, LEYTE	563-7643
ATTY. RYSAN C. GUINOCOR	VSU, BAYBAY CITY, LEYTE	563-7643

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.

JENERFER B. JATME

Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)
PLEASE INDICATE ID Number and Date of Issuance

Government Issued ID:	VSU ID
ID/License/Passport No.:	V00948
Date/Place of Issuance:	01/3/2017

Signature (Sign inside the box)
November 16, 2020
Date Accomplished

Right Thumbmark

SUBSCRIBED AND SWORN to before me this 22 DEC 2020, affiant exhibiting his/her validly issued government ID as indicated above.

ATTY. RYSAN C. GUINOCOR
VSU LEGAL OFFICER

Person Administering Oath

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