CS Form, No. 212 Revised 2017

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 (
I. PERSONAL INFORMATION									
2. SURNAME	RNAME TROYO								
FIRST NAME	RODEN NAME EXTENSION (JR., SR) N/A					٨			
MIDDLE NAME	DY N/A						7		
DATE OF BIRTH (mm/dd/yyyy)	11/14/1984 16. CITIZENSHIP			FILIPINO					
4. PLACE OF BIRTH	BAYBAY, LEYTE If holder of dual citizen			Pls. indicate country: PHILIPPINES				PPINES	
5. SEX	MALE	please indicate the de	letails. N/A						
6 CIVIL STATUS	SINGLE	17. RESIDENTIAL ADDRESS	Но	N/A House/Block/Lot No.			Street		
			Subdivision/Village				BUNGA Barangay		
7. HEIGHT (m)	1.75		BAYBAY CITY City/Municipality			LEYTE Province			
8. WEIGHT (kg)	76	ZIP CODE	6521			6521	Province		
9. BLOOD TYPE	"O" 18. PERMANENT ADDRESS		N/A House/Block/Lot No.						
10. GSIS ID NO.	02004351565						Street BUNGA		
11. PAG-IBIG ID NO.	N/A		Subdivision/Village BAYBAY CITY				Barangay LEYTE		
12. PHILHEALTH NO.	N/A	ZIP CODE		City/Municipality 6521		Province			
13. SSS NO.	N/A	19. TELEPHONE NO.		N/A					
14. TIN NO.	438 449 686 20. MOBILE NO.			09166201071					
15. AGENCY EMPLOYEE NO.	V00812 21. E-MAIL ADDRESS (if any)			roden.troyo@gmail.com, roden.troyo@vsu.edu.ph					
II. FAMILY BACKGROUND									
22. SPOUSE'S SURNAME	N/A		23. NAME of CHILDREN (Write full name and list all)			nd list all)	DATE OF BIRTH (mm/dd/yyyy)		
FIRST NAME	N/A NAME EXTENSION (JR., SR)		N/A				N/A		
MIDDLE NAME	N/A				-				
OCCUPATION	N/A								
EMPLOYER/BUSINESS NAME	N/A								
BUSINESS ADDRESS	N/A								
TELEPHONE NO.	N/A								
24. FATHER'S SURNAME	TROYO								
FIRST NAME	ENRIQUE NAME EXTENSION (JR., S								
MIDDLE NAME	CONDES								
25. MOTHER'S MAIDEN NAME									
SURNAME									
FIRST NAME	ANITA								
MIDDLE NAME	MORALES		(Continue on separate sheet if necessary)						
III. EDUCATIONAL BACKG	ROUND		基 图						
26. LEVEL	(Write in full)	ATION/DEGREE/COURSE (Write in full)		PERIOD OF	ATTENDANCE	HIGHEST EVEL/ INITS EARNED (if not graduated)	YEAR GRADUATE D	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED	
ELEMENTARY	ACCELRATED CHRISTIAN SCHOOL	GRADUATED		1991	1	Graduated	1997	NA	
SECONDARY	VISCA LABORATORY HIGH SCHOOL	GRADUATED		1997	2001	Graduated		NA	
VOCATIONAL / TRADE COURSE	N/A							,	
COLLEGE	LEYTE STATE UNIVERSITY	B.S. AGRICULTUR	RE.	2001	2005	Graduated	2005	N/A	
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY	M.S. HORTICULTUI	RE	2010	2013	Groidwated	2013	DOST	
SIGNATURE		Continue on separate sheet if nece	ssary)			, A	1		
SIGNATURE				DA	ATE	// // (CS P	20/0 ORM 212 (Revised	1 2017), Page 1 of 4	

27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE (If Applicable)			RATING (If Applicable)	DATE OF EXAMINATION /	ATION / CONFEI	RMENT	LICENSE (if ap	Date of	
BARANGAY ELIGIBILITY / DRIVER'S LICENSE (IT Applicable) LICENSURE EXAMINATION FOR AGRICULTURIST 75.0			CONFERMENT			NUMBE		Validity	
			7/12/2005 CEB		U CITY		2795	8/1/2005	
						antida minero Ay Margil Guitro mana minero			
By and and the second character and browns									
			(Co	ntinue on separate sheet il	necessary)				
	EXPERIENCE	ent. Start from your rece	ant work) Descrip	ation of duties should	he indicated in the at	ached Work	Evnerience s	hoot	
8 INCL	USIVE DATES	enc Start nom your rec			De muicaled in the all		SALARY/ JOB/ PAY GRADE (if		GOVT
From	nm/dd/yyyy) To	(Write in full/Do not	abbreviate)	Y / OFFICE / COMPANY (Write in full/Do not abbreviate)		MONTHLY SALARY	applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	(Y/N)
6/1/2013	PRESENT	INSTRUCT	OR 3	VISAYAS STA	ATE UNIVERSITY	27755.00	14	PS	YES
6/1/2009	5/1/2010	EXEC. ASST. TO TH	HE GENERAL	-	KS LANDSCAPING	18000.00		CONTRACTUAL	NO
1/1/2009	5/1/2009	MANAG FOREX BR			RODIL	16000.00		CONTRACTUAL	NO
9/1/2006	12/1/2008	HORTICULTURIST/	LANDSCAPE		KS LANDSCAPING	10000.00		CONTRACTUAL	NO
12/1/2005	8/1/2006	LANDSCAPE SU			KS LANDSCAPING	8000.00		CONTRACTUAL	NO
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						1			
			(C	ontinue on separate sheet	if necessary)				

ADDRESS OF ORGANIZATION (Windo in full) (Windo in full) (Continue on appealed wheel of microscopy (Prime To		Managerial position	POSITION / NATURE OF WORK
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PLANT TISSUE CULTURE			VSU FACULTY ASSOCIATION
			PHILIPPINE SOCIETY FOR LACT BACTERIA
LANDSCAPING			ASSOCIATION OF FOOD SAFET SECURITY (AFSA)
			PHILIPPINE ASSOCIATION OF T
			ORGANIC AGRICULTURE SOCIET PHILIPPINES, INC. (OASP
			PHILIPPINE HORTICULTURAL S

34.	Are you related by consanguinity or affinity to the appointing chief of bureau or office or to the person who has immediate Bureau or Department where you will be apppointed, a. within the third degree? b. within the fourth degree (for Local Government Unit - Car	☐ YES ☐ NO ☐ YES ☐ NO If YES, give details:							
35.	a. Have you ever been found guilty of any administrative of	☐ YES ☐ ND If YES, give details:							
	b. Have you been criminally charged before any court?	If YES, give details: Date Filed: Status of Case/s:							
36.	Have you ever been convicted of any crime or violation of a regulation by any court or tribunal?	☐ YES ☐ ND If YES, give details:							
37.	Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, executed 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 ele Barangay election)?	☐ YES ☐ HD If YES, give details:							
	b. Have you resigned from the government service during last election to promote/actively campaign for a national or	☐ YES ☐ ND If YES, give details:							
39.	Have you acquired the status of an immigrant or permaner	☐ YES ☐ NO If YES, give details (country):							
40. a b	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972 Are you a member of any indigenous group? Are you a person with disability? Are you a solo parent?	If YES, please specify: If YES, please specify ID No: If YES If YES, please specify ID No:							
41.	REFERENCES (Person not related by consanguinity or affinity to applica								
	NAME	ADDRESS	TEL. NO.						
_	DR. ARSENIO D. RAMOS	DOH, VSU, VISCA, BAYBAY CITY, LEYTE	053-563-7739	100					
	DR. VICTOR B. ASIO	CAFS, VSU, VISCA, BAYBAY CITY, LEYTE	053-563-7435						
42.	42. I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct and correct and COT ROPEN D. TROYO								
F	Covernment Issued ID (i.e Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Sovernment Issued ID: VSU ID								
	D/License/Passport No.: V00812	(OX)							
	Date/Place of Issuance: Date Accomplished Right Thumbmark								
part land av	SUBSCRIBED AND SWORN to before me this Occ. No. 317. Page No. 44. Book No. 244. Series of 20 /4	N. C. No. B Unti R. Magsaysa PTR N IBP I Person Administering Qat	December 31, 202 y Avenue, Baybay C No. 2765614- 01 (3 No. 057038- 01/1 // ht No. 207-628-0.9	City, Leyte /19 19					
		MCEL		CS FORM 212 (Revised 2017), Page 4 of 4					