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 ( 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) 2. SURNAME STA. IGLESIA FIRST NAME NAME EXTENSION (JR., SR) N/A MARILOU MIDDLE NAME LABANA 3. DATE OF BIRTH 09/30/1962 16. CITIZENSHIP (mm/dd/yyyy) Filipino Dual Citizenship ✓ by birth by naturalization BAYBAY, LEYTE 4. PLACE OF BIRTH If holder of dual citizenship Pls. indicate country: please indicate the details. Male 5. SEX ✓ Female Single ✓ Married 17. RESIDENTIAL ADDRESS 6 CIVIL STATUS ☐ Widowed House/Block/Lot No. ☐ Separated PANGASUGAN Other/s: Subdivision/Village Barangay BAYBAY LEYTE 7. HEIGHT (m) 151 City/Municipality Province 8. WEIGHT (kg) 58.6 ZIP CODE 6521 18. PERMANENT ADDRESS 9. BLOOD TYPE 0 House/Block/Lot No. Street 10. GSIS ID NO. **PANGASUGAN** 62093002411 ubdivision/Village Barangay BAYBAY LEYTE 11 PAG-IBIG ID NO 1700-0026-2306 City/Municipality Province 12. PHILHEALTH NO 13-000014369-4 ZIP CODE 6521 13. SSS NO. N/A 19. TELEPHONE NO. NONE 14. TIN NO 116-627-050 20 MOBILE NO 09152862332 15. AGENCY EMPLOYEE NO. V000648 21. E-MAIL ADDRESS (if any) marilousta.iglesia@yahoo.com FAMILY BACKGROUND 22. SPOUSE'S SURNAME STA. IGLESIA 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) FIRST NAME NESTOR **NESS MARIE L. STA. IGLESIA** 03/24/1982 MIDDLE NAME CALIBUD NHESLY L. STA. IGLESIA 11/09/1992 OCCUPATION LABORER MARY LEE L. STA. IGLESIA 04/24/1995 EMPLOYER/BUSINESS NAME NONE **BUSINESS ADDRESS** NONE TELEPHONE NO. NONE 24. FATHER'S SURNAME LABANA NAME EXTENSION (JR., SR) FIRST NAME VICENTE MIDDLE NAME MARANGUIT 25. MOTHER'S MAIDEN NAME NAYRE SURNAME LABANA FIRST NAME PONCIANA MIDDLE NAME **POLIQUIT** (Continue on separate sheet if necessary) **EDUCATIONAL BACKGROUND** SCHOLARSHIP HIGHEST LEVEL NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE PERIOD OF ATTENDANCE LEVEL YEAR **ACADEMIC** UNITS EARNED (Write in full) GRADUATED HONORS (Write in full) (if not graduated) RECEIVED From To ELEMENTARY PANGASUGAN ELEMENTARY SCHOOL **ELEMENTARY GRADUATE** 1969 1974 N/A 1974 NONE SECONDARY **VISAYAS STATE OF AGRICULTURE** HIGH SCHOOL GRADUATE 1974 1978 N/A 1978 NONE FRANCISCAN COLLEGE OF IMMACULATE VOCATIONAL / SECRETARIAL 1978 1981 N/A 1981 CERT. TRADE COURSE CONCEPTION COLLEGE N/A N/A N/A N/A N/A NA N/A **GRADUATE STUDIES** N/A N/A N/A N/A N/A N/A SIGNATURE DATE DECEMBER 14,2023 CS FORM 212 (Revised 2017), Page 1 of 4

IV. CIVIL S	SERVICE ELI	GIBILITY						. 17	
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE RATING			DATE OF EXAMINATION / PLACE OF EXAMINA		2 TO 100		LICENSE (if applicable)		
BA	BARANGAY ELIGIBILITY / DRIVER'S LICENSE (If Applicable)			CONFERMENT		NATION / CONFERMENT		NUMBER	Date of Validity
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	EXPERIENCE								
28. INCLI	JSIVE DATES	ent. Start from your recen				hed Work E	SALARY/ JOB/ PAY	et.	
From (m	m/dd/yyyy)	POSITION TI (Write in full/Do not a		DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)		MONTHLY SALARY	GRADE (if applicable)& STEP (Format *00-0*)/	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)
01/01/1998	PRESENT	ADMINISTRATIVI	AIDE III	VISAYAS S	007 4014	INCREMENT	0401141	100	
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01/01/1985	06/30/1991	OFFICE CLE			VISAYAS STATE UNIVERSITY INFIRMARY			CASUAL	YES
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SIGNATURE		Mutrig	. The anatamic	DATE	January 1, 2024	January 1, 2024 CS FORM 212 (F			age 2 of 4

(Write in full)	From	id/yyyy) To	NUMBER OF HOURS	32 = 1.4	POSITION / NATURE OF WORK
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II. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAININ	(Continue on separate s				
tart from the most recent L&D/training program and include only the relevant L&D/training tak			hief/Executive/Mar	agerial positions)	
TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS		INCLUSIVE DATES OF ATTENDANCE		Type of LD ( Managerial/	CONDUCTED/ SPONSORED BY
(Write in full)	(mm/d	id/yyyy)	NUMBER OF HOURS	Supervisory/ Technical/etc)	(Write in full)
V IN THE WORKPLACE SEMINAR	12/09/2016	12/09/2016	4.0	TECHNICAL	VISAYAS STATE UNIVERSITY, CENTER FOR
LENGTON CVID-COL A	3,710,300				CONTINUING EDUCATION (VSU-CCE) VISAYAS STATE UNIVERSITY, CENTER FOR
O 9001-2008 ORIENTATION & WRITESHOP AMONG CLERK AND SECRETARIES	09/21/2015	09/21/2015	8.0	TECHNICAL	CONTINUING EDUCATION (VSU-CCE)
ANNING WORKSHOP: ON THE PREPARATION & PROCESSING OF DOCUMENTS ELATIVE TO PROCUREMENT	05/27/2015	05/27/2015	4.0	TECHNICAL	VISAYAS STATE UNIVERSITY
MES-OPES) TRAINING ON RA9184 AND ITS REVISED IRR	1/26/2011	1/26/2011	39 III 9 II 90 8.0 1001 03 1010	TECHNICAL	OFFICE OF THE DIRECTOR FOR HUMAN RESOURCE DEVELOPMENT, VISAYAS STATE UNIVERSITY (ODAHRD, VSU)
NUAL RDE MANAGEMENT FORUM SEMINAR-WORKSHOP ON PREPARATION O ERFORMANCE TARGETS AND ACCOMPLISHMENT	01/11/2011	01/12/2011	16.0	TECHNICAL	OFFICE OF THE VICE PRESIDENT FOR RESEARCH & EXTENSION, VISAYAS STATE UNIVERSITY (OVPRE, VSU)
ODULES I.II AND VI	7/29/2010	7/29/2010	8.0	TECHNICAL	DBM, R8, GPPB & VISAYAS STATE UNIVERSIT
ORKSHOP ON CONCEPTUALIZING R & D PROJECTS	7/22/2010	7/23/2010	16.0	TECHNICAL	OFFICE OF THE VICE PRESIDENT FOR RESEARCH & EXTENSION, VISAYAS STATE UNIVERSITY (OVPRE, VSU)
ESEARCH AND DEVELOPMENT IN-HOUSE REVIEW	4/26/2010	4/30/2010	40.0	TECHNICAL	OFFICE OF THE VICE PRESIDENT FOR RESEARCH & EXTENSION, VISAYAS STATE UNIVERSITY (OVPRE, VSU)
EMINAR ON ESSENTIAL PSYCHOPARMACOLOGY: DRUGS, BEHAVIOR AND LINICAL IMPLICATIONS AND FISHING FOR ANSWERS IN NEUROSCIENCE WITH EBRATISH	10/23/2009	10/23/2009	4.0	TECHNICAL	OFFICE OF THE VICE PRESIDENT FOR RESEARCH & EXTENSION, VISAYAS STATE UNIVERSITY (OVPRE, VSU)
EMINAR-WORKSHOP ON LEADERSHIP AND ETHICS IN RESEARCH & EXTENSION ANAGEMENT	N 10/15/2009	10/15/2009	8.0	TECHNICAL	OFFICE OF THE VICE PRESIDENT FOR RESEARCH & EXTENSION, VISAYAS STATE UNIVERSITY (OVPRE, VSU)
OMPUTER TRAINING FOR EXCEL AND POWERPOINT PROGRAM	10/28/2003	10/30/2003	24.0	TECHNICAL	HRMDO, DCST, VISAYAS STATE UNIVERSITY
AREER AND PERSONALITY DEVELOPMENT FOR CLERK AND OTHER	5/19/2003	5/20/2003	24.0	TECHNICAL	VISAYAS STATE UNIVERSITY
DMINISTRATIVE STAFF SSEARCH (VOW)	09/01/1998	09/03/1998	24.0	TECHNICAL	VISCA
Section Control of Con	03/01/1330	BYAH AJP	24.0	TEOTIMOAL	PROF ROSA OPHELIA DI AVOIL
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(III. OTHER INFORMATION	(continue on separate				
31. SPECIAL SKILLS and HOBBIES 32.	NON-ACADEMIC DISTI		GNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATIO
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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 off	ense?	☐ 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 an any court or tribunal?	☐ YES ☑ NO If YES, give details:			
37.	Have you ever been separated from the service in any of the dropped from the rolls, dismissal, termination, end of term, fi the public or private sector?	☐ YES ☑ NO If YES, give details:			
38.	a. Have you ever been a candidate in a national or local electron Barangay election)?	YES INO If YES, give details:			
	b. Have you resigned from the government service during the election to promote/actively campaign for a national or local	☐ YES ☑ NO If YES, give details:			
39.	Have you acquired the status of an immigrant or permanent	☐ YES ☑ NO If YES, give details (country):	11.00		
a. b. c.	and (c) Solo Parents Welfare Act of 2000 (RA 8972), please Are you a member of any indigenous group?  Are you a person with disability?  Are you a solo parent?	☐ YES ☑ NO If YES, please specify: ☐ YES ☑ NO If YES, please specify ID No: ☐ YES ☑ NO If YES ☑ NO If YES, please specify ID No:			
41.	REFERENCES (Person not related by consanguinity or affinity to applicant	/appointee)			
	NAME OF ASSESSED ASSESSED.	ADDRESS	TEL. NO.		
	DR. MILAGROS BALES	VISCA, BAYBAY CITY, LEYTE	9424814524		
	PROF. ROSA OPHELIA D. VELARDE	VISCA, BAYBAY CITY, LEYTE	9773873556		
	DR. OTHELLO B. CAPUNO	VISCA, BAYBAY CITY, LEYTE	563-8935		
	I declare under oath that I have personally accomplished this statement pursuant to the provisions of pertinent laws, rules the agency head / authorized representative to verify, misrepresentation made in this document and its attachmagainst me.	and regulations of the Republic of the Phili Validate the contents stated herein. I	ppines, I authorize	\$	
PL	vernment Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)  EASE INDICATE ID Number and Date of Issuance	110 + - ch 1			
H	vernment Issued ID: GSIS UMID ID	Metright			
-	cicense/Passport No.: 006-0076-3488-4	Signature (Sign inside the box  DECEMOSE 14, 2023  Date Accomplished	Right Thumbmark	JOU	
	SUBSCRIBED AND SWORN to before me this	DEC 2000			
	COSSISTANCE AND SWORM TO DETOIL THE UTILS	ATTY RYSAN C. GUINOCOR VSU CHICLEGO Officer	ng his/her validly issued government ID as indicated above.		
		Person Administering Oath			

## **WORK EXPERIENCE SHEET**

Instructions: 1. Include only the work experiences relevant to the position being applied to.

- The duration should include start and finish dates, if known, month in abbreviated form, if known, and year in full. For the current position, use the word Present, e.g., 1998– Present. Work experience should be listed from most recent first.
- Duration: January 1, 1998 Present
- · Position: Administrative Aide III
- Name of Office/Unit: Office of the Vice President for Research & Extension
- Immediate Supervisor: Dr. Othello B. Capuno
- Name of Agency/Organization and Location: Visayas State University, Visca, Baybay City, Leyte
  - Summary of Actual Duties
    - Receive all the important documents; take charge of sending and receiving correspondence, as well as greeting clients and customers; Facilitating all papers needed in the office; took charge of encoding important papers needed by my immediate supervisor; Managing and distributing information within an office. This generally includes answering phones.
- Duration: July 1, 1992 December 31, 1997
- Position: Office Clerk
- Name of Office/Unit: Department of Consumer & Hospitality Management (DCHM)
- Immediate Supervisor: Lucylen B. Ponce
- Name of Agency/Organization and Location: Visayas State University, Visca, Baybay City, Leyte
  - · Summary of Actual Duties
    - Receive all the important documents, facilitating all papers needed; take charge of encoding important papers to disseminate to the other offices; took charge in processing and prepare documents, such as business or government forms and expense reports.
- Duration: January 1, 1985 June 30, 1991
- · Position: Office Clerk
- Name of Office/Unit: VSU-Infirmary
- Immediate Supervisor: Dr. Isabel P. Bertulfo
- Name of Agency/Organization and Location: Visayas State University, Visca, Baybay City, Leyte
  - Summary of Actual Duties

- Collect, count, and disburse money, do basic bookkeeping and complete transactions.
   Communicate with customers, employees, and other individuals to answer questions, disseminate or explain information; take orders and address complaints; took charge of receiving & sending of documents.
- Duration: September 1, 1983 December 31, 984
- Position: Laborer
- Name of Office/Unit: National Abaca Research Center
- Immediate Supervisor: Nguyen T. Than-Tuyen
- Name of Agency/Organization and Location: Visayas State University, Visca, Baybay City, Leyte
  - Summary of Actual Duties
    - Take charge in cleaning and preparing materials; Keeps simple records and logs; do other tasks assigned by my immediate supervisor.

MARILOU L. STA IGLESIA
(Signature over Printed Name
of Employee/Applicant)

Date: <u>January</u> 1, 2024