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CS Form No. Revised 2017	21
WARNING: An	/ m

PERSONAL DATA SHEET

	TO FILLING OUT THE PERSONAL DATA SHI	N/A if not applicable. DO NOT ABBREVIATE	1 CS ID N	0.	(Do not fill up. For CSC use only		
PERSONAL INFORMATIO	FERNANDEZ						
				NAME EXTENSION (JR	, SR)	N/A	
FIRST NAME	RHEA ANGELIE			The second secon	t of the stage of	control of the second s	
MIDDLE NAME 3. DATE OF BIRTH	MODINA						
(mm/dd/yyyy)	06/26/1994	16. CITIZENSHIP	✓ Filipino	Dual Citizenship		eli a c	
4. PLACE OF BIRTH	BAYBAY CITY, LEYTE	If holder of dual citizenship,	☐ by birth Pls. indicate o		by naturalization country:		
5. SEX	☐ Male ☐ Female	please indicate the details.	ails.				
6 CIVIL STATUS	✓ Single ☐ Married ☐ Widowed ☐ Separated ☐ Other/s:	17. RESIDENTIAL ADDRESS			Street PANGASUGAN Barangay		
7. HEIGHT (m)	165	o agree College state	Subdivision/Village BAYBAY	- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	LEYTE		
8. WEIGHT (kg)	75	ZIP CODE	City/Municipality 6521	A	Province	Proposition and the second	
9. BLOOD TYPE	A+	18. PERMANENT ADDRESS					
IO. GSIS ID NO.	N/A	V SALVISV	House/Block/Lot No.	F	Street PANGASUGAN	S1 (C.)	
V 5960 1800		YARBLIJEV	Subdivision/Village BAYBAY		Barangay LEYTE	TEU.	
11. PAG-IBIG ID NO.	121145021531	Y ARBU USV	City/Municipality		Province		
12. PHILHEALTH NO.	13-050171359-8	ZIP CODE	6521	-			
13. SSS NO.	N/A	19. TELEPHONE NO.		N/A			
4. TIN NO.	481-044-567	20. MOBILE NO.		0967-504-8088			
5. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	rheaangelie.fernand		ndez@vsu.edu.ph		
I. FAMILY BACKGROUNE							
22. SPOUSE'S SURNAME	N/A	23. NAME NAME EXTENSION (JR., SR)	IAME of CHILDREN (Write full name and list all)		DATE OF BIRTH (mm/dd/yyyy		
FIRST NAME	N/A	The service resident (M.C.) Only	NA		N/A N/A		
MIDDLE NAME	N/A		WA				
OCCUPATION FACE NAME	N/A		NA				
EMPLOYER/BUSINESS NAME BUSINESS ADDRESS	N/A N/A		NA				
	N/A		N/A	N/A			
	M/A			NA			
TELEPHONE NO.	N/A FERNANDE	Z	N/A		N/	/A	
TELEPHONE NO.	N/A FERNANDE NARCISO	NAME EXTENSION (JR., SR)	N/A		N/		
TELEPHONE NO. 24. FATHER'S SURNAME	FERNANDE				N/	/A	
TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME	FERNANDE NARCISO	NAME EXTENSION (JR., SR)	N/A		N/	/A	
TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME	FERNANDE NARCISO GUCELA	NAME EXTENSION (JR., SR) N/A	N/A N/A		N/ N/ N/	/A	
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27. CAR		(BOARD/ BAR) UNDER		DATE OF				LICENSE (if a	nnlicable)
	SPECIAL LAWS	SPECIAL LAWS/ CES/ CSEE SPECIAL LAWS/ CES/ CSEE (If Applicable) RATING EXAMINATION / PLACE OF EXAMINATION / CONFERMENT CONFERMENT		RMENT	NUMBER	Date of Validity			
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/ WORK	EXPERIENCE		(Co	ntinue on separate sheet if	necessary)				
Include pri	vate employment.	Start from your recent	work) Descriptio	n of duties should be	indicated in the attach	ed Work Ex	perience shee	i L	
	LUSIVE DATES mm/dd/yyyy)	POSITION TIT	'LE	DEPARTMENT / AGEN	NCY / OFFICE / COMPANY	MONTHLY	SALARY/ JOB/ PAY GRADE (if	STATUS OF	GOV'T
From	То	(Write in full/Do not a	bbreviate)	(Write in full/E	Do not abbreviate)	SALARY	applicable)& STEP (Format *00-0*)/ INCREMENT	APPOINTMENT	SERVICE (Y/N)
10/16/2019	PRESENT	ADMIN. AID	E III	UNIVERSITY F	REVIEW CENTER	12,466.08	3	CASUAL	Υ
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/4/2017	12/31/2018	CLERK		VSUL	IBRARY	6,600.00	16.0°	JOB ORDER	Υ
6/1/2016	03/31/2017	CLERK		VSUL	IBRARY	6,160.00		JOB ORDER	Υ
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SIGN	ATURE	Production Commission	Amp	tinue on separate sheet if	DATE		ly		
SIGN	ATONE	Aug Argi	AF	APP	DATE	214	11-24-	<b>20</b> S FORM 212 (Revised 20	017), Page 2 of

/I. VOLUNTARY WORK OR INVOLVEMENT	IN CIVIC / NON-GOVERNMENT	/PEOPLE/	VOLUNTARY	ORGANIZATION	VS .		
29. NAME & ADDRESS OF (Write in fi			SIVE DATES  //dd/yyyy)  To	NUMBER OF HOURS	POSITION / NATURE OF WORK		
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	A CONTRACTOR OF THE PARTY OF TH						
II. LEARNING AND DEVELOPMENT (L&D	(Co INTERVENTIONS/TRAINING P	ntinue on separat ROGRAMS A	e sheet if necessa TTENDED	אניי		Manager Control of the Res	
tart from the most recent L&D/training program and inclu				ief Executive Manageri	ial positions)		
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)		INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
TARBOOKS Orientation and Hand-on Training	at a few countries of the countries of t	94/23/2019	To	00		Signature that the second	
O 9001:2015 Quality Management System: Proces	s Documentation & Risk Assessment		04/23/2019	8.0		DOST	
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ientation Workshop Among JO Clerks and Lab Te		01/15/2019	01/15/2019	8.0	to base, use	vsu	
ender Sensitivity Training for the Administrative a	nd Support Staff	11/9/2018	11/9/2018	8.0	of activities	vsu	
FID Library Systems Start-Up Training	The stage Te	3/5/2018	3/5/2018	4.0		VSU LIBRARY	
rientation of Clerks on Basic Customer Service an ersonnel Document or Requirement	d Department Based HRMPs on	11/9/2017	11/9/2017	4.0	Up 600 840 0	vsu on and most becomes any ensit.	
rientation on Basic Customer Service and Work Va	lues and 23Y1 At [2]	5/9/2017	5/9/2017	8.0	a Isda ed s	DR. LOURDES B. CANO	
V in the Workplace Seminar		9/12/2016	6/12/2016	8.0	Mod R. Liell	VSU INFIRMARY	
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VIII. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES	32. 10. 20.0411 5577 COLUBS NO.		TINCTIONS / REC Vrite in full)	OGNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZAT (Write in full)	
TYPING		a men seas - a	VA			N/A	
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				COMPANY CONTRACTOR OF THE PART
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?		YES 🗹 NO	
Control of the second of the s	b. within the fourth degree (for Local Government Unit - Car	reer Employees)?	YES	
35.	a. Have you ever been found guilty of any administrative off	iense?	YES ✓ NO  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 an any court or tribunal?	69 - 110050V9 - 61016560	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, in the public or private sector?		If YES, give details: YES ✓ NO	
38.	a. Have you ever been a candidate in a national or local ele- Barangay election)?	and the second of	YESIf YES, give Zaillo	590 M. Charles 1900 190 190 190 190 190 190 190 190 19
2	b. Have you resigned from the government service during the election to promote/actively campaign for a national or local	candidate?	YESIf YES, give ☑aiNso	e forme in a law later of the former of the control
39.	Have you acquired the status of an immigrant or permanent	resident of another country?	If YES, give details (cour	ntry):
40. a.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magand (c) Solo Parents Welfare Act of 2000 (RA 8972), please Are you a member of any indigenous group?	e answer the following items:	YES NO	
b.	Are you a person with disability?		YES ☑ NO If YES, please specify: YES ☑ NO	
c.	Are you a solo parent?		If YES, please specify ID No If YES, please specify ID No	
41.	REFERENCES (Person not related by consanguinity or affinity to applicar	nt /appointee)		<i>y</i> -
	NAME	ADDRESS	TEL. NO.	
	HON. DEXTER S. MAGAN	PANGASUGAN BAYBAY, LEYTE		
Constitution of the Constitution of	ANDRELI D. PARDALES	VSU LIBRARY, VISCA BAYBAY, LEYTE		-
and the second	MARIA AGNES HERMANO	VSU LIBRARY, VISCA BAYBAY, LEYTE		
42.	I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertin 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 entative to verify/validate the contents state	Republic of the dherein,	
G	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)  LEASE INDICATE ID Number and Date of Issuance  overnment Issued ID: TIN	Aupu		
H	ate/Place of Issuance: 12-7-2016	Signature (Sign inside the bo	x)	Right Thumbmark
100	SUBSCRIBED AND SWORN to before me this	11122	ing his/her validly issued govern	
	02.42.0	ATTY MEAN GUINOCOR VSU Chief Jegai Unicer		12 (16) (4)
		Person Administering Oath		

## **WORK EXPERIENCE SHEET**

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

- 2. 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: October 16, 2019 Present
- Position: Administrative Aide III Casual
- Name of Office/Unit: University Review Center
- Immediate Supervisor: Mrs. Angelica P. Baldos
- Name of Agency/Organization and Location: Visayas State University, ViSCA Baybay City, Leyte
  - List of Accomplishments and Contributions (if any)
  - Summary of Actual Duties

Prepare, record and release all financial/ administrative documents; Record all payments made by clients; Encode evaluation by topic and summarize results; Conduct evaluation for regular and part time faculty; Performs other functions as assigned by the head.

- Duration: January 2016 October 15, 2019
- Position: Administrative Aide I (Clerk)-Job Order
- Name of Office/Unit: University Library
- Immediate Supervisor: Mrs. Andreli D. Pardales
- Name of Agency/Organization and Location: Visayas State University, ViSCA Baybay City, Leyte
  - List of Accomplishments and Contributions (if any)
  - Summary of Actual Duties
    - Encodes journal articles into the database (Destiny Library Manager); Encodes and files index cards of the Serials Unit; Prepares payment of serials subscription; Records journals/magazines/newspapers and stamps ownership; Prepares journals/magazines for book binding; Accessions and encodes newly bound journals into the database; Segregates newly bound thesis by Library/Dept./Adviser/Personal copies; Releases bound thesis to Dept./Adviser and Personal copies; Shelf-reads and shelves journals, newspapers, magazines and pamphlets; Keeps the statistical records of Serials and Reference Unit's materials; Performs other functions as assigned by the head

RHEA ANGELIE M. FERNANDEZ

(Signature over Printed Name of Employee/Applicant)

Date: 1-24-20