## PERSONAL DATA SHEET

	ion made in the Personal Data Sheet and the W				illiai Casers ayam	ISLUIU parson	Concerned.	
Print legibly. Tick appropriate boxes	s ( and use separate sheet if necessary. Indicate N			1. CS ID No.		(Do not fill up. F	or CSC use only	
PERSONAL INFORMATION 2. SURNAME		Arra				Arthur Control		
FIRST NAME	BALEIVECIA NAME EXTENSION (JR., SR)							
	1000000							
MIDDLE NAME	ABELLANA							
DATE OF BIRTH     (mm/dd/yyyyy)	APRIL 14, 1955 16. CITIZENSHIP			Filipino Dual Citizenship  by birth by naturalization				
4. PLACE OF BIRTH	BAUMAN OLTU	If holder of dual citize	enship,					
5. SEX MAVE	Male Female	please indicate the d	etails.	Phih ppin			~	
6 CIVIL STATUS	Single Married Widowed Separated Other/s:	17. RESIDENTIAL ADDRESS		use/Block/Lot No.		Street	ABANG	
7. HEIGHT (m)	56"				カルソ	Province U		
8. WEIGHT (kg)	93 KG	ZIP CODE		City/Municipality BAYBAY 6521-A			CYIC	
9. BLOOD TYPE	"B"	18. PERMANENT ADDRESS		<u>u</u>	IZIA	1		
		194	Hot	use/Block/Lot No.		Street		
10. GSIS ID NO.	(2N+00605037821		Su	bdivision/Village		Barangay SA	BANG	
11. PAG-IBIG ID NO.	1700-0024-1794		0	City/Municipality BAYBAY			Province VEUTE	
12. PHILHEALTH NO.	13-000015247-2	ZIP CODE		65	721-A			
13. SSS NO.	04-0903782-1	19. TELEPHONE NO.		NOI	VE			
14. TIN NO.	116-623-081	20. MOBILE NO.	0997 5069624					
15. AGENCY EMPLOYEE NO.	V000074	21. E-MAIL ADDRESS (if any)	rodulfobalerecia@yanoo.com					
II. FAMILY BACKGROUND			100	an jos onea ead	No yaivo.			
22. SPOUSE'S SURNAME	BAVENEUA		23. NAME of CH	HILDREN (Write full name and	f list all)	DATE OF BIRT	TH (mm/dd/yyyy)	
FIRST NAME	ANITA	NAME EXTENSION (JR., SR)	NONNIE B. BAVENECIA			mm 5, 1979		
MIDDLE NAME	BACARINAO		1000	, , , , , , , , , , , ,		,,,,	( 111	
OCCUPATION	HOUSE WIFE							
EMPLOYER/BUSINESS NAME	VISAMAS STATE U	NIVENSITY						
BUSINESS ADDRESS	VISCA BROW PK							
TELEPHONE NO.	NONE	· Chyu Ghi						
24. FATHER'S SURNAME	BAVENECIA				***************************************		-	
FIRST NAME	ANACORUTO	NAME EXTENSION (JR., SR)			-			
MIDDLE NAME	Chrosol							
25. MOTHER'S MAIDEN NAME	AMELLANA							
SURNAME	ABELLANAN						2 12 12 16 1	
FIRST NAME	MOFUTA							
MIDDLE NAME	MANTUA			(Confinue on se	parate sheet if neces	servi		
III. EDUGATIONAL BAGKO				(condition on ou			***	
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGR (Write in full)	EE/COURSE	PERIOD OF ATTENDANCE	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED	
ELEMENTARY	BMMM NEST CONTIM	EVENENT	74711	1961 1968	N/A	1948	NOWE	
SECONDARY	BMY HIGH SOHOOL	HIGH SCH	OCL	1986	N/A	1986	NONE	
VOCATIONAL / TRADE COURSE	GIVEN BY DEF ED	N/A		41/4	NA	N/A	NONE	
COLLEGE		11/1		ALLA	NA	N/A	NONE	
GRADUATE STUDIES	111/	N/A N/A		N/X-	N/A	NIA	IONE	
		ontinue on separate sheet if nec	essary)	1 / 1//	(V//-\}	17/14	101-0	
SIGNATURE	mung Suw-	DATE	060	07 2018	CS FORM 212	2 (Revised 2017)	, Page 1 of 4	

	arwoz zugi				ß.				5
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 EXAMINAT	ION / CONFE	RMENT	LICENSE (if a	Date of	
	TO THE COLUMN	TI / DIGUELLO CIOCHOL		CONFERMENT				HOWIDER	Validity
						r		,	
NIA		NA	N/A	N/	A		N/	K	
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		A-1							*
		,	(6	ontinue on separate sheet i	f naraccan/				
	EXPERIENCE	and the second			e indicated in the attache	d Mark F			
28. INCL	USIVE DATES nm/dd/yyyy)	POSITION 1			NCY / OFFICE / COMPANY	MONTHLY	SALARY/ JOB/ PAY GRADE (if	STATUS OF	GOVT
From	(Write in full/Do not		abbreviate)		Do not abbreviate)	SALARY	applicable)& STEP (Format "00-0")/ INCREMENT	APPOINTMENT	SERVICE (Y/N)
1978 PIVESON		SECURITY GVAND		UISAYAS STATE UNIVERSITY 6-5			6-5	PERM. 40	40
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	2 13		(0	ontinue on separate sheet in	f necessary)				
SIGN	ATURE	Juny	follo	DATE	06 00 2010	8	CS FORM 2	212 (Revised 2017), I	Page 2 of 4
		////	-						

VI. VOLUNTARY WORK OF NVOLVEHER	IT IN CIVIC ( N-GOVERNMENT)			RGANIZATI	46	
29. NAME & ADDRESS O (Write in			/E DATES ld/yyyy) To	NUMBER OF HOURS	4/11	POSITION / NATURE OF WORK
	,		<i>f</i> .			.) /.
Ŋ	A		VA .			N/A
	(Con	finue on separate	sheet if necessary)			×
II. LEARNING AND DEVELOPMENT (L&		OGRAMS AT	TENDED	#Executive Work	gerial positions)	
30. TITLE OF LEARNING AND DEVELOPMENT (Write in	r full)	ATTEN	DANCE ddyyyy)	NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
EDUTATION SOMINAR, OJI	1	007 27,	28,2016			LTO, NETGENON 08 AT VSV
May INTOZ, NETWONK TI			4,2011	llims	TECHNICAL	PNP NOTION 8
EDIMONTATION SEMINAN			2011	8 Hrs	TECHNICAL	OVPAF, USU
MUNATURE OF MANUAL		SEPT 12,	2011	C1me	teen non	OVPAF, VSV
MINAN ON TOTAL GIA			19,7010		154HVICAL	
AMONG ADMIN-PEN		1.440 10	11, 2010	10 1111	IN STRICK D	VA VON
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			-			Mark Control
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	2 p 1 & 2 m 17 A m	CTARTE.	15 26			
			\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \			(e)
	(Con	tinue on separate	sheet if necessary)			
III. OTHER INFORMATION					and the second	
31. SPECIAL SKILLS and HOBBIES	32. NON	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)				33. MEMBERSHIP IN ASSOCIATION/ORGANIZATI (Write in full)
DILAWING	1) COMMENDATION - MMM 02, 2011					COVEMPINOS
LATTERING	3) COMMON DATIO	N 10	SCPT 26	12	2 - 0	FROM WIRAT CIVICOM
SWIMMING	LOYAUTH AWARNO 14 OUT TO NOV 30, 2008(30					/ MOPA MEMPOR
		WYAVTH AWAMO 10 DG TO DEC 01,2013 TO NOV 30, 2013 (35 YMS)			PETISONNEL ASSO.	
	MARKET	More			で /	TO INSUMINE V /8-770,
	NUUU	THE PARTY OF	sheet if necessary	) U		
SIGNATURE	mufor	ule-	DATE	09 0	00 201	CS FORM 212 (Revised 2017), Page 3 of

1227	all the second s		P 1	,
34.	Are you related by consanguinity or affinity to the inting 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		
	b. within the fourth degree (for Local Government Unit - Care	eer Employees)?	YES NO	
			If YES, give details:	
35	a. Have you ever been found guilty of any administrative offe	ense?	YES NO	
55.			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	y law, decree, ordinance or regulation by	☐ YES ☑ NO	
	any court or tribunal?		If YES, give details:	
37.	Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, en (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)?	☐ YES                NO  If YES, give details:	m	
	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):	
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972),			
a.	Are you a member of any indigenous group?		☐ YES NO If YES, please specify:	
b.	Are you a person with disability?		YES NO	
C.	Are you a solo parent?		If YES, please specify ID No:	
	Ale 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.	
A	TTY- ENNESTO PAUTAWAN	DMMM CITY	NONE	
	HON. VICENTE 6. VELOSO	BMBM CITY	Novo	
-	DR. 208E L. BACUSMO	VISCA, PMM PMM	NOWE	
THE REAL PROPERTY.	I declare under oath that I have personally accomplished thi	s Personal Data Sheet which is a true, co	prrect and complete	
	statement pursuant to the provisions of pertinent laws, reauthorize the agency head / authorized representative to misrepresentation made in this document and its attachmagainst me.	verify/validate the contents stated hereir	n. I agree that any	
F	Sovernment legical ID ( ) 2		silled him to	
	Covernment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance	Jung Sulm		
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	D/License/Passport No.: V000074	x)		
	hate/Place of Issuance: VSU_BMM CMM	Right Thumbmark		
	SUBSCRIBED AND SWORN to before me this	0 8 2018 affiant exhib	iting his/her validly issued government ID as indicated above.	
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		VSULEGAL OFFICER Person Administering Oat	h .	