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.

	NG OUT THE PERSONAL DATA SHEET (PDS) I				e/C///////	casers against an	s person con	cerried.	
Print legibly. Tick appropriate boxes () and u I. PERSONAL INFORMATION	separate sheet if necessary. Indicate N/A if not ap	plicable. DO NOT ABBREVIAT	TE.		1. CS ID No.		(Do not fill up. F	For CSC use only)	
2. SURNAME	VALIDA								
FIRST NAME	ALBERTO					NAME EXTENSION (JR.	., SR) N/A		
						and the state of t			
MIDDLE NAME 3. DATE OF BIRTH	FERRER								
(mm/dd/yyyy)	10/25/1956	16. CITIZENSHIP	☑ Filipino		10	☐ Dual Citizenship ☐ by birth ☐ by naturalization			
4. PLACE OF BIRTH	ABUYOG, LEYTE	If holder of dual citize	enship,		s	Pls. indicate country:			
5. SEX	✓ Male ☐ Female	please indicate the d	details.	Philippines				-	
6 CIVIL STATUS	☐ Single ☑ Married ☐ Widowed ☐ Separated ☐ Other/s:	17. RESIDENTIAL ADDRESS		Zone 1 buse/Block/Lot No ubdivision/Village			Street Guadalupe Barangay		
7. HEIGHT (m)	1.67			Baybay City			Leyte		
8. WEIGHT (kg)	67.0	ZIP CODE		City/Municipality		6521-A	Province		
9. BLOOD TYPE	"O"	18. PERMANENT ADDRESS		Zone1					
10. GSIS ID NO.	LP-56102502642			House/Block/Lot No.			Street Guadalupe		
11. PAG-IBIG ID NO.	1700 0028 9384	enchapertent		Subdivision/Village Baybay City			Barangay Leyte		
12. PHILHEALTH NO.	13-000069846-7	ZIP CODE		City/Municipality 6521-A			Province		
13. SSS NO.	04-0833775-7	19. TELEPHONE NO.							
14. TIN NO.	104-770-841	20. MOBILE NO.		- 10	09127847894				
15. AGENCY EMPLOYEE NO.	V000715	21. E-MAIL ADDRESS (if any)		albert_valida@yahoo.com					
II. FAMILY BACKGROUND									
22. SPOUSE'S SURNAME	VALIDA		23. NAME of Ch	NAME of CHILDREN (Write full name and list all)			DATE OF BIRTH (mm/dd/yyyy)		
FIRST NAME	GINA	NAME EXTENSION (JR., SR)	IAME EXTENSION (JR., SR) ALJAY D VA		D VALIDA	DA 2/2		0/1988	
MIDDLE NAME	DARIA		ALGIN D VALIDA				1/16/1990		
OCCUPATION	HOUSEWIFE	PLAFFED GIA PELOUP		GELYN D VALIDA 1/30/1992					
EMPLOYER/BUSINESS NAME	N/A	DUMPAC GREET		ALVIN D VALIDA				1993	
BUSINESS ADDRESS	N/A	GLC49 AID COMAJ9		ANGELICA D VALIDA 6/25/1996					
TELEPHONE NO.	N/A	Marchana and Change		ALMA D VALIDA				7/13/1999	
24. FATHER'S SURNAME	VALIDA						1		
FIRST NAME	ANTONIO	NAME EXTENSION (JR., SR)					10000		
MIDDLE NAME	VERRA	1							
25. MOTHER'S MAIDEN NAME									
SURNAME	FERRER								
FIRST NAME	ANTONINA								
MIDDLE NAME	DE GUZMAN	(Continue on separate sheet if necessary)							
III. EDUCATIONAL BACKGROUND									
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGRE (Write in full)	EE/COURSE	PERIOD OF A	TTENDANCE	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS	
ELEMENTARY	ABUYOG CENTRAL SCHOOL	PRIMARY EDUCATION	ION	From 1964	To 1970	Certificate	RECEIVED		
SECONDARY	NOTRE DAME OF ABUYOG	HIGH SCHOOL	Olv	1904	1970		1970	SALUTATORIAN	
VOCATIONAL /	N/A	That i der i des		1970	1914	Diploma	1974		
TRADE COURSE	VISAYAS STATE COLLEGE OF AGRICULTURE (now	the British and French His November 110	e-selection						
COLLEGE	VSU)	BS AGRICULTUR	Œ	1975	1980	Diploma	1980	20	
GRADUATE STUDIES	LEYTE STATE UNIVERSITY (now VSU)	MS AGRONOMY		1986	2004	Diploma	2004		
SIGNATURE	trum			DATE June 7,2021					

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80th Joint ViCAARP and RRDEN Symposium		11/21/2018	11/23/2018	16.0	Technical	Visayas Coordinated Agricultural Research Program and	
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ntellectual Property (IP) Foundation Course for VS	Library 2017 the s	12/5/2017	12/6/2017	16.0	Conference	Visayas State University	
29th Joint ViCAARP and RRDEN Regional Researd Symposium	i zav LTL Jakob	11/27/2017	11/28/2017	16.0	Technical	Visayas Coordinated Agricultural Research Program and Regional Research, Development and Extension Network	
28th Joint ViCARP and RRDEN Regional Research Symposium	n, Development and Extension	12/7/2016	12/8/2016	16.0	Technical	Visayas Coordinated Agricultural Research Program and Regional Research, Development and Extension Network	
2nd National Organic Agriculture	Scientific Conference	02/16/2016	02/20/2016	40.0	Conference	Organic Agric. Society of the Phil.	
27th Joint ViCARP and RRDEN Regional Research	277				777	Visayas Coordinated Agricultural Research Program and	
Symposium	end eth gara a	12/03/2015	12/04/2015	16.0	Technical	Regional Research, Development and Extension Network	
26th Joint ViCARP and RRDEN Regional Research Symposium	i, Development and Extension	03/17/2015	03/18/2015	16.0	Technical	Visayas Coordinated Agricultural Research Program and Regional Research, Development and Extension Network	
25th Joint ViCARP and RRDEN Regional Research	n, Development and Extension	06/19/2014	06/20/2014	16.0	Technical	Visayas Coordinated Agricultural Research Program and Regional Research, Development and Extension Network	
Symposium 2014 ABACA RDE IN-HOUSE CONSULTATIVE R	FVIEW	06/05/2014	06/06/2014	16.0	Technical	Office of the Vice-President for Research and	
24th Joint ViCARP and RRDEN Regional Research	2371 1 1		00/00/2014	-		Extension/National Abaca Research Center Visayas Coordinated Agricultural Research Program and	
Symposium	, Dovolopmont und Extension	11/23/2013		8.0	Technical	Regional Research, Development and Extension Network	
2013 ABACA RDE IN-HOUSE CONSULTATIVE R	EVIEW	02/11/2013	02/12/2013	16.0	Technical	Visayas State University and National Abaca Research Cent	
Abaca Stakeholders' Consultative Meeting and plan	nning Worhshop for the Visayas	11/16/2012		8.0	Conference	National Abaca Research Center	
2012 Annual RDE In-house Consultative Review at	nd Dianning Markahan	05/02/2012	05/03/2012	16.0	Conference	Visayas State University and National Abaca Research Cent	
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VIII. ATUED WEARING		Continue on separati	e sheet if necessa	ry)			
VIII. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES	32. h	NON-ACADEMIC DIST (Wi	INCTIONS / RECO	OGNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

			to the same
4.	Are you related by consanguinity or affinity to the appointing		
	chief of bureau or office or to the person who has immediat Bureau or Department where you will be apppointed,	e supervision over you in the Office,	
	a. within the third degree?		YES NO
	b. within the fourth degree (for Local Government Unit - Cal	reer Employees)?	☐ YES ☑ NO
			If YES, give details:
	a. Have you ever been found guilty of any administrative of	fense?	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:
0.000	Have you ever been convicted of any crime or violation of a	any law decree ordinance or regulation by	
	any court or tribunal?	☐ YES ☑ NO If YES, give details:	
	Have you ever been separated from the service in any of th retirement, dropped from the rolls, dismissal, termination, et (abolition) in the public or private sector?		✓ YES
-	a. Have you ever been a candidate in a national or local ele	ection held within the last year (except	
).	Barangay election)?	Solon flora within the last year (except	☐ YES ☑ NO If YES, give details:
	 b. Have you resigned from the government service during the election to promote/actively campaign for a national or local 	점점 보다 있었다면 없었다면 회사에 있다면 있다면 하고 있는데 이 없었다면 하는데	☐ YES ☑ NO If YES, give details:
9.	Have you acquired the status of an immigrant or permanent	☐ YES ☑ NO If YES, give details (country):	
	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?		☐ YES ☑ NO
	Are you a person with disability?		If YES, please specify:
	The year a person with a sability?		☐ YES ☑ NO If YES, please specify ID No:
	Are you a solo parent?		☐ YES ☑ NO If YES, please specify ID No:
1.	REFERENCES (Person not related by consanguinity or affinity to applicant	/appointee)	
	NAME	ADDRESS	TEL. NO.
	Othello B. Capuno	Visayas State University, Baybay City	563-7064
	Rodolfo G. Escalada	Visayas State University, Baybay City	563-2629
	Rommel C. Armecin	Visayas State University, Baybay City	563-7012
2. The second se	I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertine Philippines. I authorize the agency head/authorized representation made in this document administrative/oriminal case/s against me.	nent laws, rules and regulations of the entative to verify/validate the contents state	Republic of the ed herein.
	Sovernment Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance	halas	
3	overnment Issued ID: LP-56102502642	Mywar	
	D/License/Passport No.:	Signature (Sign inside the b	ox)
D	ate/Place of Issuance:	June 7,2021 Date Accomplished	Right Thumbmark
	SUBSCRIBED AND SWORN to before me this	2021 , affiant exhibiting	ng his/her validly issued government ID as indicated above.
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		Person Administering Oat	th
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