CS Form No. 212 Revised 2017,	PERSO	TA S	HEET					
	ation made in the Personal Data Sheet and t	he Work Experience Sheet s	shall cause ti	he filing of administrative	/criminal case/s aga	ainst the perso	on	
	TO FILLING OUT THE PERSONAL DATA SH			The second secon		A		
Print legibly. Tick appropriate boxes I. PERSONAL INFORMATION	s (and use separate sheet if necessary. Indicate	N/A if not applicable. DO NOT	ABBREVIATE.	1. CS ID No.		(Do not fill up. F	or CSC use on	
2 SURNAME	POSAS							
FIRST NAME	MARICAR				NAME EXTENSION (JR.,	SR)	ar an energy are all	
MIDDLE NAME	BAGARINAO		Bandi Astronomica de la compansión					
3. DATE OF BIRTH		AC OUTSTAINING						
(mm/dd/yyyy)	NOVEMBER 07,1977	16. CITIZENSHIP	r .	✓ Filipino □ Dual Citizenship				
4. PLACE OF BIRTH	BAYBAY, LEYTE	If holder of dual citizer	nship,	□ by birth □ by naturalization ip, Pls. indicate country:				
5. SEX	☐ Male ☑ Female	please indicate the details.						
	✓ Single	17. RESIDENTIAL ADDRESS		792	ILA	NG ILANG	X	
6 CIVIL STATUS	☐ Widowed ☐ Separated			House/Block/Lot No.	Street MARCOS			
	Other/s:	Marie Control of the		Subdivision/Village		Barangay		
7. HEIGHT (m)	1.5	6521		BAYBAY City/Municipality		Province		
8. WEIGHT (kg)	79	ZIP CODE	1 54	TMALSISCA SHORE RESEARCH	6521			
9. BLOOD TYPE	"0"	18. PERMANENT ADDRESS		792 House/Block/Lot No.	ILA	NG ILANG	3 STER	
10. GSIS ID NO.	N/A BURRE ICOMUR	destructions of the north	0 1 1	OF MUSCUUT VIOLENCE VIOLA MOTO CAL	2021	MARCOS	ostru j	
11. PAG-IBIG ID NO.	121045720662	6521		Subdivision/Village BAYBAY	Jeles nears	Barangay LEYTE	Eimer	
12. PHILHEALTH NO.	030500706763	7IP CODE		City/Municipality 6521	8015	Province		
0.908		ZIP CODE		6321		199	arvata 1	
13. SSS NO.	33-6943383-6	19, TELEPHONE NO.		repoped as 0	NONE	18.01 - 61	DENN!	
14. TIN NO.	01109918	20. MOBILE NO.	0	90 Encoder	155992609	18/57 87	1,11120	
15. AGENCY EMPLOYEE NO.	V01255	21. E-MAIL ADDRESS (if any)	pos	sasricafire@yahoo.c	om/maricar.pos	sas@vsu.e	du.ph	
II. FAMILY BACKGROUND								
22. SPOUSE'S SURNAME	School 12200.00	fice of the Graduate	23. NAME of C	HILDREN (Write full name and I		DATE OF BIRT	TH (mm/dd/yyy	
FIRST NAME	N/A	NAME EXTENSION (JR., SR)		FIRHEY P. CAYU	NDA	6/19	/2007	
MIDDLE NAME	N/A							
OCCUPATION	N/A							
EMPLOYER/BUSINESS NAME	N/A							
BUSINESS ADDRESS	N/A							
TELEPHONE NO.	N/A							
24. FATHER'S SURNAME	POSAS	-						
FIRST NAME	OSCAR	NAME EXTENSION (JR., SR)						
MIDDLE NAME	BAGARINAO						T. D. Weigh	
25. MOTHER'S MAIDEN NAME	MARTINA GODINES BAGARIN	AO			The second secon	A 20 (100) (1) (1) (1) (1) (1)		
SURNAME	BAGARINAO							
FIRST NAME	MARTINA							
MIDDLE NAME	GODINEZ			(Continue on s	eparate sheet if necess	ary)		
III. EDUCATIONAL BACK	GROUND				_	-		
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGRE (Write in full)	E/COURSE	PERIOD OF ATTENDANCE	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHI ACADEMIC HONORS	
	VISCA FOLINDATION			From To			RECEIVED	

ELEMENTARY **ELEMENTARY EDUCATION** 6/1/1984 3/1/1990 GRADUATED 1990 N/A **ELEMENTARY SCHOOL** EXPERIMENTAL RURAL HIGH SECONDARY EDUCATION SECONDARY 6/1/1990 3/1/1994 GRADUATED 1994 N/A SCHOOL VOCATIONAL / N/A N/A N/A N/A N/A N/A TRADE COURSE BACHELOR OF ANIMAL **VISAYAS STATE COLLEGE OF** 6/1/1994 10/1/1998 COLLEGE SCIENCE MAJOR IN ANIMAL GRADUATED 1998 N/A AGRICULTURE HEALTH GRADUATE STUDIES N/A N/A N/A N/A N/A N/A N/A SIGNATURE DATE December 13, 2021 CS FORM 212 (Revised 2017), Page 1 of 4

	RVICE ELIGIBILIT	Y				- 3		•	K
			RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	ENT	LIÇENSE (if ap	pplicable) * Date of Validity		
DRIVERS LICENSE N/A			N/A	NOV.7,1998	ORMOC CITY, LEYTE			N0398029834	11/7/2023
	Secretary Secretary		12 37 CM 981			. The state of	O tractor		
Maria Conservation of the									
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						1/1	19196		
			1 1 S to			71,69119	V (3		
/ INCRE	OF DELIVER		(Co	ontinue on separate shee	nt if necessary)	* p**	1.0)		
/. WORK EX Include private		art from your recent wor	k) Description o	f duties should be in	ndicated in the attached W	Vork Experience	PERSONAL PROPERTY AND		
8. INCLUSIVE D	DATES (mm/dd/yyyy)	POSITION TITI (Write in full/Do not ab			ENCY / OFFICE / COMPANY	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable) & STEP (Format *00-0*)/ INCREMENT	STATUS OF APPOINTMENT	GOVT SERVICE (Y/ N)
5/3/2021	12/31/2021	EDUCATION RE ASSISTAI		Office of the	Graduate School	18, 784.04	11 30	CASUAL	YES
3/1/2021	4/30/2021	EDUCATION RE ASSISTAL	SEARCH	Office of the	Graduate School	12,174.80		JOB ORDER	YES
1/1/2021	2/28/2021	EDUCATION RE ASSISTA	SEARCH NT	Office of the	Graduate School	18, 784.04	A.W.	CASUAL	YES
10/1/2020	12/31/2020	EDUCATION RE ASSISTA	SEARCH	Office of the	Graduate School	18, 784.04	h48 502 9 15 F	CASUAL	YES
1/1/2020	09/31/20	CLERK			Graduate School	9960.00	1207632300	JOB ORDER JOB	NO
1/1/2019	12/31/2019	Data Enco			Graduate School	9600.00	41.600.1	ORDER JOB	NO
1/1/2018	12/31/2018	Data Enco	utanawa200	1 1000	Graduate School	5200.00	CC dV	ORDER JOB	NO
1/1/2017	12/31/2017	Data Enco		And the second s	Graduate School	5200.00		ORDER	NO
10/1/2016	12/31/2016	Data Enco	der	Omice of the	Graduate School	5200.00	/4 ¹ / ₂	ORDER	NO
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		3114	AM	- A.V.					
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			and the same of the same of the same of	Continue on separate she	et if necessary)				
SIGN	ATURE	0	Ryosas	•	DATE		DECEMBE	R 13, 2021	

V. VOLUNTARY WORK OR INVOLVEMEN	IT IN CIVIC / NON-GOVERNMENT / I	PEOPLE / VO	LUNTARY OF	RGANIZATION/	\$	
29. NAME & ADDRESS C	DF ORGANIZATION	INCLUSIVE DATES (mm/dd/yyyy) From To		aredes atmessive	Pentral rection of	The character of the same of the character of the same
(Write i	n full)			NUMBER OF HOURS		POSITION / NATURE OF WORK
N/A	9 20	N/A	N/A	N/A	N/A	Part of hopenitorial fittin d
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					11	
VII. LEARNING AND DEVELOPMENT (L&		itinue on separate DGRAMS ATT		y)		
(Start from the most recent L&D/training program and i	nclude only the relevant L&D/training taken for			hief/Executive/Man	agerial positions)	
30. TITLE OF LEARNING AND DEVELOPMENT (Write I		· · ATTE	E DATES OF NDANCE dd/yyyy)	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/	CONDUCTED/ SPONSORED BY (Write in full)
RE-ORIENTATION OF EMPLOYEE'S DUTIES	AND RESPONSBILITIES AND GOOD	From	То		Technical/etc)	
CUSTOMER SERVICE	231 L 1	9/23/2021	9/23/2021	8HRS	TECHNICAL	VSU
Basic Occupational Safety and Health Tr CORONAVIRUS VACCINE:ARE YOU WILLIN	a man de la companya	6/7/2021	6/11/2021	40HRS	TECHNICAL	VSU VSU
Adelito D. Posas	O TAILE THE OTION DI	2/23/2021	2/23/2021	4hrs	TECHNICAL	VSU
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	() YES		4.4			. Удискай бійм козпер в доу вій
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		The state is the state of				PETERS IN CONTRACTOR OF SECTION O
12 Page 1	EVIE 9150/27521	VTIO V	BYAS.	121/		VLIUT 8 ALI3SAVA S
		1111001				
	EYTE 9173102076	Y CITY,	ASYAS.	USV .		s Jose L Bacusmo
		YTIO Y	AGYAG	LOV		WASARAD DANTIGE S
	of the Rupublic of the	godelnos:	E SSILL S	od henri	la unclidada	Complete statement parsuper for the
	h slenen belgis sine	ete da com	as Africa เ	synashoeangs to ammon	p9X+) ********	art winese adi espedirie i Lamogdiri).
VIII. OTHER INFORMATION	(Cor	ntinue on separate	sheet if necessar	DV)		
31. SPECIAL SKILLS and HOBBIES	32. NON	I-ACADEMIC DIST		GNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION
LAWN TENNIS		N/	te in full)		, 850002	N/A
DRIVING	4, 2				:ENSE	Sovement State ORIVERS LID
COMPUTER SKILLS	18 703e				٠.	3920-28-2001 or re-america
According to	387 S 147	(200) (200) (200) (200)				TIO VASIAS
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			n real segment in the second	Charles and the same of	- (
	and the same of th	NUO DIMENNI				
SIGNATURE	15000	ontinue on separate sheet if necessary)			ATE	December 13, 2021

	7				
34. Are you related by consanguinity or affinity to the ap chief of bureau or office or to the person who has im	mediate supervision over you in the Office,				
Bureau or Department where you will be apppointed	The state of the s				
a. within the third degree?	☐ YES ☑ NO				
b. within the fourth degree (for Local Government U	YES VO				
		If YES, give details:			
		,			
5. a. Have you ever been found guilty of any administra	ative offense?	YES V NO			
		If YES, give details:			
		i i Es, giro dotano.			
b. Have you been criminally charged before any cou	YES V NO				
		If YES, give details:			
		Date Filed:			
	height of the second of the se	Status of Case/s:			
6. Have you ever been convicted of any crime or violat	ion of any law, decree, ordinance or regulation by				
any court or tribunal?		☐ YES ☑ NO If YES, give details:			
	Control of the contro	II TES, give details.			
	1 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1				
77. Have you ever been separated from the service in a	any of the following modes: resignation				
retirement, dropped from the rolls, dismissal, termina		☐ YES ☑ NO If YES, give details:			
(abolition) in the public or private sector?	ation, end of term, missing contract of phased out	II 1Ed, give details.			
(abolitori) in the public of private decici.		ego-transfer and a second control of the sec			
38. a. Have you ever been a candidate in a national or l	ocal election held within the last year (except	☐ YES ☑ NO			
Barangay election)?		If YES, give details:			
b. Have you resigned from the government service of		☐ YES ☑ NO			
election to promote/actively campaign for a national	or local candidate?	If YES, give details:			
39. Have you acquired the status of an immigrant or per	rmanent resident of another country?	☐ YES ☑ NO			
30		If YES, give details (country):			
		11 1 E.S., give details (country).			
40. Pursuant to: (a) Indigenous People's Act (RA 8371) 7277); and (c) Solo Parents Welfare Act of 2000 (R/ Are you a member of any indigenous group? Are you a person with disability? Are you a solo parent?	☐ YES				
Are you a solo parent?		If YES, please specify ID No:			
41. REFERENCES (Person not related by consanguinity or affinity to	and logat (appoints)				
NAME	ADDRESS	TEL. NO.			
DR. ANABELLA B. TULIN	VSU, BAYBAY CITY, LEYTE	9150727521			
TO ANADELEA D. TOLIN	VOO, BATBAT OTTI, EETTE				
DR. JOSE L. BACUSMO	VSU, BAYBAY CITY, LEYTE	9173108076			
DR. EDITHA G. CAGASAN	VSU, BAYBAY CITY, LEYTE	9155913358			
42. I declare under oath that I have personally acco	mplished this Personal Data Shoot which is a t	rue correct and			
complete statement pursuant to the provisions	of pertinent laws rules and regulations of the	Republic of the			
Philippines. I authorize the agency head/authorized					
agree that any misrepresentation made in the					
administrative/criminal case/s against me.	· ·				
		The state of the s			
Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, e	tc.)				
PLEASE INDICATE ID Number and Date of Issuance					
DENTE DENTE DE L'ACTUCE	- 0				
Government Issued ID: DRIVERS LICENSE					
ID/License/Passport No.: N03-98-029834	ox)				
Date/Place of Issuance: BAYBAY CITY, LEYTE	DECEMBER 13, 2021 Date Accomplished	Right Thumbmark			
SUBSCRIBED AND SWORN to before me this _	affiant exhibiti	ng his/her validly issued government ID as indicated above.			
	Man				
	ATTY, RYSAN C. GUINOCOR				
	VSU Chief Legal Officer	Management and the second of t			
	Person Administering Oa	th			