PORSONAL DATA SHIET

WARNING: Any misinterpretation made in the Personal Data Sheet and the Work Experience Sheet shall cause the filing of administrative/criminal case/s against the person concerned.

Print legibly. Tick appropriate boxes	(and use separate sheet if necessary. Indicate N	/A if not applicable. DO NOT ABBR	EVIATE.		1. OS ID No.		(Do not thi up. Fo	or CSC use only	
I. PERSONAL INFORMATIO	N							La constitución	
2. SURNAME	VILLOCINO					The second of the second			
FIRST NAME	ANDREO NAME EXTENSION (JR., SR)								
MIDDLE NAME	PALAPAR								
3. DATE OF BIRTH (mm/dd/yyyy)	7/19/1985	16. CITIZENSHIP	☑ Filipino ☐ Dual Citizenship ☑ by birth				☐ by naturalization		
4. PLACE OF BIRTH	GABAS, BAYBAY, LYTE	If holder of dual citizensh	ip,	ountry:	6W07F035				
5. SEX	☑ Male ☐ Female	please indicate the detail	ails. Philippines					•	
6 CIVIL STATUS	☐ Single ☑ Married ☐ Widowed ☐ Separated ☐ Other/s:	17. RESIDENTIAL ADDRESS	House/Block/Lot No.				Street Gabas		
7. HEIGHT (m)	1.72		Subdivision/Village Baybay City		Barangay Leyte				
		710,0005	City/Municipality			0524 A	Province		
8. WEIGHT (kg)	72	ZIP CODE 18. PERMANENT ADDRESS	6521-A			0021-A			
9. BLOOD TYPE	A- 1887 1887	- I ENWARENT ROOKESS	House/Block/Lot No.			Street			
10. GSIS ID NO.	021139821793	with tour in a	Subdivision/Village			Gabas Barangay			
11. PAG-IBIG ID NO.	121097544907	NA VERSE	Baybay City City/Municipality				Leyte Province		
12. PHILHEALTH NO.	130501548279	ZIP CODE	6521-A			6521-A			
13. SSS NO.	N/A	19. TELEPHONE NO.	N/A						
14. TIN NO.	431-881-522	20. MOBILE NO.	(+63) 947 273-4915						
15. AGENCY EMPLOYEE NO.	V00827	21. E-MAIL ADDRESS (if any)	N/A						
II. FAMILY BACKGROUND									
22. SPOUSE'S SURNAME	MARANGUIT	23	3. NAME of CHIL	DREN (Write	full name and	list all)	DATE OF BIRT	H (mm/dd/yyyy	
FIRST NAME	MARILYN	NAME EXTENSION (JR., SR)	DANYA M. VILLOCINO				9/27/2016		
MIDDLE NAME	ZETA		ANDRES M. VILLOCINO				5/3/2019		
OCCUPATION	Housewife							and the second second	
EMPLOYER/BUSINESS NAME	N/A								
BUSINESS ADDRESS	N/A								
TELEPHONE NO.	N/A								
24. FATHER'S SURNAME	DECEASED								
FIRST NAME		NAME EXTENSION (JR., SR)					- Tan		
MIDDLE NAME									
25. MOTHER'S MAIDEN NAME	DECEASED								
SURNAME									
FIRST NAME									
MIDDLE NAME				(Co	ontinue on se	parate sheet if neces	sary)		
III. EDUCATIONAL BACK	GROUND								
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)		PERIOD OF A	ATTENDANCE To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIF ACADEMIC HONORS RECEIVED	
ELEMENTARY	Gabas Elementary School	Elementary Graduate		1992	1997	Graduate	1997	N/A	
SECONDARY	Baybay National High School	High School Graduate		1998	2004	Graduate	2004	N/A	
VOCATIONAL / TRADE COURSE	TESDA	Automotive		2008	2008	Graduate	2008	N/A	
COLLEGE	N/A	N/A		N/A	N/A	N/A	N/A	N/A	
GRADUATE STUDIES	N/A	N/A		N/A	N/A	N/A	N/A	N/A	

CAREE	ERVICE ELIGIBILITY ER SERVICE/ RA 1080 (BOARD/ BAR) UNDER DATING DATE OF		i —	LICENSE (if a	pplicable)				
	SPECIAL LAWS	CES/CSEE // DRIVER'S LICENSE	RATING (If Applicable)	EXAMINATION / CONFERMENT	EXAMINATION / PLACE OF EXAMINATION / CONFERMENT		MENT	NUMBER	Date of Validity
	DRIVER'S LIC	CENSE	N/A	7/19/2019	Baybay City, Leyte			H1208000605	7/19/202
							7.37.04	701 20	
								4	
							1	PORPLAN	
			(Co	ntinue on separate sheet	f necessary)				
clude priva	CONTRACTOR STREET, STR	t. Start from your rece	nt work) Description	on of duties should b	e indicated in the attac	hed Work Exp		et.	
(mr	SIVE DATES m/dd/yyyy)	POSITION (Write in full/Do no			NCY / OFFICE / COMPANY /Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/	STATUS OF APPOINTMENT	GOV'T SERVICI (Y/ N)
From 2013	To Present	Administra	itive III	Department of	of Agronomy, VSU	P14,013.00	SG 3	Permanent	0 Yes
2008	2013	Drive			aining Institute, VSU	P6,000.00		Job Order	Yes
2005	2008	Drive	r	Bayb	ay Agrivet	P5,200.00		Job Order	No
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2.633			. 80				AAAA		
		3			* 4				
	- wers								
					1.30				
		10.40							
			(0	Continue on separate shee	t if necessary)				

VI. VOLUNTARY WORK OR INVOLVEMENT	IN CIVIC / Y-GOVERNMENT	/PEOPLE/VO	DLUNTARY	ORGANIZA	VS				
29 NAME & ADDRESS OF O (Write in full	RGANIZATION	INCLUSIVI (mm/dd	E DATES	NUMBER OF HOURS		POSITION / NATURE OF WORK			
Kabalikat Civico	om	April 2016	Present	-			Member		
	GD								
						Prince			
	4000						1		
All the state of t	1								
C.Selve-									
	(A-								
/II. LEARNING AND DEVELOPMENT (L&D)	INTERVENTIONS/TRAINING F		TENDED						
Scart from the most recent L&D/training program and inclu	ide only the relevant L&D training taken fo	r the last five (5) year		hief Executive Mana	gerial positions) Type of LD				
30. TITLE OF LEARNING AND DEVELOPMENT INT (Write in ful		ATTENI (mm/do	DANCE	NUMBER OF HOURS	(Managerial/ Supervisory/		CONDUCTED/ SPONSORED BY (Write in full)		
The second control of		From N/A	To N/A	N/A	Technical/etc) N/A		N/A		
100	16 2 27	IN/A	N/A	N/A	NIA		NA		
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	(Co	ntinue on separate s	heet if necessar	v)					
VIII. OTHER INFORMATION	NO.	N ACADEMIC DISTI	NCTIONS / PECC	OCNITION .		MEM	BERSHIP IN ASSOCIATION/ORGANIZATION		
31. SPECIAL SKILLS and HOBBIES	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)					33.	(Write in full)		
Driving Motorize Vehicle	N/A						VSU Faculty Association		
Animal Husbandry Crop Protection and Management							Administrative Personnel Position KABALIKAT		
		7,47							
			CENTY				A .		
- 3436.21.74.		The state of the s	CIUS	JUL 0 8	-				
		*	Aug 1 v	2 10					
		733.33.		d.					
SIGNATURE	(Co	ntinue on separate :	DATE		7/23/2019	List Company	CS FORM 212 (Revised 2017), Page 3 of		
A COUNTY ON L	1 (X)		DATE				10 . O 2 /2 (Novised 20 //), Faye 5 0/		

U

34.	Are you related by consanguinity or affinity to the pointing							
	chief of bureau or office or to the person who has immediate							
	Bureau or Department where you will be apppointed,		_					
e de segue	a. within the third degree?	YES V						
	b. within the fourth degree (for Local Government Unit - Care	YES VI	NO					
			If YES, give details:					
35	a. Have you ever been found guilty of any administrative offer	ense?	☐ YES ☑	NO				
30.	a. Have you ever been round gains of any darmined any em		If YES, give details:	NO				
			ii 120, give detaile.					
				NO				
	b. Have you been criminally charged before any court?		☐ YES ☑ If YES, give details:	NO				
				Date Filed:				
				of Case/s:				
36.	Have you ever been convicted of any crime or violation of a	YES NO						
	any court or tribunal?	If YES, give details:						
37.	Have you ever been separated from the service in any of th		✓ YES [] NO				
	retirement, dropped from the rolls, dismissal, termination, er (abolition) in the public or private sector?	lf YES, give details: End of Contract						
20	a. Have you ever been a candidate in a national or local ele	ction held within the last year (except						
30.	Barangay election)?	☐ YES ☑ NO If YES, give details:						
	b. Have you resigned from the government service during the	ne three (3)-month period before the last	☐ YES ☑ NO					
	election to promote/actively campaign for a national or local	If YES, give details:						
39.	Have you acquired the status of an immigrant or permanent	resident of another country?	☐ YES ☑ NO If YES, give details (country):					
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972)							
a.	Are you a member of any indigenous group?	, please ariswer the following items.						
ŭ.	Are you a member or any indigenous group:		If YES, please specify:	✓ NO				
b.	Are you a person with disability?	☐ YES ☑ NO						
			If YES, please specify	ID No:				
C.	Are you a solo parent?		☐ YES ☑ NO If YES, please specify ID No:					
44	DEFENDING STATE OF ST	· · · · · · · · · · · · · · · · · · ·	in 120, piedee opecity					
41.	REFERENCES (Person not related by consanguinity or affinity to applicant	T						
	NAME	ADDRESS	TEL. NO. (+63) 910 515-					
	Dr. Berta C. Ratilla	VSU, ViSCA, Baybay City, Leyte	1603					
	Ed Allan L. Alcober	VSU, ViSCA, Baybay City, Leyte	(+63) 948 369- 6506					
	Dr. Henry Y. Goltiano	VSU, ViSCA, Baybay City, Leyte	(+63) 908 686- 6102					
42.	I declare under oath that I have personally accomplished the	I nis Personal Data Sheet which is a true. co		Cheering				
	statement pursuant to the provisions of pertinent laws,	[18] 18 [18]						
	authorize the agency head / authorized representative to			V. S. J. J.				
	misrepresentation made in this document and its attachr	nents shall cause the filing of administra	itive/criminal case/s	XNDRED SYLLOCINO				
-00	against me.							
	Sovernment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)							
F	PLEASE INDICATE ID Number and Date of Issuance							
	Sovernment Issued ID: V00827							
	O/License/Passport No.: H12-08-000605	ox)						
	late/Place of Issuance: Baybay City, Leyte		Right Thumbmark					
-		0010						
	SUBSCRIBED AND SWORN to before me this 3 0	JUL 2019 , affiant exhibitir	ng his/her validly issued go	vernment ID as indicated above.				
		111.						
		ATTY. RYSAL C. GUINOCOR						
-		VSULEGAL OFFICER						
		Person Administering Oat	h-					