CS Form No. 212 evised 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

READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM 1. CS ID No (Do not fill up. For CSC use only) Print legibly. Tick appropriate boxes (and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. 2 SURNAME **POSAS** IAME EXTENSION (JR., SR) FIRST NAME MARICAR MIDDLE NAME **BAGARINAO** 3. DATE OF BIRTH **NOVEMBER 07,1977** 16. CITIZENSHIP ✓ Filipino ☐ Dual Citizenship (mm/dd/yyyy) by birth by naturalization 4. PLACE OF BIRTH BAYBAY, LEYTE Pls. indicate country: If holder of dual citizenship please indicate the details. 5. SEX ☐ Male **▼** Female **ILANG ILANG** ✓ Single ☐ Married 17. RESIDENTIAL ADDRESS 792 6 CIVIL STATUS House/Block/Lot No ■ Widowed Separated MARCOS Other/s: Subdivision/Village Baranga 6521 BAYBAY LEYTE 7. HEIGHT (m) 1.5 City/Municipalit 79 6521 8. WEIGHT (kg) ZIP CODE 792 **ILANG ILANG** 18. PERMANENT ADDRESS "0" 9. BLOOD TYPE House/Block/Lot No MARCOS N/A 10. GSIS ID NO. Barangay Subdivision/Village 6521 BAYBAY LEYTE 11. PAG-IBIG ID NO. 121045720662 City/Municipality 12. PHILHEALTH NO. 030500706763 ZIP CODE 6521 13. SSS NO. 33-6943383-6 19. TELEPHONE NO. NONE 14. TIN NO. 920851455000 09155992609 20. MOBILE NO. 15. AGENCY EMPLOYEE NO. V01255 21. E-MAIL ADDRESS (if any) posasricafire@yahoo.com/maricar.posas@vsu.edu.ph N/A 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) 22. SPOUSE'S SURNAME NAME EXTENSION (JR., SR) FIRHEY P. CAYUNDA N/A 6/19/2007 FIRST NAME N/A MIDDLE NAME N/A OCCUPATION N/A EMPLOYER/BUSINESS NAME N/A BUSINESS ADDRESS N/A TELEPHONE NO POSAS 24 FATHER'S SURNAME NAME EXTENSION (JR., SR) OSCAR FIRST NAME BAGARINAO MIDDLE NAME MARTINA GODINES BAGARINAO MOTHER'S MAIDEN NAME BAGARINAO SURNAME MARTINA FIRST NAME GODINEZ (Continue on separate sheet if necessary) MIDDLE NAME SCHOLARSHIP/ ACADEMIC HIGHEST LEVEL/ PERIOD OF ATTENDANCE NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE LEVEL UNITS EARNED (Write in full) (Write in full) GRADUATED HONORS (if not graduated) RECEIVED From To VISCA FOUNDATION **ELEMENTARY EDUCATION** ELEMENTARY 6/1/1984 3/1/1990 GRADUATED 1990 N/A **ELEMENTARY SCHOOL EXPERIMENTAL RURAL HIGH** SECONDARY EDUCATION GRADUATED 1994 N/A SECONDARY 6/1/1990 3/1/1994 SCHOOL VOCATIONAL / N/A N/A N/A N/A N/A N/A N/A TRADE COURSE **BACHELOR OF ANIMAL** VISAYAS STATE COLLEGE OF SCIENCE MAJOR IN ANIMAL GRADUATED 6/1/1994 10/1/1998 1998 N/A COLLEGE AGRICULTURE HEALTH N/A N/A GRADUATE STUDIES N/A N/A N/A N/A N/A DATE SIGNATURE May 27, 2022 CS FORM 212 (Revised 2017), Page 1 of 4

		ARD/BAR) UNDER SPECIAL	RATING	DATE OF		1		LICENSE (if ap	oplicable)
LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE			(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMI	NATION / CONFERM	ENT	NUMBER	Date of Validity
DRIVERS LICENSE			N/A	NOV.7,1998	ORMOC	OC CITY, LEYTE		N0398029834	11/7/2023
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			(Co	ntinue on separate shee	t if necessary)				227
	PERIENCE e employment. St	tart from your recent wor	k) Description o	f duties should be in	ndicated in the attached V	Vork Experience	sheet.		4 4
28. INCLUSIVE	DATES (mm/dd/yyyy)	POSITION TIT			ENCY/OFFICE/COMPANY	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP	STATUS OF	GOV'T SERVICE
From To		(Write in full/Do not abbreviate)		(Write in full/Do not abbreviate)			(Format "00-0") INCREMENT	APPOINTMENT	(Y/N)
1-1-2022	6-30-22	ASSISTA	EDUCATION RESEARCH ASSISTANT		Graduate School	20401.92		CASUAL	YES
5/3/2021	12/31/2021	EDUCATION RESEARCH ASSISTANT		Office of the	Graduate School	18, 784.04	1	CASUAL	YES
3/1/2021	4/30/2021	EDUCATION RE ASSISTA	NT	Office of the	Graduate School	12,174.80		JOB ORDER	YES
1/1/2021	2/28/2021	EDUCATION RESEARCH ASSISTANT		Office of the	Graduate School	18, 784.04	37770000	CASUAL	YES
10/1/2020	12/31/2020	EDUCATION RESEARCH ASSISTANT		Office of the	Graduate School	18, 784.04	V	CASUAL	YES
1/1/2020	09/31/20	CLERK		Office of the	Graduate School	9960.00	1	JOB ORDER	NO
1/1/2019	12/31/2019	Data Encoder		Office of the	Graduate School	9600.00		JOB ORDER	NO
1/1/2018	12/31/2018	Data Encoder		Office of the	Graduate School	5200.00		JOB ORDER	NO
1/1/2017	12/31/2017	Data Encoder		Office of the	Graduate School	5200.00		JOB ORDER	NO
10/1/2016	12/31/2016	Data Encoder		Office of the	Graduate School	5200.00		JOB ORDER	NO
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VI. VOLUNTARY WORK OR INVOLVEMENT IN			VE DATES	GANIZATIONS			
29. NAME & ADDRESS OF ORC (Write in full)	ANIIZATION (CAST A CAST	(mm/dd/yyyy) From To		NUMBER OF HOURS	POSITION / NATURE OF WORK		
N/A OV [5]	eav []	N/A	N/A	N/A	N/A	h water the fourth degree (for Local	
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VII. LEARNING AND DEVELOPMENT (L&D) IN		THE RESERVE OF THE PERSON NAMED IN	Name and Address of the Owner, where the Owner, which is)			
Start from the most recent L&D/training program and include	only the relevant L&D/training taken for			hief/Executive/Man	agerial positions)		
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)			E DATES OF NDANCE dd/yyyy)	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
RE-ORIENTATION OF EMPLOYEE'S DUTIES AND	RESPONSBILITIES AND GOOD	9/23/2021	9/23/2021	8HRS	TECHNICAL	NOT DOUBLE OF VSU	
CUSTOMER SERVICE ISO 9001:2015 Awareness/Re-awarenss Webinar	moved to the book	6/13/2021	6/13/2021	8HRS	TECHNICAL	to all a serior or all a control of the control of	
Basic Occupational Safety and Health Trainin	or for the Public Sector	6/7/2021	6/11/2021	40HRS	TECHNICAL	VSU	
CORONAVIRUS VACCINE:ARE YOU WILLING TO		1687 (861.6)	neig within	Actions ison	io isnoden a r	sample vov ever a canonate se canonate se sanonate se seconate se canonate se	
Adelito D. Posas	23Y L L Jankeni s	2/23/2021	2/23/2021	4hrs	TECHNICAL	VSU	
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VIII. OTHER INFORMATION	aio.	N-ACADEMIC DIST	INCTIONS / PECO	OGNITION	61/16/1921	MEMBERSHIP IN ASSOCIATION/ORGANIZATIO	
31. SPECIAL SKILLS and HOBBIES	32. (Write in full)					33. (Write in full)	
LAWN TENNIS	2022 BEST EDUCATION RESEARCH ASSISTANT					DRIVENS AN DRIVERS LI	
DRIVING	Described and BAVSAY O TV 1 CVTS May 27, 2022						
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SIGNATURE	magas	-		L.	DATE	May 27, 2022	

34.	Are you related by consanguinity or affinity to the appointir	ng or recommending authority, or to the					
	chief of bureau or office or to the person who has immedia						
	Bureau or Department where you will be apppointed,	mass experiments.					
	a. within the third degree?	☐ YES	✓ NO				
	b. within the fourth degree (for Local Government Unit - Ca	☐ YES	☑ NO				
		If YES, give details	3:				
35.	a. Have you ever been found guilty of any administrative o	ffense?	YES	✓ NO			
			If YES, give details	3:			
	b. Have you been criminally charged before any court?		YES	☑ NO			
			If YES, give details	s:			
tal o succión			Date Filed:				
			Status of Case/s:				
36.	Have you ever been convicted of any crime or violation of	any law, decree, ordinance or regulation by	YES	☑ NO			
	any court or tribunal?	PORTING WHILESO	If YES, give details:				
		Property Comments of the Comme					
37.	Have you ever been separated from the service in any of t	he following modes: resignation.	Dyre	Filmo			
	retirement, dropped from the rolls, dismissal, termination, e		☐ YES ☑ NO If YES, give details:				
	(abolition) in the public or private sector?	o marketo restreso	198	dniff sancreine ethassnessya anarra o 141.			
20	a. Have you ever been a candidate in a national or local el	action held within the last year (except					
36.	Barangay election)?	ection field within the last year (except	YES give date	✓ NO			
	200	h perkentan	If YES, give deta				
	 Have you resigned from the government service during election to promote/actively campaign for a national or local 						
	election to promote/actively campaign for a national of loca	al Carluidate :	If YES, give deta	IIS.			
39.	Have you acquired the status of an immigrant or permaner	nt resident of another country?	☐ YES ☑ NO				
			If YES, give details				
			-				
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma						
	7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972	2), please answer the following items:					
a.	Are you a member of any indigenous group?		YES If YES, please specifi	☑ NO			
b.	Are you a person with disability?		YES	√. NO			
	Are you a person with disability:	If YES, please specify ID No:					
C.	Are you a solo parent?	YES NO					
			If YES, please specifi				
41.	REFERENCES (Person not related by consanguinity or affinity to applican	nt /appointee)					
	NAME	ADDRESS	TEL. NO.				
DR	. ANABELLA B. TULIN	VSU, BAYBAY CITY, LEYTE	9150727521				
DR	. JOSE L. BACUSMO	VSU, BAYBAY CITY, LEYTE	9173108076	- Selfan			
DR	. EDITHA G. CAGASAN	VSU, BAYBAY CITY, LEYTE	9155913358				
42.	I declare under oath that I have personally accomplished	ed this Personal Data Sheet which is a tr	rue, correct and				
	complete statement pursuant to the provisions of pert						
	Philippines. I authorize the agency head/authorized repres			A Section of the Control of the Cont			
	agree that any misrepresentation made in this doc administrative/criminal case/s against me.	cument and its attachments shall cause	e the filing of	РНОТО			
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DEG	overnment Issued ID: DRIVERS LICENSE						
	/License/Passport No.: N03-98-029834	SA CIGRA POR 32					
 		Signature (Sign inside the bi May 27, 2022	DX)	SM(MSC)			
Da	ate/Place of Issuance: BAYBAY CITY, LEYTE	Date Accomplished		Right Thumbmark			
	0	4 AUG 2022					
PROPERTY.	SUBSCRIBED AND SWORN to before me this	affiant exhibiting	ng his/her validly issued	government ID as indicated above.			
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Language Company	DATE No. 27, 2022		Scalings				
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-		Person Administering Oat		CS FORM 212 (Revised 2017) Page 4 of			
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