CS Form No. 212 Revised 2017 **PERSONAL DATA SHOET** 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 READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM (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 I. PERSONAL INFORMATION abalhero 2. SURNAME NAME EXTENSION (JR , SR) Jaime FIRST NAME ABanaG MIDDLE NAME 3. DATE OF BIRTH 16. CITIZENSHIP Filipino Dual Citizenship 12/04/1969 by birth by naturalization Hinabangan westear Pls. indicate country If holder of dual citizenship, 4. PLÂCE OF BIRTH please indicate the details Female ∠ Male 5. SEX 17 RESIDENTIAL ADDRESS ✓ Married Single 6 CIVIL STATUS House/Block/Lot No Pangasugan Widowed Other/s: Separated Baybay CITY 515 7 HEIGHT (tn) ZIP CODE 6521 87-6 8 WEIGHT (kg) 18. PERMANENT ADDRESS 1 A / BLOOD TYPE Pangasugan D GSIS ID NO. 3878147 Baybay City 1700-0024-3987 1 PAG-18IG ID NO 13000015075-5 6521 ZIP CODE 19 TELEPHONE NO NIA 09365459284 116-623-513 20 MOBILE NO 14 TIN NO 100579 1 F-MAIL ADDRESS (if any 15. AGENCY EMPLOYEE NO IL FAMILY BACKGROUND Caballero 22. SPQUSE'S GURNAME 10/08/1980 NAME EXTENSION (JR. SR) Jobert CaBallero VILLA FIRST NAME marie Cris CaBallero 03/20/199 LaPara Art Jay CaBallero11/23/1995 Maribel CaBallero11/23/1999 MIDDLE NAME HOUSEWIFE EMPLOYER/BUSINESS NAME N/A NIA TELEPHONE NO M/A EaBallero 4 FATHER'S SURNAME Artemio (Deceased NAME EXTENSION (UR. SE EIRST NAME Ovio MIDDLE NAME 5 MOTHER'S MAIDEN NAME Albanag Rosalinda (Deceasgel) FIRST NAME MIDDLE NAME

III. EDUCATIONAL BACK 26 LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE		HIGHEST LEVEL/ UNITS EARNED	YEAR GRADUATED	SCHOLARSHI ACADEMIC HONORS
	Anderson)	(Wite Wilding	From	То	(if not graduated)	1	RECEIVED
. ELEMENTARY	Pangasugan, Elementary school	Primary	1917	1982		1982	N/A
SECONDARY	Baybay Centralci	Alternative (Als)	2014	2015		2015	N/A
VOCATIONAL! TRADE COURSE	1///	Lack Ming System					
COLLEGE		MA		N/A			
GRADUATE STUDIES	11/11	1/1			8+	-	

SIGNATURE

04-24-2017

CS FORM 212 (Revised 2017), Page 1 of 4

27. CAREER SERVICE/ RA	1080 (POAPD) PAP) LIND	DATE OF				LICENSE (if ap	policable)
SPECIAL LA	REER SERVICE/ RA 1080 (BOARD/ BAR) UND SPECIAL LAWS/ CES/ CSEE ARANGAY ELIGIBILITY / DRIVER'S LICENSE RATING (If Applicable) CONFERMENT  DATE OF EXAMINATION / CONFERMENT			E OF EXAMINATION / CONFERMENT			Date of Validity
No	He		None				
	*						
							*
		(Continue on separate s	sheet if necessary)				
V. WORK EXPERIENCE							
28. INCLUSIVE DATES	ent. Start from your recent work) D			ned Work Ex	SALARY/ JOB/ PAY	el.	GOVT
(mm/dd/yyyy) From To	POSITION TITLE (Write in full/Do not abbreviate)	(Write	/ AGENCY / OFFICE / COMPANY in full/Do not abbreviate)	MONTHLY SALARY	GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	SERVICE (Y/N)
0/01/2017 PRESENT	ADMIHISTRATIVE AIDE	III YISAYA	S STATE UHIVEDSIT	71366490	03	PERMANENT	YES
08/01/2017 12/31/2016	ADMINISTRATIVE AIDE	111 415445	STATE NHIVESITY	39514:00		PERMANENT	YES
01/01/2016/07/31/2016	ADMINISTRATIVE AIDE	1 YISAYAS	STATE UHIVERSITY	43041	3	CASUAL	7ES
0 204 23 2015	ADMINISTRATIVE AID		STATE UHIVERSITY	409.09		CASUAL	TES
ग्रेण २०१३ विभा २०१३	ADMINISTRATIVE AND		STATE NHIVEPSITY	374 108	3	CASUAL	YES
	ADMINISTRATIVE AID		STATENHINEPSIT	,,,,,,		CASUAL	Yts
201 2010 12/1 2010	ADMINISTRATIVE ALL		STATE NHIVERSITY	311.91	3	CASUAL	YES
701 20082 31 2009	ADMINISTRATIVE ALC	VISAYAS	STATE NHIVEPSITY	279.50	3	CASUAL	YES
0701 2007 04 30/2005	ADMINISTRATIVE ALD	EI VISAYAS	STATE UNIVERSITY	254.09		CASUAL	YES
0301 2004 06 30 200	ADMINISTRATIVEAL	DEI LETTE S	STATE UHIVERSITY	28 .00	-3	CASUAL	YES
101/2004/02/29/2004	LABORER 1	LEYTE 6	TATE UNIVERSITY	234.00	3	CASUAL	YES
01/01/2003/12/31/2003	LABORERI	LEYTE S	TATE WHIVEDSITY	24.00	3	CASUAL	YES
2002 12/21 2002	LABORERI	LEYTE S	TATE UNIVERSITY	231.00	3	CASUAL	YES
0701/20012/31/2001	LABORERI	OF	STATE COLLEGE	231.00	3	CASUAL	YES
01/01/2001/06/30/20	LABORERI	OF	STATE COLLEGE AGRICULTURE	. 220,0	3	CASUAL	YES
01/01/200012/31/2000	LABORER!	01	STATE COLLEGE AGHCULTURE	220.00	3	CASUAL	YES
01/01/199912/31/1999	LABO REP. 1	~1.5A7A5 6	tate comege faghchlture	200.00	3	CASUAL	7ES
0101199812/31 1998	LABORERI	VISAYAS	TATE COLLEGE AGRICULTURE	200.00	3	CASUAL	YES
0/01/1997 12/3/1997	LABORER 1	VISAYAC S	STATE COLLEGE AGRICULTURE	200.00	3	CASUAL	竹
0/01/1996/12/31/1996	LABORER	YISAYAS S	STATE COLLEGE GRICHLTURE	200.00	3	CASUAL	YES
गी । विकार अ विकार	LABORTR )	YISAYAS S	DATE COLLEGE SPICKETURE	172.73	3	CASUAL	YES
01/01/1994/2/3/1994	LABORER 1	VISAYAS S	TATE COLLEGE SPICULTURE	127.24	3	CASUAL	YES
0101 19992 31 1993	LABORERI	VISAYAS S	STATE COLLEGE	90.90	3	CASUAL	YES
1/01/1992 12/3/1992	LABOREF1	YISAYAS I	STATE COLLEGE AGRICULTURE	90.90	3	CASUAL	YES
0/0/1991/2/3/1991	LABORERI	VISAYAS S	AGRICULTURE	90.90	3	CASUAL	YES
07/01/1989/2/3/1990			STATE COLLEGE AGRICULTURE	90,90	3	CASUAL	YES
2/14/1987 0/20/198		VISAYAS S	TATE COLLEGE AGRICULTURE	32.85	3	CASUAL	YES
07/01/198/12/13/1987	LABOPERI	VIGAYAS S	TATE COLLEGE AGRICULTURE	19.90	3	CASUAL	YES
3/01/198/06/30/1980		VISAYAS &	TATE COLLEGE AGRICULTURE	18.10	3	CASUAL	TES
SIGNATURE		(Continue on separate s	DATE		0	1-13	
CONTONE	8		DATE	04		-2017 FORM 212 (Revised 20	17). Page 2 of

IV. CIVIL SERVICE ELIGIBILIT

**DURATION:** 

MARCH 1, 2004 - PRESENT

POSITION:

ADMINISTRATIVE AIDE III

NAME OF OFFICE/UNIT:

HEAVY EQUIPMENT & LIGHT VEHICLE MAINTENANCE UNIT

IMMEDIATE SUPERVISOR:

REMEGIO M. SANICO

NAME OF AGENCY/ORGANIZATION AND LOCATION:

VISAYAS STATE UNIVERSITY

SUMMARY OF ACTUAL DUTIES:

RESPONSIBLE FOR OPERATING/DRIVING ASSIGNED VEHICLE; CHECK-UP/ SERVICING OF VEHICLE; CLEANING GARAGE AND PERFORM OTHER RELATED FUNCTION.

JAIME A. CABALLERO

(SIGNATURE OVER PRINTED NAME OF EMPLOYEE/APPLICANT)

I. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT	/ PEOPLE / VOLUNTARY	ORGANIZATION/S	Control of the Contro	
29. NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy) From To	NUMBER OF HOURS	POSITION / NATURE OF WORK	
			142	
none			None	
*	ļ, i			
LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PR		n Chief/Executive/Managerial positio	ns)	
TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)	Type of LC ( Manager Supervisor Technical/e	ial/ CONDUCTED/ SPONSORED BY (Write in full)	
AFNR Training on Farm Machineries operation	5/11/2010	24	land Transportal Regulation office	
machineries operation			Regulation office	
FNR Training Drixer on	9/17/200	24	APNR ODREX	
FAR Training Drixer on Farm Machineries operation	n		VISAYAS STATE	
			UNIVERSITY	
intimal continuate (No)	12/12/2010		technical Education And	
in Driving	10/19/200		Skills Development Authority	
	-			
OTHER INFORMATION	inue on separae sinée 1 - 55e			
· · · · · · · · · · · · · · · · · · ·	ACADEMIC DISTINCTIONS / RECO	OGNITION	33 MEMBERSHIP IN ASSOCIATION/ORGANIZATION	
*	(Write in full)		(Write in full)	
ractor Operator Jump. Truck Driver ux. Driver	NONE		NONE	
ux. Driver	None		NONE	
Welder	None		None	
	None		None	
deavy Equipment operator	NONE		Nove	
Contr	Mus de percentate de la la 1856.			
SIGNATURE	DATE	04-24	26/7 CS FORM 212 (Revised 2017), Page 3 of 4	
THE RESERVE OF THE PROPERTY OF			4	

.

34. Are you related by consanguinity or affinity e appoint chief of bureau or office or to the person who has immedi		
Bureau or Department where you will be apppointed,		
a, within the third degree?	YES NO	
b. within the fourth degree (for Local Government Unit - C	YES NO	
	,	If YES, give details:
35. a. Have you ever been found guilty of any administrative of	offense?	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:
36. Have you ever been convicted of any crime or violation of by any court or tribunal?	YES NO	
		If YES, give details:
37. Have you ever been separated from the service in any of	the following modes: resignation.	
retirement, dropped from the rolls, dismissal, termination,		YES NO NO If YES, give details:
out (abolition) in the public or private sector?		
38. a. Have you ever been a candidate in a national or local e Barangay election)?	lection held within the last year (except	☐ YES NO
		If YES, give details:
<ul> <li>b. Have you resigned from the government service during last election to promote/actively campaign for a national or</li> </ul>		☐ YES ☑ NO If YES, give details:
39. Have you acquired the status of an immigrant or permanel		
	,	YES NO If YES, give details (country):
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) M.		
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?		If YES, please specify: NO
b. Are you a person with disability?		
		If YES, please specify ID No:
Are you a solo parent?		If YES, please specify ID No:
41. REFERENCES Passon not related by consangumey or attenty to applicant	Canulistice	The test product specify in two.
NAME	ADDRESS	TEL. NO.
DO OTHER B. CAPIALIA		
Dr. OTHELLO B. CAPUHO	VISAYAS STATE WHIMPSIT	
MAPIOE, BALIAD	BRIGHT. MARCOSBABAY CITY	
REMIGIO M. SAHICO	VISAYAS STATE MHIVIPSITY	
42. I declare under oath that I have personally accomplishe	d this Personal Data Sheet which is a	true, correct and
complete statement pursuant to the provisions of pertir Philippines. I authorize the agency head / authorized rep	nent laws, rules and regulations of the	Republic of the
agree that any misrepresentation made in this doct	ument and its attachments shall cau	s stated herein. I JAIME A. CARALLERO
administrative/criminal case/s against me.		and the same of
Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)		
PLEASE INDICATE ID Number and Date of Issuance		
Government Issued ID: DRIVERS LICENCE	8	
ID/License/Passport No.:H0399032329	Signature (Sign inside the box)	
Date/Place of Issuance: DECEMBER 3,2014 OPPICCOLY	84/25/2017	
	Date Accomplished	Right Thumbmark
SUBSCRIBED AND SWORN to before me this	R Z 6 2017 , affiant exhibiting	his/her validly issued government ID as indicated above.
	M	Approximate the second
	// lan-	
	ATTY. RYSAN C. GUINOC	np
	NO Poredo A dedicionadina Cath	OUT.
	DTR 0.9	Account of the Control of the Contro
	IBP +030+24 - TACT CRAN DITY -	CS FORM 212 (Revised 2017), Page 4 of 4

ROLL OF ATTORNEYS NO. 57467