

PERSONAL DATA SHEET

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.

READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM.

Print legibly. Tick appropriate boxes (☐) and use separate sheet if necessary. Indicate N/A if not applicable. **DO NOT ABBREVIATE.**

(Do not fill up. For CSC use only)

I. PERSONAL INFORMATION

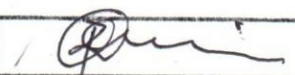
2. SURNAME	ORACION		
FIRST NAME	ROBERTO	NAME EXTENSION (JR., SR) N/A	
MIDDLE NAME	IBANEZ		
3. DATE OF BIRTH (mm/dd/yyyy)	09-22, 1965	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship
4. PLACE OF BIRTH	DAYDAY CITY LEYTE	<input type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:	
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	If holder of dual citizenship, please indicate the details	
6. CIVIL STATUS	<input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated	17. RESIDENTIAL ADDRESS	House/Block/Lot No. Street Subdivision/Village Barangay DAYDAY LEYTE City/Municipality Province
7. HEIGHT (m)	5'4	ZIP CODE	6521
8. WEIGHT (kg)	130 lbs	18. PERMANENT ADDRESS	House/Block/Lot No. Street N/A CAG Subdivision/Village Barangay DAYDAY LEYTE City/Municipality Province
9. BLOOD TYPE	O	ZIP CODE	6521
10. GSIS ID NO.	LP-65092202652	19. TELEPHONE NO.	N/A
11. PAG-IBIG ID NO.	1700-0030-4892	20. MOBILE NO.	09102315694
12. PHILHEALTH NO.	13-200389797-8	21. E-MAIL ADDRESS (if any)	roberto-oracion65@yahoo.com
13. SSS NO.	06-1214856-7		
14. TIN NO.	936-227-413		
15. AGENCY EMPLOYEE NO.	V00639		

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	DURANO		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	ROSA GEMMA	NAME EXTENSION (JR., SR)	ROSEM ANTHONY D. ORACION	07-07-89
MIDDLE NAME	PLANDO		AIRA MAY D. ORACION	05-22-92
OCCUPATION	HOUSEKEEPER			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	ORACION			
FIRST NAME	WILFREDO (Declaran)			
MIDDLE NAME	DESTO			
25. MOTHER'S MAIDEN NAME				
SURNAME	IBANEZ			
FIRST NAME	MA DONATA			
MIDDLE NAME	NAYRE			

III. EDUCATIONAL BACKGROUND

26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE		HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	GAAE ELEM. SCHOOL		1972	1978		1978	NONE
SECONDARY	MARINHAS NATL. HIGH SCH.		1978	1982	4th Year	1982	NONE
VOCATIONAL / TRADE COURSE	NONE						
COLLEGE	NONE						
GRADUATE STUDIES	NONE						

SIGNATURE		DATE	04-24-2017	CS FORM 212 (Revised 2017), Page 1 of 4
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27.	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
					NUMBER	Date of Validity
	ELECTRICAL INSTALLATION			CALUBIAN NATIONAL	NONE	
	& MAINTENANCE NC II	1-12-2011	1-13-2011	VOCATIONAL SCHOOL		
	AUTOMOTIVE SERVICING			CALUBIAN NATIONAL	NONE	
	NC II	06-22-2015	06-22-2015	VOCATIONAL SCHOOL		

(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.

Include private employment. Start from your recent work. Description of duties should be indicated in the attached Work Experience Sheet.								
28.	INCLUSIVE DATES (mm/dd/yyyy)		POSITION TITLE (Write in full/Do not abbreviate)	DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)	MONTHLY SALARY	SALARY/JOB/PAY GRADE (# applicable) & STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOVT SERVICE (Y/N)
	From	To						
	01-01-17	PRESNT	ADMINISTRATIVE AIDE VI	VISAYAS STATE UNIVERSITY	\$13,973	G	PERMANENT	YES
	03-01-16	12-31-16	ADMINISTRATIVE AIDE VI	VISAYAS STATE UNIVERSITY	\$13,504	G	PERMANENT	YES
	03-01-		ADMINISTRATIVE AIDE V	VISAVAS STATE UNIVERSITY	\$13,504	G	PERMANENT	YES
	01-01-16	02-29-16	ADMINISTRATIVE AIDE VI	VISAYAS STATE UNIVERSITY	\$13,378	G	TEMPORARY	YES
	03-01-15	12-31-15	ADMINISTRATIVE AIDE VI	VISAYAS STATE UNIVERSITY	\$12,921	G	TEMPORARY	YES
	01-01-2011	02-28-13	ADMINISTRATIVE AIDE MI	VISAYAS STATE UNIVERSITY	\$402.45/D	G	CASUAL	YES
	01-01-2010	12-31-2010	ADMINISTRATIVE AIDE II	VISAYAS STATE UNIVERSITY	\$367.27/D	G	CASUAL	YES
	07-01-2008	12-31-2009	ADMINISTRATIVE AIDE III	VISAYAS STATE UNIVERSITY	\$332.14/D	G	CASUAL	YES
	07-01-2007	06-30-2008	ADMINISTRATIVE AIDE III	VISAYAS STATE UNIVERSITY	\$301.95/D	G	CASUAL	YES
	02-01-2007	06-30-2007	ADMINISTRATIVE AIDE IV	LEYTE STATE UNIVERSITY	\$274.00/D	G	CASUAL	YES
	1998	2002	ELECTRICIAN	VEGETABLE OIL	\$4.14/H.W	NONE	NONE	NO
	1996	1998	ELECTRICIAN	APC	\$7.14/H.W	NONE	NONE	NO
	1989	1995	ELECTRICIAN	GOTONG SHIPPING	\$6.14/H.W	NONE	NONE	NO

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04-24-2017

DURATION: FEBRUARY 1, 2007 - PRESENT

POSITION: ADMINISTRATIVE AIDE VI

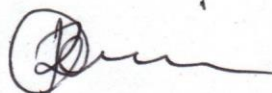
NAME OF OFFICE/UNIT: HEAVY EQUIPMENT & LIGHT VEHICLE MAINTENANCE UNIT

IMMEDIATE SUPERVISOR: REMEGIO M. SANICO

NAME OF AGENCY/ORGANIZATION AND LOCATION: VISAYAS STATE UNIVERSITY

SUMMARY OF ACTUAL DUTIES:

RESPONSIBLE FOR ELECTRICAL REPAIR/RE-WIRING OF VEHICLES, HEAVY EQUIPMENT, LABORATORY AND OFFICE EQUIPMENT; REWINDING OF VEHICLES ALTERNATOR, STARTERS AND ELECTRIC MOTORS; SERVICING/ OVERHAULING OF MOTORCYCLE, GRASS CUTTER AND ONE CYLINDER ENGINE; AND DOING OTHER RELATED FUNCTION.



ROBERTO I. ORACION

(SIGNATURE OVER PRINTED NAME OF
EMPLOYEE/APPLICANT)

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

[illegible]

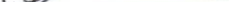
VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

(Start from the most recent L&D/training program and include only the relevant L&D/training taken for the last five (5) years for Division Chief/Executive/Managerial positions.)

[illegible]

VIII. OTHER INFORMATION

[illegible]

SIGNATURE		DATE		CS FORM 212 (Revised 2017), Page 3 of 4
		04-24-2017		

34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to the chief of bureau or office or to the person who has immediate supervision over you in the Office, Bureau or Department where you will be appointed,

a. within the third degree?

b. within the fourth degree (for Local Government Unit - Career Employees)?

☐ YES ☒ NO
☐ YES ☐ NO

If YES, give details:

35. a. Have you ever been found guilty of any administrative 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 any law, decree, ordinance or regulation 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, end of term, finished contract or phased out (abolition) in the public or private sector?

☐ YES ☒ NO

If YES, give details:

38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?

☐ YES ☒ NO

If YES, give details:

b. Have you resigned from the government service during the three (3)-month period before the last election to promote/actively campaign for a national or local candidate?

☐ YES ☒ NO

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) Magna Carta for Disabled Persons (RA 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), please answer the following items:

a. Are you a member of any indigenous group?

☐ YES ☒ NO
If YES, please specify: _____

b. Are you a person with disability?

☐ YES ☒ NO
If YES, please specify ID No: _____

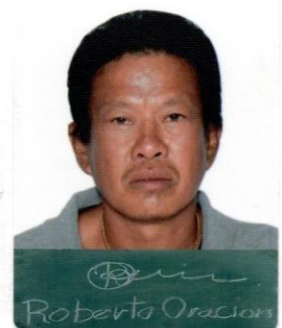
c. Are you a solo parent?

☐ YES ☒ NO
If YES, please specify ID No: _____

41. REFERENCES (Person not related by consanguinity or affinity to applicant/appointee):

NAME	ADDRESS	TEL. NO.
ENGINEER CELSO GUMAOP	BRGY. SABANG DAYBAY	
ENGR. NESTOR ISRAEL	BRGY. HIBUNAWAN "city"	

42. I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, 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 representative to verify/validate the contents stated herein. I agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me.



PHOTO

Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)
PLEASE INDICATE ID Number and Date of Issuance
Government Issued ID: **UNIFIED MULTIPURPOSE ID**
ID/License/Passport No.: **CRM - 006010221969**
Date/Place of Issuance: **TACLOBAN CITY**

Signature (Sign inside the box)
04/25/17
Date Accomplished



SUBSCRIBED AND SWORN to before me this **APR 26 2017**, affiant exhibiting his/her validly issued government ID as indicated above.

ATTY. RVSAM C GUINOCOR
NOTARY PUBLIC
Person Administering Oath

NOTARY PUBLIC
UNIFIED MULTIPURPOSE ID
2TH BAY, BRGY. DAYBAY, LETTE-4/12/17
IBP 1030824- TACLOBAN CITY - 12/19/16
MCLE COMPL. NO. V-000723-07/20/15
ROLL OF ATTORNEYS NO. 57467