CS Form No. 212 Revised 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 concerned.

	LLING OUT THE PERSONAL DATA SHEET (PDS) BE			ATE	1 CC ID No		/Do not fill up. E	or CCC use only	
Print legibly. Tick appropriate boxes I. PERSONAL INFORMATION		ate N/A ii not applicable. DO	NOI ABBREVIA	AIE.	1. CS ID No.		(Do not till up. F	or CSC use only	
2. SURNAME	Caorte								
FIRST NAME	Enrique		NAME EXTENSION (JR., SR) Jr.						
MIDDLE NAME	Estremos								
3. DATE OF BIRTH		16. CITIZENSHIP							
(mm/dd/yyyy)	08/02/1968	IO. CITIZENSHIP		▼ Filipino					
4. PLACE OF BIRTH	Albuera Leyte	If holder of dual citize	Pls. indicate count						
5. SEX	✓ Male Female	please indicate the d	Philippines						
6. CIVIL STATUS	Single Married	7. RESIDENTIAL ADDRESS					SU ANSCI AREA		
0. CIVIL STATUS	Widowed Separated	THE NEODEN WE ABOVE SO			use/Block/Lot No.			Street	
	Other/s:		Sut	bdivision/Village			Pangasungan Barangay		
7. HEIGHT (m)	1.63			BAYBAY		LEYTE			
8. WEIGHT (kg)	72.80	ZIP CODE	OI OI	ty/Municipality 6521			Province		
9. BLOOD TYPE	0	18. PERMANENT ADDRESS						PUROK OKRA	
10. GSIS ID NO.	000610654215		Hou	se/Block/Lot N	lo		Street Liloan		
		1		bdivision/Village DRMOC CITY			Barangay LEYTE		
11. PAG-IBIG ID NO.	121052603037			ity/Municipality			Province		
12. PHILHEALTH NO.	130500246481	ZIP CODE		6541					
13. SSS NO.	0610684215 19. TELEPHONE NO.			N/A					
14. TIN NO.	165945346	936-322-1094							
15. AGENCY EMPLOYEE NO.	V01112	21. E-MAIL ADDRESS (if any)			enrique.ca	orte@vsu.edu.p	h		
II. FAMILY BACKGROUND									
22. SPOUSE\'S SURNAME	Caorte	NAME EXTENSION / ID. CD)	23. NAME of CH	i. NAME of CHILDREN (Write full name and list all)			DATE OF BIRTH (mm/dd/yyyy)		
FIRST NAME	Perla NAME EXTENSION (JR., SR)			Jude Nino Pepito Caorte			01/30/2003		
MIDDLE NAME	Pepito	Pepito							
OCCUPATION	Housekeeper	per							
EMPLOYER/BUSINESS NAME	none								
BUSINESS ADDRESS	none	none							
TELEPHONE NO.	09363221094	09363221094							
24. FATHER\'S SURNAME	Caorte	NAME EXTENSION (ID. OD)							
FIRST NAME	Enrique	NAME EXTENSION (JR., SR) Sr.							
MIDDLE NAME	Calabia	Calabia							
25. MOTHER\'S MAIDEN NAME	Visitacion Estrimos								
SURNAME	Caorte								
FIRST NAME	Visitacion								
MIDDLE NAME	Estremos			(Continue on separate sheet if necessary)					
III. EDUCATIONAL BACKG			_			HIGHEST		SCHOLARSHIP/	
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)		From	To	LEVEL/UNITS EARNED (if not graduated)	YEAR GRADUATED	ACADEMIC HONORS RECEIVED	
ELEMENTARY	Albuera Central School	Elementary		1976	1981	GRADUATED	1981	N/A	
SECONDARY	Albuera Private High School	High School		1981	1985	GRADUATED	1985	N/A	
VOCATIONAL/ TRADE COURSE	N/A								
COLLEGE	N/A								
GRADUATE STUDIES	N/A								
) [(L Continue on separate sheet if nece	essary)		ı		ı	l .	
SIGNATURE				DA	\TE		03/30/2023		

IV. CIVIL SERVICE ELIGIBILITY									
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER RATING			RATING	DATE OF				LICENSE (if applicable)	
ВА		AWS/ CES/ CSEE ILITY / DRIVER'S LICENSE	(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT		NUMBER	Date of Validity	
	N	//A	N/A	N/A	N/A		N/A	N/A	
				(Continue on separate she	eet if necessary)				
	EXPERIE		t work) Doogrinti	on of dution abouted b	as indicated in the attache	d Mork Evner	ionos chost		
28. INCLU	ISIVE DATES m/dd/yyyy)	POSITION TITIL (Write in full/Do not ab	.E	DEPARTMENT / AG	of duties should be indicated in the attached DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)		SALARY/ JOB/ PAY GRADE (if applicable)& STEP	STATUS OF APPOINTMENT	GOV'T SERVICE
From	То	(write in full/Do not ab	breviate)	(vviite iii iui	I/DO NOT appreviate)	SALARY	(Format"00-0")/ INCREMENT	APPOINTIVIENT	(Y/ N)
01/01/2023	PRESENT	Security Guar	d I	Visayas	State University	14,678.00	3-1	Permanent	Y
03/21/2022		Security Guar	d I	Visayas	State University	14,125.00	3-1	Permanent	Y
03/21/2022		Security Guar	d I	Visayas	State University	14,125.00	3-1	Permanent	Y
01/01/2022	06/30/2022	Security Guar		Visayas State University		13,572.00	3-1	Casual	Y
07/01/2021	12/31/2021	Security Guar			State University	13,572.00	3-1	Casual	Y
01/01/2021		Security Guar	d I	Visayas State University		13,572.00	3-1	Casual	Y
01/01/2021	06/30/2021	Security Guar		Visayas State University		13,019.00	3-1	Casual	Y
01/01/2020	06/30/2020	Security Guar		Visayas State University		13,019.00	3-1	Casual	Y
07/01/2019	12/31/2019	Security Guar		Visayas State University		566.64	-	Casual	Y
01/01/2019	06/30/2019	Security Guar		Visayas State University		566.64	-	Casual	Y
07/02/2018	12/31/2018	Security Guar			Visayas State University 541.54 -		-	Casual	Y
02/09/2008	07/01/2018	Security Gual			itute of Technology	7,200.00	-	Job Order	N
05/25/2007	02/08/2008	Security Gual			Security Agency	7,000.00	-	Permanent	N
03/01/2003	05/25/2007	Security Agen			socially regimes		-	Permanent	N
09/01/1997	03/01/2003	Security Gual			ecurity Agency	6,000.00 5,400.00	-	Permanent	N
04/30/1997	09/30/1997	Security Guar			ceptre Security Agency Alert Security Agency		-	Permanent	N
10/15/1992	09/30/1997	Security Guar	ra	Alert S	Alert Security Agency		-	Permanent	N
				(Continue on separate she	eet if necessary)				
SIGNA	ATURE				DATE		03/30/2	2023 FORM 212 (Revised 20	0471.0

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S							
29. NAME & ADDRESS OF ORGANIZATION (Write in full)		INCLUSIVE DATES (mm/dd/yyyy) From To		NUMBER OF HOURS	POSITION / NATURE OF WORK		
N/A			N/A	N/A		N/A	
	(Continue on separate sheet if necessary) 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)						
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)		INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy) From To		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
ISO 9001:2015 Awareness/ Re-aware	ness Webinar	11/27/2020	11/27/2020	4	Technical	Quality Assurance Center, Visayas State University	
Basic Life Support Providers Course Hea	lth Care Provider	09/05/2019	09/06/2019	16	Technical	(DOH) Department of Health	
Security Re-Training/Refresher Co	urse (RTC)	12/06/2018	12/11/2018	48	Technical	JVO Dynamic Security Training Academy Inc.	
VSU Free Brigade		11/05/2018	11/09/2018	40	Technical	Bureau of Fire Protection Region 8	
Fire Prevention Seminar and Training on Mass Ca	asualty Incident Responce	03/27/2018	03/27/2018	8	Technical	BFP/SSO/ODAH	
Emergency Responce Skills Ti	raining	03/14/2018	03/18/2018	40	Technical	BFP/SSO/ODAH	
Fire Consciousness /Preparer	dness	02/27/2018	02/27/2018	8	Technical	"Visayas State University (VSU), Visca, Baybay City, Leyte "	
Re-Orientation Seminar For Security	Harassment	09/04/2014	09/04/2014	8	Technical	QAC,ODAH,SSO	
Padpao Re-Training Cour	se	09/19/2012	09/30/2012	90	Technical	Padpao Re-Training Private Security Academy	
Gender Sensivity Training of Sexual Harassment Orientat	ion for Frontline Service Providers	09/17/2012	09/17/2012	8	Technical	SSO/ODAH	
Seminar on Fire Prevention	on	01/21/2012	01/21/2012	8	Technical	Visayas State University/Security Services Office	
	(Continue on separat	e sheet if necessary))			
VIII. OTHER INFORMATION	VIII. OTHER INFORMATION						
31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)				33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)		
Driving	N/A				KABALIKAT CIVICOM		
						GUARDIAN Visca Chapter	
						Phi Beta Kappa Fraternity Sorority	
(Continue on separate sheet if necessary)							
SIGNATURE				DA	NTE	03/30/2023 CS FORM 212 (Revised 2017), Page 3 of 4	

the chief of bureau or office or to the person who has Office, Bureau or Department where you will be appp a. within the third degree? b. within the fourth degree (for Local Government Unit]no]no	
35. a. Have you ever been found guilty of any administra	☐YES ✓ If YES, give details:]NO	
b. Have you been criminally charged before any cour	☐YES ✓ If YES, give details: Date Filed: Status of Case/s:]NO	
36. Have you ever been convicted of any crime or violation regulation by any court or tribunal?	☐YES ✓ If YES, give details:]NO	
37. Have you ever been separated from the service in an retirement, dropped from the rolls, dismissal, terminar phased out (abolition) in the public or private sector?	☐YES ✓ If YES, give details:	NO	
38. a. Have you ever been a candidate in a national or lo (except Barangay election)?			
b. Have you resigned from the government service du last election to promote/actively campaign for a nation	☐YES ✓ If YES, give details:	NO	
39. Have you acquired the status of an immigrant or pern	☐YES ✓ If YES, give details (coun] NO htry):	
 40. Pursuant to: (a) Indigenous People\'s Act (RA 8371); 7277); and (c) Solo Parents Welfare Act of 2000 (RA a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? 	☐YES ✓ If YES, please specify: ☐YES ✓ If YES, please specify ID		
41. REFERENCES (Person not related by consanguinity or affinity to a	applicant /appointee)	,	
NAME	ADDRESS	TEL. NO.	ID picture taken within
CHERYL BATUCAN	BRGY.LILOAN ORMOC CITY		the last 6 months 3.5 cm x 4.5 cm (passport size)
ROMEO CALABA	BRGY.LAWIS ALBUERA LEYTE		With full and handwritten
SALDY PITOGO	BRGY. LILOAN ORMOC CITY LEYTE		name tag and signature over printed name
42. I declare under oath that I have personally accomplic complete statement pursuant to the provisions of purphilippines. I authorize the agency head/authorized ragree that any misrepresentation made in this dadministrative/criminal case/s against me.	Republic of the stated herein. I	Computer generated or photocopied picture is not acceptable	
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: DL ID/License/Passport No.: H0307001934 Date/Place of Issuance: 08/02/2021 / BAYBAY CITY LEYTE	Signature (Sign inside the 03/30/2023 Date Accomplished	box)	Right Thumbmark
OUDOODICED AND OWESTIVE A COMMISSION OF THE COMM	1930 12 / 00 2		
SUBSCRIBED AND SWORN to before me this	Person Administering O		government ID as indicated above.