CS FORM 212 (Revised 2005)								
Co FORM 212 (Revised 2000)								
		PERSO	NAI DA	TA S	SHEET			
		I LK30	NAL DA	\ I A \	JIILLI			
Deathacht. Mail accession h		and use separate sheet if necessary.			1. CS ID No.		No. b.	- file days by OCCI
I. PERSONAL INFORM.		nd use separate sheet it necessary.			1. CS ID NO.		[10 De	e filled up by CSC)
The second second			n sis a	10 W W	2 0 12 0 1	20 G 500 V 5	. 5 0	
2 SURNAME								
FIRST NAME			1 1 1 1 1	1 1 1	I I I 3 NAME E	XTENSION (e.g. Jr., Sr.)		
MIDDLE NAME	1 1 1	1 1 1 1 1 1	16. RESIDENTIAL A	DDRESS	1 1 13. TANKE E	ATENSION (e.g. ar., or.)		
4. DATE OF BIRTH (mm/dd/yy	yyı	1 1						
PLACE OF BIRTH SEX	☐ Male	☐ Female	-					
7. CIVIL STATUS		□Widowed		ZIP CODE				
110-20-11-	☐ Single ☐ Married	☐ Separated	17. TELEPHONE N					
	Annulled	Others, specify	18. PERMANENT A					
8. CITIZENSHIP								
9. HEIGHT (m)			-					
10. WEIGHT (kg)			-	ZIP CODE				
11. BLOOD TYPE			19. TELEPHONE N					
12. GSIS ID NO			20. E-MAIL ADDRE	SS (if any)				
13. PAG-IBIG ID NO.			21 CELLPHONE N					
14. PHILHEALTH NO.			22. AGENCY EMPL	OYEE NO.				
15. SSS NO.			23. TIN					
II. FAMILY BACKGRO	UND					920		
24. SPOUSE'S SURNAME				25. NAME OF (CHILD (Write full name an	nd list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME							1	1
MIDDLE NAME							1	1
OCCUPATION							1	1
EMPLOYER/BUS. NAME	j						Í	1
BUSINESS ADDRESS				5)			1	Ĭ.
TELEPHONE NO.							- 1	1
	(Continue on se	eparate sheet if necessary)		-			1	1
26. FATHER'S SURNAME							1	1
FIRST NAME								1
MIDDLE NAME			-				1	1
27. MOTHER'S MAIDEN NAME							7	1
SURNAME	-		-				1	
FIRST NAME	3		10				72 - 100	1
MIDDLE NAME III. EDUCATIONAL BA	CKCBOLIND				(Continue	on separate sheet if ned	essary)	
fee:	LKGROOND			YEAR	HIGHEST GRADE/	INCLUSIVE DATE	S OF	101400101
28. LEVEL	1	NAME OF SCHOOL (Write in full)	DEGREE COURSE (Write in full)	GRADUATED		ATTENDANCE	ACAD	HOLARSHIP/ EMIC HONORS
		(*************************************	(1 miles miles)	(if graduated)	(if not graduated)	From	To F	RECEIVED
ELEMENTARY								
SECONDARY								
VOCATIONAL / TRADE COURSE							_	
COLLEGE								
GRADUATE STUDIES							_	
	-		1					
	L			- M				
		(C	ontinue on separate she	et it necessary)	į.			Page 1 of 4

	ERVICE ELIG	BILITY							
29. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE RATING			DATE OF EXAMINATION /	PLACE OF EXAMINAT	PLACE OF EXAMINATION / CONFERMENT			applicable) DATE OF	
	UNDER SPECIAL LAWYOF CEST CODE		CONFERMENT			NUMBER	RELEASE		
							7		
					sheet if necessary)				
	JSIVE DATES	(Include private	employmen	t. Start from y	our current work)		SALARY GRADE		
(m	m/dd/yyyy)	POSITION (Write in		DEPARTMENT / AGENCY / OFFICE / COMPAN (Write in full)		MONTHLY SALARY	& STEP INCREMENT (Format '0000')	STATUS OF APPOINTMENT	GOVT SERVICE (Yes/No)
From / /	To / /						y state sooy		I Comment
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1 1	1 1	2		47	-1-48				
			(C	ontinue on separate	sheet if necessary)		CO EODIA	212 (Pavisad 200	E) Dans 2 of

VI. VOLU	NTARY WORK OR INVOLVEMENT I	N CIVIC / NO	N-GOVERNMEN	IT / PEOPLE / \	/OLUNTARY	ORGANIZATION/S	
31. NAME & ADDRESS OF ORGANIZATION (Write in full)			INCLUSI	VE DATES Id/yyyy)	NUMBER OF HOURS	POSITION / NATURE OF WORK	
			From	То	HOUNS		
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VIII TOAI	AUNO PROCEDANO (OL 16		e on separate sheet i	f necessary)			
VII. TRAI	NING PROGRAMS (Start from the n	nost recent tr					
TITLE OF SEMINAR/CONFERENCEWORKSHOP/SHORT COURSES (Write in full)		(mm/c	S OF ATTENDANCE Id/yyyy)	NUMBER OF HOURS	CONDUCTED/ SPONSORED BY (Write in full)		
			From	То			
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		(Continue	e on separate sheet i	f necessary)			
VIII. OTH	ER INFORMATION						
33.	SPECIAL SKILLS / HOBBIES:	34. N	ION-ACADEMIC DIST (Wi	INCTIONS / RECOGN rite in full)	NITION:	MEMBERSHIP IN 35. ASSOCIATION/ORGANIZATION (Write in full)	
		(Continue	e on separate sheet i	f necessary)		CS FORM 212 (Revised 2005), Page 3 of 4	

a. Within the third degree (for National Government Employees): appointing authority, recommending authority, chief of office/bureau/department or phas immediate supervision over you in the Office, Bureau or Department where you appointed?	
b. Within the fourth degree (for Local Government Employees): appointing authority or recommending authority where you will be appointed?	☐YES ☐NO If YES, give details:
a. Have you ever been formally charged?b. Have you ever been guilty of any administrative offense?	☐YES ☐NO If YES, give details: ☐YES ☐NO
38. Have you ever been convicted of any crime or violation of any law, decree, ordinance	If YES, give details:
regulation by any court or tribunal?	If YES, give details:
39. Have you ever been separated from the service in any of the following modes: resig retirement, dropped from the rolls, dismissal, termination, end of term, finished contr phased out, in the public or private sector?	
40. Have you ever been a candidate in a national or local election (except Barangay ele	If YES, give details:
41. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Carta for Disabled P 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), please answer the follo	
a. Are you a member of any indigenous group?	☐YES ☐NO If YES, please specify:
b. Are you differently abled?	☐YES ☐NO If YES, please specify:
c. Are you a solo parent?	☐ YES ☐ NO If YES, please specify:
42. REFERENCES (Person not related by consanguinity or affinity to applicant / appointee)	
NAME ADDRESS	TEL. NO. ID picture taken within the last 6 months 3.5 cm. X 4.5 cm (passport size)
43. I declare under oath that this Personal Data Sheet has been accomplished by me, a complete statement pursuant to the provisions of pertinent laws, rules and regulation Philippines. Lake outhorize the agency head (outhorized representative to verify (velidate the entire).	ns of the Republic of the Computer generated or xerox copy of picture is not acceptable
I also authorize the agency head / authorized representative to verify / validate the central that this information shall remain confidential.	PHOTO
COMMUNITY TAX CERTIFICATE NO.	
ISSUED AT SIGNATURE (S	ign inside the box)
/ / ISSUED ON (mm/dd/yyyy) DATE ACC	COMPLISHED RIGHT THUMBMARK
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