CS Form No. 212 Revised 2017

**SIGNATURE** 

## 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. READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM. Print legibly. Tick appropriate 🗔 kes ( ) and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. 1. CS ID No. (Do not fill up. For CSC use only I. PERSONAL INFORMATION 2. SURNAME NAME EXTENSION (JR., SR) FIRST NAME MIDDLE NAME 3. DATE OF BIRTH 16. CITIZENSHIP Dual Citizenship Filipino (mm/dd/yyyy) by birth by naturalization 4. PLACE OF BIRTH If holder of dual citizenship, Pls. indicate country: please indicate the details. Male Female 5. SEX Single Married 17 RESIDENTIAL ADDRESS 6 CIVIL STATUS House/Block/Lot No. Street Widowed Separated Other/s: Subdivision/Village Barangay 7. HEIGHT (m) City/Municipality Province 8. WEIGHT (kg) **ZIP CODE** 18. PERMANENT ADDRESS 9. BLOOD TYPE House/Block/Lot No. Street 10. GSIS ID NO. Subdivision/Village Barangay 11. PAG-IBIG ID NO. City/Municipality Province 12. PHILHEALTH NO. ZIP CODE 13. SSS NO. 19. TELEPHONE NO. 14 TIN NO 20. MOBILE NO. 15. AGENCY EMPLOYEE NO. 21. E-MAIL ADDRESS (if any) **FAMILY BACKGROUND** DATE OF BIRTH (mm/dd/yyyy) 22 SPOUSE'S SURNAME 23. NAME of CHILDREN (Write full name and list all) NAME EXTENSION (JR., SR) FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NA **BUSINESS ADDRESS** TELEPHONE NO. 24. FATHER'S SURNAME NAME EXTENSION (JR., SR) FIRST NAME MIDDLE NAME 25. MOTHER'S MAIDEN NAME SURNAME FIRST NAME (Continue on separate sheet if necessary) MIDDLE NAME **EDUCATIONAL BACKGROUND** LEVEL/ SCHOLARSHIP/ YEAR 26. PERIOD OF ATTENDANCE NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE LEVEL GRADUA1 ACADEMIC (Write in full) (Write in full) UNITS HONORS RECEIVED From То ELEMENTARY SECONDARY COLLEGE **GRADUATE STUDIES** 

DATE

IV. CIVIL SERVICE ELIGIBILITY									
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL RATING				DATE OF				LICENSE (if applicable)	
LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE			(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT			NUMBER	Date of Validity
V. WORK		\	(Continue	on separate sheet if	necessary)				
V. WORK EXPERIENCE (Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.									
28. INCLU	28. INCLUSIVE DATES POSITION TITLE			DEPARTMENT / AGENCY / OFFICE / COMPANY MONTHLY GRADE (if				SERVICE	
From	(mm/dd/yyyy)		e in full/Do not	(Write in full/Do not abbreviate)		SALARY	applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	
SIGNA	ATURE		(Continue	on separate sheet if	necessary)  DATE				
5,5,1,	=	ĺ			DAIL				

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT /				/ PEOPLE / VOLUNTARY ORGANIZATION/S			
29. NAME & ADDRESS OF ORGANIZATION		INCLUSIVE DATES		NUMBER OF HOURS	POSITION / NATURE OF WORK		
(Write in full)		From	То				
VIII. LEADANNO AND DEVEL ORMENT // 9 D.	WITED		on separate she		TTENDED		
VII. LEARNING AND DEVELOPMENT (L&D) (Start from the most recent L&D/training program and include						cutive/Managerial positions)	
30 TITLE OF LEARNING AND DEVELOPMENT	ATTENDANCE	DATES OF	0 1401 1110 (0) 3 041	Type of LD	CONDUCTED/ SPONSORED BY		
INTERVENTIONS/TRAINING PROGRAMS (Write in full)		From	То	NUMBER OF HOURS	( Managerial/ Supervisory/ Technical/etc)	(Write in full)	
			-				
		(Continuo	on separate she	not if nocossary)			
VIII. OTHER INFORMATION		(Continue	on separate sne	et ii necessary)			
	NON-ACA	DEMIC DISTINCT	TIONS / RECOGN	NITION		ASSOCIATION/ORGANIZATION	
31. SPECIAL SKILLS and HOBBIES	1101171071	BEIMO BIOTINO	11011071120001		(Write in full)	33. (Write	
(Continue on separate sheet if necessary)							
SIGNATURE					DATE		

34.	chief of bureau or office or to the person w Bureau or Department where you will be a a. within the third degree?		YES [	□ NO	
	b. within the fourth degree (for Local Gove		YES [ If YES, give details:	NO NO	
35.	a. Have you ever been found guilty of any	administrative offense?	YES [ If YES, give details:	□ NO	
	b. Have you been criminally charged before	e any court?	YES If YES, give details: Date Filed: Status of Case/s:	□ NO	
36.	by any court or tribunal?	e or violation of any law, decree, ordinance or regulation	YES If YES, give details:	□ NO	
	retirement, dropped from the rolls, dismissiout (abolition) in the public or private sector		YES If YES, give details:	□ NO	
38.	Barangay election)?	tional or local election held within the last year (except	YES If YES, give details:	□ NO	
	b. Have you resigned from the government last election to promote/actively campaign	t service during the three (3)-month period before the for a national or local candidate?	☐ YES ☐ NO  If YES, give details:		
39.	Have you acquired the status of an immigr	ant or permanent resident of another country?	YES If YES, give details (o	NO country):	
	7277); and (c) Solo Parents Welfare Act of	RA 8371); (b) Magna Carta for Disabled Persons (RA 2000 (RA 8972), please answer the following items:			
a. b.	Are you a member of any indigenous group  Are you a person with disability?	D?	If YES, please specify:	□ NO □	
C.	Are you a solo parent?		If YES, please specify ID YES If YES, please specify ID	□ NO	
41.	REFERENCES (Person not related by consanguinity	or affinity to applicant /appointee)	= 0, р. сазо оросы, 1		
	NAME	ADDRESS	TEL. NO.	ID picture taken within	
				the last 6 months 3.5 cm. X 4.5 cm	
				(passport size)  With full and handwritten	
				name tag and signature over printed name	
42.	I declare under oath that I have person complete statement pursuant to the prophilippines. I authorize the agency head/a agree that any misrepresentation madadministrative/criminal case/s against me.	Computer generated or photocopied picture is not acceptable  PHOTO			
PI P	RC, Driver's License, etc.)  I FASE INDICATE ID Number and Date of overnment Issued ID:				
	0/License/Passport No.:	Signature (Sign inside the box)			
D	ate/Place of Issuance:	Date Accomplished		Right Thumbmark	
SUB	SCRIBED AND SWORN to before me this	, affiant exhibiting his/her validly issue	d government ID as indicated	l above.	
		Person Administering Oath			