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.

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 ne	cessary. Indicate	N/A if not app	licable. DO NO	Γ ABBREVIATE	i.	1. CS ID No.	(Do n	ot fill up. For	CSC use only)
I. PERSONAL INFORM	ATION									
2. SURNAME										
FIRST NAME								NAME EXTENSION	I (JR., SR)	
MIDDLE NAME										
3. DATE OF BIRTH (mm/dd/yyyy)			16. CITIZENSI	HIP		Filipi	no	Dual Citizenship	by naturali	zation
4. PLACE OF BIRTH			If hold	er of dual citize	enship,			Pls. indicate	e country:	
5. SEX	Male	Female	pleas	e indicate the o	letails.					
6 CIVIL STATUS	Single	Married	17. RESIDENT	TIAL ADDRESS						
	Widowed Other/s:	Separated			House	e/Block/Lot	No.		Street	
7. HEIGHT (m)	oulei/s.				Subc	livision/Villa	ge		Barangay	
			71P. (CODE	City	//Municipalit	ty		Province	
8. WEIGHT (kg)				NT ADDRESS						
9. BLOOD TYPE			TO. T ETAMPARE	IVI ABBILLOO	House	e/Block/Lot	No.		Street	
10. GSIS ID NO.					Subc	livision/Villa	ge		Barangay	
11. PAG-IBIG ID NO.					City	//Municipalit	ty		Province	
12. PHILHEALTH NO.			ZIP (CODE	,	,				
13. SSS NO.			19. TELEPHON	NE NO.						
14. TIN NO.			20. MOBILE N	0.						
15. AGENCY EMPLOYEE NO.			21. E-MAIL AD	DDRESS (if any)						
II. FAMILY BACKGRO	UND								5.75	
22. SPOUSE'S SURNAME			I NAME EVTEN	NSION (JR., SR)	23. NAME of 0	CHILDREN	(Write full n	ame and list all)	DATE C (mm/c	F BIRTH ld/yyyy)
FIRST NAME			NAME EXTEN	NSION (JR., SR)						
MIDDLE NAME										
OCCUPATION										
EMPLOYER/BUSINESS NAME										
BUSINESS ADDRESS										
TELEPHONE NO.										
24. FATHER'S SURNAME										
FIRST NAME			NAME EXTEN	ISION (JR., SR)						
MIDDLE NAME										
25. MOTHER'S MAIDEN NAME										
SURNAME										
FIRST NAME										
MIDDLE NAME						(Conti	nue on sep	arate sheet if ned	essary)	
III. EDUCATIONAL BA	CKGROUND									
26. LEVEL	NAME OF SCHOO (Write in full)	OL	BASIC EDU	CATION/DEGR (Write in full)	EE/COURSE		OD OF IDANCE	HIGHEST LEVEL/ UNITS EARNED	YEAR GRADUATED	SCHOLARSHI P/ ACADEMIC HONORS
	(12 2)			(,		From	То	(if not graduated)		RECEIVED
ELEMENTARY										
SECONDARY										
VOCATIONAL / TRADE COURSE										
COLLEGE										
GRADUATE STUDIES										
		(Cont	inue on sepa	rate sheet if ne	ecessary)		1			
SIGNATURE				DATE				CS FORM 212 (Revised 2017). Page 1 of 4

IV.	CIVIL	SERVICE I	ELIGIBILITY							
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR)			RATING	DATE OF			LICENSE (if applicable)			
UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE				(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINA	TION / CONF	ERMENT	NUMBER	Date of Validity
										validity
W	WORK	, EVDEDIE	NOF	(Contin	ue on separate she	et if necessary)				
		EXPERIE	NGE nt. Start from your recent	work) Description	of duties should be	indicated in the attached	Work Experi	ience sheet.		
28.	INCLUS	SIVE DATES	POSITION 1			/ AGENCY / OFFICE /		SALARY/ JOB/ PAY GRADE (if	0747110.05	GOV'T
		n/dd/yyyy) 	(Write in full/Do not		C (Write in ful	OMPANY I/Do not abbreviate)	MONTHLY SALARY	applicable)& STEP (Format "00-0")/	STATUS OF APPOINTMENT	SERVICE (Y/N)
	From	То			,	,		INCREMENT		
				(Contin	ue on separate she	et if necessary)				
	SIGNA	ATURE			DATE			CS FORM 21	2 (Revised 2017),	Page 2 of 4
	00 TO NW 212 (Novided 2011), 1 age 2 014									

VI. V	OLUNTARY WORK OR INVOLV	EMENT IN CIVIC / NON G	OVERNMEI	NT / PEOPL	LE / VOLU	NTARY OR	GANIZATION/S	
29. NAME & ADDRESS OF C (Write in fu			INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS		POSITION / NATURE OF WORK	
			From	То				
		(Continu	le on separate s	sheet if necess	sary)			
VII.	LEARNING AND DEVELOPMEN	T (L&D) INTERVENTIONS	/TRAINING	PROGRAI	IS ATTEN	IDED		
(Start	from the most recent L&D/training program	and include only the relevant L&D			e (5) years foi	Division Chief/	Executive/Managerial positions)	
30.	TITLE OF LEARNING AND DEVELOPME	NT INTERVENTIONS/TRAINING	INCLUSIVE DATES OF ATTENDANCE		NUMBER OF	Type of LD (Managerial/	CONDUCTED/ SPONSORED BY	
	PROGRAMS (Wri		(mm/d	1	HOURS	Supervisory/ Technical/etc)	(Write in full)	
			From	То				
		(Continu	ie on separate s	sheet if necess	arv)			
V	III. OTHER INFORMATION	Continu	c.r copurate s					
							MEMBERSHIP IN	
31.	SPECIAL SKILLS and HOBBIES	32. NON-ACA	DEMIC DISTINO Write (OGNITION		33. ASSOCIATION/ORGANIZATION (Write in full)	
							(write in ruii)	
	(Continue on separate sheet if necessary)							
	SIGNATURE					DATE		

 Are you related by consanguinity or affinity to the appointi of bureau or office or to the person who has immediate su Department where you will be apppointed, 						
a. within the third degree?		YES	NO			
b. within the fourth degree (for Local Government U	b. within the fourth degree (for Local Government Unit - Career Employees)?					
		If YES, give de	etails:			
35. a. Have you ever been found guilty of any administr	rative offense?	YES	NO			
		If YES, give de	etails:			
b. Have you been criminally charged before any co	urt?	YES	NO			
		If YES, give de	etails:			
			Date Filed:			
		Status	of Case/s:			
36. Have you ever been convicted of any crime or viola regulation by any court or tribunal?	tion of any law, decree, ordinance or	YES	NO			
regulation by any court of tribunal?		If YES, give de	etails:			
37. Have you ever been separated from the service in a		YES	NO			
retirement, dropped from the rolls, dismissal, termin phased out (abolition) in the public or private sector		If YES, give de	etails:			
· · · · · · · · · · · · · · · · · · ·						
38. a. Have you ever been a candidate in a national or (except Barangay election)?	local election held within the last year	YES	NO			
(except barangay election):		If YES, give details	:			
b. Have you resigned from the government service during	• •	YES	NO			
election to promote/actively campaign for a national or loc	al candidate?	If YES, give details	:			
39. Have you acquired the status of an immigrant or pe	rmanent resident of another country?	YES	NO			
		If YES, give details (country):				
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) M and (c) Solo Parents Welfare Act of 2000 (RA 8972), plea						
	se answer the following items.					
a Are you a member of any indigenous group?		YES Places on	NO ocifu			
b Are you a person with disability?		If YES, please spe				
, no year a percent man alcability.		YES If YES, please spe	NO ecify ID No:			
c. Are you a solo parent?		YES	NO			
		If YES, please spe	ecify ID No:			
41. REFERENCES (Person not related by consanguinity or at	ffinity to applicant /appointee)					
NAME	ADDRESS	TEL. NO.				
10.002	ADDICEGO	122.110.	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			
			Computer generated			
 I declare under oath that I have personally accompl and complete statement pursuant to the provisions 			or photocopied picture is not acceptable			
the Philippines. I authorize the agency head / autho	rized representative to verify/validate the	e contents stated				
herein. I agree that any misrepresentation made in of administrative/criminal case/s against me.	this document and its attachments shall	cause the filing	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:						
ID/License/Passport No.:						
	Signature (Sign inside the	box)				
Date/Place of Issuance:	Date Accomplished		Right Thumbmark			
SUBSCRIBED AND SWORN to before me this		affiant exhibiting his/h	er validly issued government ID as			
	indicated above.		. •			
l l	Person Administering O	ath				
			FORM 040 (F. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.			
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