CS FORM 212 (Revised 2005)								
PERSONAL DATA SHEET								
PERSUNAL DATA SHEET								
Print logibly Mark appropriate bo	vos Duith". I and use sons	prate about if pagesagry			1. CS ID No.			(to be filled up by CSC)
Print legibly. Mark appropriate box		arate sneet if necessary.			1. C3 ID NO.			(to be filled up by CSC)
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2. SURNAME		<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>		<u> </u>
FIRST NAME		<u> </u>	<u> </u>	<u> </u>		EXTENSION (e.g. Jr.,	<u> </u>	<u> </u>
MIDDLE NAME	- 1	1 1 1 1	I I I I 16. RESIDENTIAL A	DDRESS	3. NAIVIE E	EXTENSION (e.g. Jr.,	JI.)	
4. DATE OF BIRTH (mm/dd/yyy	y) T	1 1		.5511200				
PLACE OF BIRTH SEX	☐ Male ☐ Fema	alo						
6. SEX 7. CIVIL STATUS				ZIP CODE				
	☐ Single ☐ Wid		47 TELEDIJONE NO					
	☐ Married ☐ Sep☐ Annulled ☐ Oth	parated ners, specify	17. TELEPHONE NO 18. PERMANENT A					
8. CITIZENSHIP	L / / / / / / / / / / / / / / / / / / /		_					
9. HEIGHT (m) 10. WEIGHT (kg)				ZIP CODE				
11. BLOOD TYPE			19. TELEPHONE NO					
12. GSIS ID NO.			20. E-MAIL ADDRES					
12. GSIS ID NO. 13. PAG-IBIG ID NO.			21. CELLPHONE NO					
14. PHILHEALTH NO.								
15. SSS NO.			22. AGENCY EMPLO 23. TIN	OYEE NO.				
II. FAMILY BACKGROU	IND		20. 1114					
24. SPOUSE'S SURNAME				25 NAME OF C	CHILD (Write full name ar	nd list all)	DATE OF	BIRTH (mm/dd/yyyy)
FIRST NAME				20. 14/11/12 01	THE (WHICH IN HAME A	ia not any	BATEO	/ /
MIDDLE NAME								1 1
OCCUPATION								1 1
EMPLOYER/BUS. NAME								1 1
BUSINESS ADDRESS								1 1
TELEPHONE NO.								1 1
	(Continue on separate si	heet if necessary)						1 1
26. FATHER'S SURNAME		**						1 1
FIRST NAME								1 1
MIDDLE NAME								1 1
27. MOTHER'S MAIDEN NAME								1 1
SURNAME								1 1
FIRST NAME								1 1
MIDDLE NAME					(Continue	e on separate sheet i	if necessary)	
III. EDUCATIONAL BA	CKGROUND							
28.	,		DEODEE OOUDOE	YEAR	HIGHEST GRADE/	INCLUSIVE D		SCHOLARSHIP/
LEVEL		SCHOOL in full)	DEGREE COURSE (Write in full)	GRADUATED (if graduated)	LEVEL/ UNITS EARNED	ATTENDA		ACADEMIC HONORS RECEIVED
				(ii gradaatod)	(if not graduated)	From	То	
ELEMENTARY								
SECONDARY								
VOCATIONAL / TRADE COURSE								
COLLEGE								
GRADUATE STUDIES				 				
		(C	ontinue on separate she	et if necessary)				
			•	.,				Page 1 of 4

LINDER SPECIAL LAWS/CES/CSEE RATING EXAMINATION / PLACE OF EXAMINATION / CONFERMENT DATE OF		IVIL S	ERVICE ELIG	BILITY							
Confine to a sparks that if mocessary	29. CAREER SERVICE/ RA 1080 (BOARD/ BAR)			RATING	EXAMINATION /	PLACE OF EXAMINAT	ION / CONFERMENT		LICENSE (if applicable) DATE OF		
No.		UN	DER SPECIAL LA	WS/ CES/ CSEE		CONFERMENT				NUMBER	RELEASE
No.											
No.											
No.											
No.											
No.											
No.											
DEPARTMENT AGENCY OFFICE COMPANY MODIFIED SHAPPY MODIFIED MODIFI											
POSITION TITLE				(Include private	employment	t. Start from y	our current work)				
		(m	m/dd/yyyy)					MONTHLY	& STEP INCREMENT	STATUS OF APPOINTMENT	SERVICE
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					(C)	onunue on separate	oneet ii iletessary)		CS FORM	212 (Revised 200	5), Page 2 of 4

VI. VOLUNTARY WORK OR INVOLVEWENT I	N CIVIC / NOI	N-GUVERNIVIEN	II / PEUPLE / \	OLUNIAR	ORGANIZATION/S
31. NAME & ADDRESS OF ORGANIZATION (Write in full)	N	INCLUSIVE DATES (mm/dd/yyyy) From To		NUMBER OF HOURS	POSITION / NATURE OF WORK
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		on separate sheet if	necessary)		
VII. TRAINING PROGRAMS (Start from the n	ost recent tr			ī	
32. TITLE OF SEMINAR/CONFERENCE/WORKSHOP/SHO	ORT COURSES	INCLUSIVE DATES (mm/d		NUMBER OF HOURS	CONDUCTED/ SPONSORED BY (Write in full)
(Write in full)	From	То	HOURS	(vviite iri iuii)	
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	(Continue	e on separate sheet if	necessary)		
VIII. OTHER INFORMATION					MEMBERSHIP IN
33. SPECIAL SKILLS / HOBBIES:	34. N	ON-ACADEMIC DISTI (Wr	NCTIONS / RECOGNite in full)	NITION:	35. ASSOCIATION/ORGANIZATION (Write in full)
	(Continue	on separate sheet if	necessary)		00 5000 000 000 000 0000
					CS FORM 212 (Revised 2005), Page 3 of 4

^{36.} Are you related by consanguinity or affinity to any of t	he following:				
a. Within the third degree (for National Government Empappointing authority, recommending authority, chief or has immediate supervision over you in the Office, Bur appointed?	☐YES ☐ NO If YES, give details:				
b. Within the fourth degree (for Local Government Emplo appointing authority or recommending authority where	☐YES ☐ NO If YES, give details:				
37 a. Have you ever been formally charged?		□YES □NO			
b. Have you ever been guilty of any administrative off	If YES, give details: ☐ YES ☐ NO If YES, give details:				
38. Have you ever been convicted of any crime or violatic regulation by any court or tribunal?	on of any law, decree, ordinance or	☐ YES ☐ NO If YES, give details:			
39. Have you ever been separated from the service in an retirement, dropped from the rolls, dismissal, terminat phased out, in the public or private sector?	☐YES ☐NO If YES, give details:				
40. Have you ever been a candidate in a national or local	☐ YES ☐ NO If YES, give details:				
41. 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?		□YES □NO			
^{b.} Are you differently abled?		If YES, please specify: ☐ 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 a	applicant / appointee)				
NAME	ADDRESS	TEL. NO.			
			ID picture taken within the last 6 months 3.5 cm. X 4.5 cm		
 43. I declare under oath that this Personal Data Sheet ha complete statement pursuant to the provisions of pert Philippines. I also authorize the agency head / authorized represe that this information shall remain confidential. 	olic of the	(passport size) Computer generated or xerox copy of picture is not acceptable PHOTO			
COMMUNITY TAX CERTIFICATE NO.					
ISSUED AT	()				
ICCLIED ON (mm/dd/sass)					
ISSUED ON (mm/dd/yyyy)	DATE ACCOMPLISHED		RIGHT THUMBMARK		
		CS I	FORM 212 (Revised 2005), Page 4 of		