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

READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM 1. CS ID No. (Do not fill up. For CSC use only) Print legibly. Tick appropriate boxes 🔲) and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. PERSONAL INFORMATIOI ROXAS 2. SURNAME AME EXTENSION (JR., SR) PATRICK JOSE FIRST NAME MIDDLE NAME 3. DATE OF BIRTH 11/19/1996 16. CITIZENSHIP Dual Citizenship (mm/dd/yyyy) √ Filipino ☐ by birth ☐ by naturalization STA.CRUZ, MANILA 4. PLACE OF BIRTH If holder of dual citizenship. Pls. indicate country: please indicate the details. Female 5. SEX ✓ Male **Philippines** BLK 20 LOT 63 PH 2AREA 4 DALAGANG BUKID ✓ Single 17 RESIDENTIAL ADDRESS Married 6 CIVIL STATUS House/Block/Lot No. Street Widowed Separated LONGOS Other/s: Subdivision/Village Barangay METRO MANILA MALABON 7. HEIGHT (m) 1.64 City/Municipalit Province 8. WEIGHT (kg) N/A ZIP CODE 18. PERMANENT ADDRESS BLK 20 LOT 63 PH 2AREA 4 DAI AGANG BUKID 9. BLOOD TYPE N/A MALABON METRO MANILA 10. GSIS ID NO. 2005729209 Subdivision/Villag **MALABON METRO MANILA** 11. PAG-IBIG ID NO. 121240844479 City/Municipality 032522751110 ZIP CODE 12. PHILHEALTH NO. 1472 13. SSS NO. 19. TELEPHONE NO. N/A 14. TIN NO. 356-517-914-000 09563060261 20. MOBILE NO. patrick.roxas@dotr.gov.ph 15. AGENCY EMPLOYEE NO. 3499 21. E-MAIL ADDRESS (if anv) II. FAMILY BACKGROUND 22. SPOUSE'S SURNAME N/A 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) N/A N/A FIRST NAME N/A MIDDLE NAME N/A N/A N/A OCCUPATION N/A N/A EMPLOYER/BUSINESS NAME N/A N/Δ BUSINESS ADDRESS N/A TELEPHONE NO. N/A N/A 24. FATHER'S SURNAME N/A IAME EXTENSION (JR., SR) N/A N/A FIRST NAME N/A N/A MIDDLE NAME N/A 25. MOTHER'S MAIDEN NAME N/A SURNAME **ROXAS** N/A FIRST NAME SHIRLEY CABADING MIDDLE NAME (Continue on separate sheet if necessary) EDUCATIONAL BACKGROUND SCHOLARSHIP HIGHEST LEVEL PERIOD OF ATTENDANCE YEAR GRADUATED ACADEMIC HONORS 26 NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE UNITS EARNED LEVEL (Write in full) (Write in full) (if not graduated) RECEIVED From То FI FMFNTARY DAGAT-DAGATAN ELEMENTARY SCHOOL GRADE SCHOOL 7/6/2004 03/27/2009 N/A 2009 N/A **NEW ERA HIGH SCHOOL** HIGH SCHOOL SECONDARY 8/6/2009 03/29/2013 N/A 2013 N/A VOCATIONAL / N/A N/A N/A N/A N/A N/A N/A TRADE COURSE **NEW ERA UNIVERSITY BS ELECTRONICS ENGINEERING** COLLEGE 10/6/2013 04/24/2018 N/A 2018 N/A N/A GRADUATE STUDIES N/A N/A N/A N/A N/A N/A **SIGNATURE** DATE DECEMBER 10, 2020

IV. CIVIL S	ERVICE ELIG	BILITY							
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER			RATING	DATE OF EXAMINATION /				LICENSE (if a	
SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE			(If Applicable)	CONFERMENT				NUMBER	Date of Validity
RA 1080			N/A	OCT 20-21	Philippine Internation	Philippine International Convention Cente			11/19/2021
			(Con	tinue on separate shee	t if necessary)				
	EXPERIENCE vate employme	nt. Start from your recen	t work) Description	n of duties should	be indicated in the attach	ned Work Ex	perience shee	et	
28. INCLU	USIVE DATES	POSITION TI					SALARY/ JOB/ PAY GRADE (if		GOV'T
From	nm/dd/yyyy) To	(Write in full/Do not		DEPARTMENT / AGENCY / OFFICE / COMPA (Write in full/Do not abbreviate)		MONTHLY SALARY	applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	SERVICE (Y/ N)
12/12/2019	11/24/2020	COMPUTER PROC	GRAMMER I	DEPARTMENT	OF TRANSPORTATION	22316.00	SG-11	Permanent	Υ
3/6/2019	12/12/2019	COMPUTER PROC			OF TRANSPORTATION	19860.00	SG-11	JOB ORDER	N N
3/0/2019	12/12/2019	COMPUTER PROC	JRAIVIIVIER I	DEPARTMENT	JF TRANSPORTATION	19860.00	30-11	JOB ORDER	N
			(Con	tinue on separate shee	t if necessary)]			
SIGNA	ATURE	7			DATE		DECEMB	ER 10, 2020	
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VI. VOLUNTARY WORK OR INVOLVEMENT	LUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY			ORGANIZATION/S				
29. NAME & ADDRESS OF ORGANIZATION			INCLUSIVE DATES (mm/dd/yyyy)		POSITION / NATURE OF WORK			
(Write in full)			То	NUMBER OF HOURS				
N/A			N/A	N/A		N/A		
N/A			N/A	N/A		N/A		
N/A			N/A	N/A		N/A		
N/A		N/A	N/A	N/A		N/A		
N/A		N/A	N/A	N/A	N/A			
N/A		N/A	N/A	N/A	N/A			
N/A			N/A	N/A	N/A			
VII. LEARNING AND DEVELOPMENT (L&D)		tinue on separate PROGRAMS A						
(Start from the most recent L&D/training program and include		the last five (5) ye	ars for Division Cl	nief/Executive/Mana	agerial positions)			
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)			DATES OF IDANCE d/yyyy)	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)		
STATISTICS 101		From 12/12/2019	12/13/2019	16	N/A	DEPARTMENT OF TRANSPORTATION		
VIII. OTHER INFORMATION	(Con	tinue on separate	sheet if necessary)				
31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)					33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)		
N/A	N/A					N/A		
N/A	N/A					N/A		
N/A	N/A				N/A			
N/A	N/A				N/A			
N/A			1		N/A			
N/A			N/A			N/A		
N/A (Cont			N/A inue on separate sheet if necessary)			N/A		
SIGNATURE			y		ATE	DECEMBER 10, 2020 CS FORM 212 (Revised 2017), Page 3 of 4		

34.	Are you related by consanguinity or affinity to the appoint chief of bureau or office or to the person who has immedia Bureau or Department where you will be approinted, a. within the third degree?	☐ YES ☑	_		
	b. within the fourth degree (for Local Government Unit - C	, , ,	☐ YES ☑ If YES, give details:	NO	
35.	a. Have you ever been found guilty of any administrative of	☐ YES ☑ If YES, give details:	NO		
	b. Have you been criminally charged before any court?	YES If YES, give details: Date Filed: Status of Case/s:	NO NO		
36.	Have you ever been convicted of any crime or violation of by any court or tribunal?	YES If YES, give details:	✓ NO		
	Have you ever been separated from the service in any of retirement, dropped from the rolls, dismissal, termination, 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 local e Barangay election)?	YES If YES, give details:	☑ NO		
	b. Have you resigned from the government service during election to promote/actively campaign for a national or loc	☐ YES ☑ NO If YES, give details:			
39.	Have you acquired the status of an immigrant or permane	YES If YES, give details (NO country):		
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) M 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972)				
a.	Are you a member of any indigenous group?	YES	✓ NO		
b.	Are you a person with disability?	If YES, please specify: YES If YES, please specify II	✓ NO D No:		
C.	Are you a solo parent?	YES If YES, please specify II	NO D No:		
41.	REFERENCES (Person not related by consanguinity or affinity to applied				
	NAME	ADDRESS	TEL. NO.		
	ENGR. Mark Angelo Martinez	Quezon City, Philippines	9958118687	66	
42.	I declare under oath that I have personally accomplish complete statement pursuant to the provisions of pert Philippines. I authorize the agency head/authorized rel I agree that any misrepresentation made in this dradministrative/criminal case/s against me.	inent laws, rules and regulations of the presentative to verify/validate the contents	Republic of the stated herein.	ROXAS, PATRICK JOSE C.	
P	covernment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Covernment Issued ID: Professional Regulatory Commission				
Date/Place of Issuance: 11/19/2018 Pasay City Date Place of Issuance: 11/19/2018 Pasay City Date Accomp				Right Thumbmark	
	SUBSCRIBED AND SWORN to before me this	affiant evhihi	ting his/her validly issued a	overnment ID as indicated above.	
		, amant exhibit	g mornor validity issued y	S. S. III.O. I. S. do illuloutou above.	
	-	h			
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