CS Form No. 212 Revised 2017	PERSO	NAL DAT	A SH	1EE1	Г	A CONTRACTOR A		
concerned. READ THE ATTACHED GUIDE	tion made in the Personal Date Sheet and TO FILLING OUT THE PERSONAL DATA SI	the Work Experience Sheet s	hall cause the	e filing of ad	lministrativ		(Do not fill up. F	
PERSONAL INFORMATION	The state of the s	o ran il not approcasio. Bo not h	DDITE VIATE.					W 000 day 01
2 SURNAME	BELLO	ar transis i di santa di santa da santa					- 1	
FIRST NAME	BRET JOHNSON					NAME EXTENSION (JE	R, SR)	NA
MIDDLE NAME	GONZALES							
3. DATE OF BIRTH	12/18/1997	16 CITIZENSHIP						
(mm/dd/yyyy) 4. PLACE OF BIRTH						by naturalization		
	SOGOD, SOUTHERN LEYTE	If holder of dual citizen	레이 보고싶	Pls. indicate country:				(a) (a) (b) (b) (a) (b)
5. SEX	☑ Male ☐ Female	70.0 Telephone (1900)		Den er ober				
6 CIVIL STATUS	☑ Single ☐ Married ☐ Separated	17. RESIDENTIAL ADDRESS	17. RESIDENTIAL ADDRESS		PUROK 5 touse/Blockfl.of No. Street			
	□ Other/s:	· · · · · · · · · · · · · · · · · · ·	Su.	bdivision/Village			RIZAL Barangay	
7. HEIGHT (m)	1.54m	I Make and		SOGOD	3,404	sou	THERN LEYT	E
8. WEIGHT (kg)	65kg	ZIP CODE	4-11-11	City/Municipality		6606	Province	
9 BLOOD TYPE	0	18. PERMANENT ADDRESS	1				PUROK 5	
		_	Ho	use/Block/Lot No	0.		Street	
10. GSIS ID NO.	NA		Su	bdivision/Village	,		Barangay	
11. PAG-IBIG ID NO.	121321605682			SOGOD htty/Municipality		so	OTHERN LEY Province	TE
12 PHILHEALTH NO.	13-251742676-1	ZIP CODE		6606	-			
13 SSS NO.	06-4602175-7 19. TELEPHONE NO. NA							
14. TIN NO.	727-296-299 20 MOBILE NO.			09942658966				
		- Carrier and Carrier	-					
15. AGENCY EMPLOYEE NO.	NA NA	21. E-MAIL ADDRESS (if any)		bret	ohnsont	ello21@gmai	il.com	
II. FAMILY BACKGROUND	l NA		23 NAME of CL	JII DDEN (Mete	full name and	(feet off)	DATE OF BIRT	u (mm(ddhana)
22. SPOUSE'S SURNAME	NA NA	NAME EXTENSION (JR., SR)	25. TEAME OF CI	CHILDREN (Write full name and list all) NA			N N	-
FIRST NAME	NA NA		-					_
MIDDLE NAME	NA NA		1					***************************************
OCCUPATION			+	-	-			
EMPLOYER/BUSINESS NAME	NA NA							
BUSINESS ADDRESS	NA		-					
TELEPHONE NO.	NA .		-					
24. FATHER'S SURNAME	BELLO	NAME EXTENSION (JR., SR) NA	Specification of the English Control of State Control of			HARMON NO WAST BURGO IN THE	January 28, 1962	
FIRST NAME	TIRSO	NAME EXTENSION (JR., SN) HA	-		-		-	
MIDDLE NAME	HINAY		1		-			
25. MOTHER'S MAIDEN NAME		transport of the second						
SURNAME	GONZALES		-				Decembe	r 20, 1966
FIRST NAME	BRENDA					L		
MIDDLE NAME	SIEGA		la marin	(Co	ontinu e on se	parate sheet if noces	sary)	
III. EDUCATIONAL BACKG	ROUND		1				1000000	SCHOLARSHIP
26. LEVEL	NAME OF SCHOOL, (Write in full)	BASIC EDUCATION/DEGRE (Write in full)	EE/COURSE	PERIOD OF A	To	UNITS EARNED (If not graduated)	YEAR GRADUATED	ACADEMIC HONORS RECEIVED
ELEMENTARY	SOGOD SPED CENTER	ELEMENTAR	Y	2009	2010	GRADUATED	2010	NA
SECONDARY	VISAYAS STATE UNIVERSITY LABORATORY HIGH SCHOOL	нідн яснос	L	2010	2014	GRADUATED	2014	NA
VOCATIONAL / TRADE COURSE	NA	NA NA	-	NA	NA	NA -	NA	NA
COLLEGE	SOUTHERN LEYTE STATE UNIVERSIT MAIN CAMPUS	Y BACHELOR OF TECHNOL LIVELIHOOD EDUCATION INFORMATION COMMU	MAJOR IN	2018	2022	GRADUATED	2022	NA
GRADUATE STUDIES	NA	NA (Continue on separate sheet if nec	and a	NA	NA	NA	NA	NA
SIGNATURE	I mt	To summer our selventing arrest in not	- Jamy)	DA	TE	AU	GUST 21, 202	3



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SIGNATURE		13/16		DATE	No.	AUGUST 21,	2023	



29 NA	AME & ADDRESS OF (Write in fu		INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOUPS	POSITION/NATURE OF WORK		
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III. OTHER INFORMATION	N	Co	nlinue on seperate	sheet if necessar				
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31. SPECIAL SKILLS an	NO HOBBIES	32		e in fulf)			PHILIPPINE ASSOCIATION FOR TEACHER	
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SIGNATURI	E	Post .	ntinue on separate	Times & necessary	10,500	ATE	AUGUST 24, 2023	
		1 1100					CS FORW 210 (Almost 2017), Page 21	

	Are you related by consanguinity or affinity to the appointing chief of bureau or office or to the person who has immediate Bureau or Department where you will be apppointed,	Jer recommending authority, or to the a supervision over you in the Office,				
	a. within the third degree?	C YES 18 NO				
	b. within the fourth degree (for Local Government Unit - Car	If YES, give details:	но			
15.	a. Have you ever been found guilty of any administrative of	□ YES				
	b. Have you been criminally charged before any court?	CI YES (2) NO If YES, give details: Date Filed: Status of Case/s:				
36.	Have you ever been convicted of any crime or violation of a any court or tribunal?	CI YES M NO If YEB, give details:				
37.	Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, e (abolition) in the public or private sector?		CI YES If YES, give details:			
38.	a. Have you ever been a candidate in a national or local ele Barangay election)?	CI YES If YES, give details	М NO в принципалнительного под принципалнительного п			
	b. Have you resigned from the government service during t election to promote/actively campaign for a national or local	☐ YES ☑ NO If YE8, give details:				
39.	Have you acquired the status of an immigrant or permanen	If YES, give details (country):				
40. a.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972) Are you a member of any Indigenous group? Are you a person with disability? Are you a solo parent?		☐ YES If YE8, please specify: ☐ YES If YE8, please specify i ☐ YES If YE8, please specify i	Ø NO		
41.	REFERENCES (Person not related by consanguinity or affinity to applicant	t /appointee)		Bollocoy de la compressión de la compressión de la consentante		
V.	NAME	ADDRESS	TEL. NO.	ALL THE STATE OF T		
	ENGR. MANOLO B LORETO JR.	VISCA, BAYBAY CITY, LEYTE	9264458186	The same of		
-	JUYY P. OBUS	SAN ROQUE, SOGOD, SOUTHERN LEYTE	9460224508			
42.	I declare under oath that I have personally accomplishe complete statement pursuant to the provisions of pertiphilippines. I authorize the agency head/authorized representation made in this documents agree that any misrepresentation made in this documents against the complete that any misrepresentation made in this documents against the complete that are completely against the complete that are completely accomplished to the provisions of pertinations of the complete that are completely accomplished to the provisions of pertinations of pertinations of the complete that are completely accomplished to the provisions of pertinations	nent laws, rules and regulations of the centative to verify/validate the contents state	Republic of the ed herein.	BELLO, BRET JOHNSON G.		
	overnment Issued ID (a a Passport, GSIS, SSS, PRC, Driver's License, etc.) LEASE INDICATE ID Number and Date of Issuance	n.1				
G	overnment Issued ID: PRC ID	1210				
10	/License/Passport No.: 2055204	0X)				
De	ate/Place of Issuance: 06/13/2023 MAASIN, SOUTHERN LEYTE	AUGUST 21, 2023 Date Accomplished		Right Humbmark		
	SUBSCRIBED AND SWORN to before me thing 2 ALLE NO. 37 CYUII FRIFS OF 20 27	ATTY: RIVNALUTE II. I MOTARY PUBATO FOR SOUTHER ZONE III. SUGOD SOUTHER TO 33 N. U OOX - ZOZU ZOTIL TR. NO OOX - ZOZU ZOTIL TR. NO OOX - ZOZU ZOTIL	TERUS ERN LEYTE DEC. 21/2024	overnment ID as indicated above.		
	*FRIES OF 20_271	TE NO. 235 3 (Reman Administrating Op 18P NO. 235 3 (Reman Administrating Op	MADIN DITY	CS FORM TIP (Forward &		