CS Form No. 212

Revised 2025

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 if accomplished through own handwriting. Tick appropriate boxes | | and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE.

I. PERSONAL INFORMATION									
1. SURNAME	TABAT								
2. FIRST NAME	JAMES			NAME EXTENSION (JR., SR)					
MIDDLE NAME	SUNDAYON								
3. DATE OF BIRTH (dd/mm/yyyy)	5/3/2001	16. CITIZENSHIP		✓ Filipino ☐ Dual Citizenship ☐ by birth ☐ by naturalization					
4. PLACE OF BIRTH	BAYBAY CITY, LEYTE	BAYBAY CITY, LEYTE If holder of dual citizen		Pls. indicate country:			acion		
5. SEX AT BIRTH	✓ Male Female	please indicate the de	tails.					•	
6 CIVIL STATUS	✓ Single	17. RESIDENTIAL ADDRESS	Hous	se/Block/Lot N	0.		PANLANTAWAN Street		
	☐ Widowed ☐ Separated ☐ Other/s:					BITANHUAN			
7. HEIGHT (m)	185		Subdivision/Village BAYBAY CITY City/Municipality				Barangay LEYTE Province		
8. WEIGHT (kg)	65	ZIP CODE	Oi.	ty/iviuriicipality			1 TOVINCE		
9. BLOOD TYPE	O+	40 DEDMANENT ADDRESS		PANLANTAWAN				N	
10. UMID ID NO.	N/A		House/Block/Lot No.				Street BITANHUAN		
11. PAG-IBIG ID NO.	121375435613		Subdivision/Village BAYBAY CITY				LEYTE Province		
12. PHILHEALTH NO.	01-255559630-6 ZIP CODE		City/Municipality Province 6521						
13. PhilSys Number (PSN):	2653-7624-9609-1364	19. TELEPHONE NO.	N/A						
14. TIN NO.	642-970-780-00000 20. MOBILE NO.			09218525807					
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)		semajtabat03@gmail.com					
II. FAMILY BACKGROUND									
22. SPOUSE'S SURNAME	N/A		23. NAME of CHILDREN (Write full name and list all			list all)	DATE OF BIRTH (dd/mm/yyyy)		
FIRST NAME	N/A	NAME EXTENSION (JR., SR)	N/A		N/A		N/A		
MIDDLE NAME	N/A								
OCCUPATION	N/A								
EMPLOYER/BUSINESS NAME	N/A								
BUSINESS ADDRESS	N/A								
TELEPHONE NO.	N/A								
24. FATHER'S SURNAME	TABAT								
FIRST NAME	JESUS	NAME EXTENSION (JR., SR)							
MIDDLE NAME	BAYO								
25. MOTHER'S MAIDEN NAME	MOTHER'S MAIDEN NAME								
SURNAME	SUNDAYON								
FIRST NAME	MA. GORETTE								
MIDDLE NAME	SUBALDO								
III. EDUCATIONAL BACKGROUND									
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGRE (Write in full)	EE/COURSE	PERIOD OF A	TO	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED	
ELEMENTARY	BITANHUAN ELEMENTARY SCHOOL	N/A		6/1/2009	4/1/2014	N/A	2014	WITH HONOR	
SECONDARY	BAYBAY CITY SENIOR HIGH SCHOOL	HUMANITIES AND SOCIAL	SCIENCES	6/1/2014	4/1/2020	N/A	2020	WITH HONOR	
VOCATIONAL / TRADE COURSE	N/A	N/A		N/A	N/A	N/A	N/A	N/A	
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN	FORESTRY	1/1/2022	7/25/2025	N/A	2025	CUM LAUDE	
GRADUATE STUDIES	N/A	N/A		N/A	N/A	N/A	N/A	N/A	
SIGNATURE	19110			DATE		December 18, 2025			

IV. CIVIL SERVICE ELIGIBILITY							
27. CES/CSEE/CAREER SERVICE/RA 1080 (BOARD/ BAR)/UNDER SPECIAL LAWS/CATEGORY II/ IV ELIGIBILITY		RATING (If Applicable)	DATE OF EXAMINATION /	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)		
and ELIGIBILITIES FOR UNIFORMED PERSONNEL			CONFERMENT		NUMBER	Valid Until	
N/A		N/A	N/A	N/A	N/A	N/A	
V WORK	EXPERIENCE						
			t work.) Descriptio	on of duties should	be indicated in the attach	ed Work Experie	ence Sheet.
	JSIVE DATES d/mm/yyy)	POSITION TI			GENCY / OFFICE / COMPANY	STATUS OF	GOV'T SERVICE
From	То	(Write in full/Do not	abbreviate)	(Write in full/Do not abbreviate)		APPOINTMENT	(Y/N)
10/27/2025	12/31/2025	DATABASE MANAGEN	MENT OFFICER	DENR-PENRO	NEGROS ORIENTAL	CONTRACTUAL	LOCAL AGENCY
SIGN	ATURE		4		DATE	Decembe	r 18, 2025
5.5.a 5 _			W			00 50 50 50 40 40	vised 2025), Page 2 of 4

VI. VOLUNTARY WORK OR INVOLVEMENT	IN CIVIC / NON-GOVERNMENT	/ PEOPLE / VC	I UNTARY OF	RGANIZATION/	S	
29. NAME & ADDRESS OF (Write in fu	ORGANIZATION	INCLUSI	VE DATES m/yyyy)	NUMBER OF HOURS	POSITION / NATURE OF WORK	
N/A		N/A	N/A	N/A		N/A
VII. LEARNING AND DEVELOPMENT (L&D)	INTERVENTIONS/TRAINING PR	1				
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)		ATTEN	E DATES OF NDANCE m/yyyy) To	NUMBER OF HOURS	Type of L&D (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
SANGGUNIANG KABATAA	N TRAINING	1/15/2025	1/17/2025	8 HOURS	N/A	SANGGUNIANG KABATAAN FEDERATION
FIRE AND SAFETY LECTUR	E AND DRILL	12/4/2025	12/4/2025	8 HOURS	N/A	FACULTY OF FORESTRY AND ENVIRONMENTAL SCIENCE
SANGGUNIANG KABATAAN CI	ONGRESS 2025	9/24/2025	9/24/2025	5 HOURS	N/A	SANGGUNIANG KABATAAN FEDERATION
URBAN AGRICULTURE TRAINING ON VE	EGETABLE PRODUCTION	9/20/2025	9/20/2025	6 HOURS	N/A	CITY OF AGRICULTURE
VIII. OTHER INFORMATION		_	_	_	_	
31. SPECIAL SKILLS and HOBBIES	32. NON	N-ACADEMIC DISTI		GNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION
PROFICIENT IN CLERICAL AND OFFICE WORK	(Write in tuli) CERTIFICATE OF RECOGNITION- ACTIVE SANGGUNIANG KABATAAN (SK) MEMBER, SK MEMBER OF BRGY. BITANHUAN, BAYE					
STRONG ORGANIZATIONAL AND TIME MANAGEMENT SKILLS EFFECTIVE WRITTEN AND VERBAL COMMUNICATION	BRGY. BITANHUAN, BAYBAY CITY, LEYTE CITY, LEYTE-2023 TO PRESENT VSU FACULTY OF FORESTRY AND ENVIRONMENTAL SCIENCE (FFES) MEMBER					
COMPUTER LITERATE						
ATTENTION TO DETAIL AND ACCURACY IN PREPARING REPORTS						
LEADERSHIP AND TEAMWORK SKILLS THROUGH COMMUNITY SERVICE						
ADAPTIBILITY AND ABILITY TO WORK UNDER PRESSURE						
SIGNATURE	<u> </u>	#60		DATE		December 18, 2025

chi	e you related by consanguinity or affinity to the appointing of ief of bureau or office or to the person who has immediate sureau or Department where you will be apppointed,						
	within the third degree?	YES V NO					
	within the fourth degree (for Local Government Unit - Caree	YES VO					
		If YES, give details:					
35. a . l	Have you ever been found guilty of any administrative offer	☐ YES ☑ NO					
			If YES, give details:				
b. l	Have you been criminally charged before any court?		☐ YES ☑ NO If YES, give details:				
		Date Filed:					
			Status of Case/s:				
	ave you ever been convicted of any crime or violation of any	law, decree, ordinance or regulation	YES V NO				
by	any court or tribunal?		If YES, give details:				
	ave you ever been separated from the service in any of the tirement, dropped from the rolls, dismissal, termination, enc		☐ YES ☑ NO If YES, give details:				
	it (abolition) in the public or private sector?	ror term, finished contract or phased	II 1 ES, give details.				
	Have you ever been a candidate in a national or local elect	ion held within the last year (except	☐ YES ✓ NO				
Ва	arangay election)?		If YES, give details:				
	Have you resigned from the government service during the		☐ YES ✓ NO				
	ection to promote/actively campaign for a national or local of		If YES, give details:				
39. Ha	ave you acquired the status of an immigrant or permanent re	esident of another country?	☐ YES ☑ NO				
			If YES, give details (country):				
40. Pu	rsuant to: (a) Indigenous People's Act (RA 8371); (b) Magn	a Carta for Disabled Persons (RA					
72	77, as amended); and (c) Expanded Solo Parents Welfare						
	llowing items:						
a. Are	e you a member of any indigenous group?	☐ YES ☑ NO If YES, please specify:					
b. Are	e you a person with disability?		YES NO				
			If YES, please specify ID No:				
c. Are	e you a solo parent?		☐ YES ☑ NO If YES, please specify ID No:				
41. REF	FERENCES (Person not related by consanguinity or affinity to applica	nt /appointee)					
	NAME	OFFICE / RESIDENTIAL ADDRESS	CONTACT NO. AND/OR EMAIL				
	HERNANDO L. MONDAL, PhD	PANGASUGAN, BAYBAY CITY, LEYTE	9202693348				
	ANATOLIO M. POLINAR, PhD	PANGASUGAN, BAYBAY CITY, LEYTE	9155008665				
	RENEZITA S. COME. PhD	PANGASUGAN, BAYBAY CITY, LEYTE	9988630824				
42. I d	leclare under oath that I have personally accomplished						
COI	mplete statement pursuant to the provisions of pertine	nt laws, rules, and regulations of the	Republic of the				
	nilippines. I authorize the agency head/authorized repre agree that any misrepresentation made in this documents.						
	ministrative/criminal case/s against me.	ment and its attachments shall caus	se the ming of				
	rnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) SE INDICATE ID Number and Date of Issuance	/ ()					
ID/Lice	ense/Passport No.: 2653-7624-9609-1364	Signature (Sign inside the b December 18, 2025	box) Right Thumbmark				
Date/P	Place of Issuance: OCTOBER 23, 2021	Date Accomplished					
	SUBSCRIBED AND SWORN to before me this	his/her validly issued government ID as indicated above.					
	CODOCINDED VIAD SMOUM TO DEIDIE HIE FIRE	mismor validity issued government to as indicated above.					
	<u> </u>	th					
		Person Administering Oat	ui				