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

concerned. READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM.									
I. PERSONAL INFORMATION) and use separate sheet if necessary. Indicate N	I/A if not applicable. DO NOT A	BBREVIATE.		1. CS ID No.		(Do not fill up. I	For CSC use only)	
2. SURNAME	GASATAN								
FIRST NAME	CHRISTINE JOY					NAME EXTENSION (JR., SR)			
MIDDLE NAME									
3. DATE OF BIRTH	BRILLO								
(mm/dd/yyyy)	12/12/2000	16. CITIZENSHIP			no 🗆	Dual Citizenship			
4. PLACE OF BIRTH	ORMOC CITY	If holder of dual citizer	☐ by birth ☐ Pls. indicate c			by naturalization country:			
5. SEX	☐ Male ☑ Female	please indicate the details.		Philippines				•	
6 CIVIL STATUS	✓ Single	17. RESIDENTIAL ADDRESS		N/A			PUROK 3		
	☐ Widowed ☐ Separated	Hous		se/Block/Lot No N/A	0.		Street CABULIHAN		
7 UEICUT (**)	Other/s:	Sui		odivision/Village ORMOC			Barangay LEYTE		
7. HEIGHT (m)			City/Municipality					Province	
8. WEIGHT (kg)	48	ZIP CODE		A1/A		6541	6541		
9. BLOOD TYPE	B+	18. PERMANENT ADDRESS	N/A House/Block/Lot I		o		PUROK 3 Street		
10. GSIS ID NO.	N/A		Sub	N/A division/Village	9		CABULIHAN Barangay		
11. PAG-IBIG ID NO.	N/A		ORMOC City/Municipa				LEYTE Province		
12. PHILHEALTH NO.	13-250717906-5	ZIP CODE	6541						
13. SSS NO.	N/A	19. TELEPHONE NO.	N/A			N/A			
14. TIN NO.	772-119-932	20. MOBILE NO.	09991726350			9991726350			
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)		<u>C</u>	hrisgasa	tan@gmail.co	<u>om</u>		
II. FAMILY BACKGROUND									
22. SPOUSE'S SURNAME	N/A 23. NAME of CHILDR		DREN (Write full name and list all)			DATE OF BIRTH (mm/dd/yyyy)			
FIRST NAME		NAME EXTENSION (JR., SR)		N/A			N/A		
MIDDLE NAME									
OCCUPATION									
EMPLOYER/BUSINESS NAME									
BUSINESS ADDRESS									
TELEPHONE NO.									
24. FATHER'S SURNAME	GASATAN								
FIRST NAME	SALVADOR	NAME EXTENSION (JR., SR)							
MIDDLE NAME	COLASITO								
25. MOTHER'S MAIDEN NAME	MOTHER'S MAIDEN NAME								
SURNAME	BRILLO								
FIRST NAME	ALMA								
MIDDLE NAME	MONTES		(Continue on sep		parate sheet if necessary)				
III. EDUCATIONAL BACKGF	ROUND								
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)		PERIOD OF A	ATTENDANCE To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED	
ELEMENTARY	T. AVILES ELEMENTARY SCHOOL	N/A		2008	2013	N/A	2013	SALUTATORIA N	
SECONDARY	ORMOC CITY SENIOR HIGH SCHOOL	SCIENCE, TECHNOLOGY, ENGINEERING, MATHEMATICS		2017	2019	N/A	2019	WITH HONORS	
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 AGRICULTURE MAJOR IN SOIL SCIENCE		2019	2023	N/A	2023	CUM LAUDE	
GRADUATE STUDIES	N/A	N/A		N/A	N/A	N/A	N/A	N/A	
	(C	ontinue on separate sheet if nece	essary)						
SIGNATURE				DA	TE				

IV.	CIVIL SE	RVICE ELIG	IBILITY							
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER			RATING	DATE OF				LICENSE (if applicable)		
SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE		(If Applicable)	EXAMINATION / CONFERMENT	XAMINATION / PLACE OF EXAMINATION / CONFERMENT			NUMBER	Date of Validity		
RA 1080 - LICENSED PROFESSIONAL AGRICULTURIST		76.17%	NOVEMBER, 2023	TACL	.OBAN		N/A	N/A		
V	MODY E	XPERIENCE		(Cor	ntinue on separate sheet	if necessary)				
			nt. Start from your recent	work) Description	of duties should be	indicated in the attached	Work Exper			
28.		SIVE DATES n/dd/yyyy)	POSITION T			ENCY / OFFICE / COMPANY	MONTHLY applic	SALARY/ JOB/ PAY GRADE (if applicable)& STEP	STATUS OF	GOV'T SERVICE
	From	То	(Write in full/Do not	abbreviate)	(Write in full	/Do not abbreviate)	SALARY	(Format "00-0")/ INCREMENT	APPOINTMENT	(Y/ N)
	N/A	N/A	N/A			N/A	N/A	N/A	N/A	N/A
				(Cor	tinue on separate sheet	if necessary)				
SIGNATURE					DATE					

VI. VOLUNTARY WORK OR INVOLVEMENT	IN CIVIC / NON-GOVERNMENT			RGANIZATIO	N/S	
29. NAME & ADDRESS OF OF (Write in full)		INCLUSI\ (mm/d	/E DATES d/vvvv)	NUMBER OF HOURS		POSITION / NATURE OF WORK
(wite iii lui)		From	То			
N/A		N/A	N/A	N/A		N/A
		tinue on separate :				
VII. LEARNING AND DEVELOPMENT (L&D)	INTERVENTIONS/TRAINING PR			l		
30. TITLE OF LEARNING AND DEVELOPMENT INTE (Write in full)		ITIONS/TRAINING PROGRAMS ITIONS/TRAINING PROGRAMS ATTENDA (mm/dd/		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/	CONDUCTED/ SPONSORED BY (Write in full)
		From	То		Technical/etc)	
N/A		N/A	N/A	N/A	N/A	N/A
VIII. OTHER INFORMATION	(Con	tinue on separate :	sheet if necessary)			
31. SPECIAL SKILLS and HOBBIES	32. NON	-ACADEMIC DISTIN	ICTIONS / RECOG	NITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION
	32.		e in full)			(vvrite in full)
COMPUTER LITERATE		N/A	1			N/A
VIDEO EDITING		N/A	1			N/A
PHOTOGRAPHY	N/A				N/A	
SOIL SURVEY AND SOIL PROFILE CHARACTERIZATION			1			N/A
	(Con	tinue on separate s	sheet if necessary)		
SIGNATURE				Di	ATE	

34.	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,						
	a. within the third degree?	☐ YES ☑ I	NO				
	b. within the fourth degree (for Local Government Unit - Car	☐ YES ☑ I					
	į (. , ,	If YES, give details:				
35.	a. Have you ever been found guilty of any administrative off	☐ YES ☑	NO				
			If YES, give details:				
	b. Have you been criminally charged before any court?		☐ YES ☑	NO			
	s. Have you soon similarly oranged solore any count.		If YES, give details:				
			Date Filed:				
			Status of Case/s:				
36.	Have you ever been convicted of any crime or violation of a	ny law, decree, ordinance or regulation by	☐ YES ☑	NO			
	any court or tribunal?		If YES, give details:				
37.	Have you ever been separated from the service in any of the] NO			
	retirement, dropped from the rolls, dismissal, termination, er (abolition) in the public or private sector?	nd of term, finished contract or phased out	If YES, give details:				
20	a. Have you ever been a candidate in a national or local ele	ction held within the last year (except					
30.	Barangay election)?	cuon neid within the last year (except	☐ YES [If YES, give details:	☑ NO			
		so three (2) month neried before the last					
	b. Have you resigned from the government service during the election to promote/actively campaign for a national or local		☐ YES ☑ NO If YES, give details:				
30	Have you acquired the status of an immigrant or permanent						
33.	That's you doquited the status of all miningfant of politicalisms	Toolaging of another obtaining.	☐ YES ☑ NO If YES, give details (country):				
			ii 125, give details (co	ountily).			
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag	gna Carta for Disabled Persons (RA	<u> </u>				
	7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972),						
a.	Are you a member of any indigenous group?		✓ NO				
b.	Are you a person with dischility?		If YES, please specify:				
D.	Are you a person with disability?		☐ YES ☑ NO If YES, please specify ID No:				
c.	Are you a solo parent?		1	☑ NO			
			If YES, please specify ID	No:			
41.	REFERENCES (Person not related by consanguinity or affinity to applicant	t /appointee)					
	NAME	ADDRESS	TEL. NO.				
	MR. KENNETH ORAIZ	VISAYAS STATE UNIVERSITY	kenneth.oraiz				
		TIONING SINIE SINIERS	@vsu.edu.ph	(20 20)			
	EMMA T. TAYAD, Rch., MSc.	DA - RFO7, MAGUIKAY, MANDAUE CITY, CEBU	9257316480				
42.	I declare under oath that I have personally accomplished	this Personal Data Sheet which is a tr	rue, correct and	and the same of th			
	complete statement pursuant to the provisions of pertin						
	Philippines. I authorize the agency head/authorized represe agree that any misrepresentation made in this docu			РНОТО			
	administrative/criminal case/s against me.	ment and its attachments shall caus	e the ining of				
	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) LEASE INDICATE ID Number and Date of Issuance						
	overnment Issued ID: PASSPORT						
ΙH							
	/License/Passport No.: P3272465C	Signature (Sign inside the b	ox)				
D	ate/Place of Issuance: 14 FEB 2023	of Issuance: 14 FEB 2023 Date Accomplished					
	CLIDCODIDED AND CWODN to before me this	ing his/hor validly issued gov	ernment ID as indicated above				
	SUBSCRIBED AND SWORN to before me this	ing momer validly issued gov	ernment ID as indicated above.				
1							
1	<u>_</u>	Person Administering Oat					
		h					