CS Form No. 212 Revised 2017	D	-Deu	NAL DAT	A GL	4EET	Q UNCER	1960 (BOAPB) BAR	SERVICE/RA	4334A0
NUMBER REMUN	MaWkahwoo wa	-NSU	TUBMERNO	A SI	ILL!	5.3VE			
WARNING: Any misrepresent concerned.	ation made in the Personal D	ata Sheet and t	the Work Experience Sheet s	hall cause th	e filing of ad		e/criminal case/s		
READ THE ATTACHED GUIDE Print legibly. Tick appropriate boxe							raigivala ar		For CSC use onl
I. PERSONAL INFORMATION		ecessal y. mulcate	e 14/A il liot applicable. Do 1401 A	ADDREVIATE.		1. 00 10 140.		(Be net ill sp.	
2. SURNAME	CASTIL								
FIRST NAME	JHONAVEL NAME EXTENSION (JR., SR)								
MIDDLE NAME	ROMBLON N/A								
3. DATE OF BIRTH	FEBRUARY 23.	1995	16. CITIZENSHIP			7.5.1.00			
(mm/dd/yyyy)			10. OTTELLIOTH		☐ Dual Citizenship ☐ by birth ☐ by naturalization			zation	
4. PLACE OF BIRTH	ANAHAWAN, SOUTH	ERN LEYTE	If holder of dual citizenship,		Pls. indicate country:			emperature est constitutiva acre	
5. SEX	Male	☑ Female	please indicate the c	Philippines			to the second section of the second		
6 CIVIL STATUS	☑ Single	Married	17. RESIDENTIAL ADDRESS	unior.				GUMAMELA ST.	
	Widowed	Separated	•	Н	ouse/Block/Lot N	0.		Street MARCOS	
TO SUTATE	Other/s:	- VIII	TENERO LI CHESCANTIZIMI, FIAS	S	Subdivision/Village	9		Barangay	ай ЈОЙI Бито
7. HEIGHT (m)	1.55 m	. (6)	sivindas for a Daut metaw)		BAYBAY City/Municipality	on collist a	((4))	Province	VIA:
8. WEIGHT (kg)	62 kg		ZIP CODE	6521	hadista mada, adista ta ta andista an			01	mor-l
9. BLOOD TYPE	AB+ 00.888,87		18. PERMANENT ADDRESS	PAM H	ouse/Block/Lot N		OUSTOMER S	d10/5/2015 Street	3/2015
10. GSIS ID NO.	18,549.00 SG-04N		DNOR	ASCI		I TRY IA	FINANCIAL AN	LEWING	/13/2015
11. PAG-IBIG ID NO.	121143904491	8	MEDIAZONE PRODUCTION	MOM	Subdivision/Village ANAHAV		ADMINISTRAT		RN LEYTE
12. PHILHEALTH NO.	03-025772050-7		YAS STATE UNIVERSITY AND STATE	6610	City/Municipality	IVE AIDE	ADMINISTRAT	Province 0505\\\8\&	6/2018
13. SSS NO.	03-45123574-8		19. TELEPHONE NO.	N/A	111	IVE AIDE	ADMINISTRAT	RESENT	/2020
14. TIN NO.	322-041-301-000		20. MOBILE NO.	0955-420-9	673 / 0928-75	5-6851			
15. AGENCY EMPLOYEE NO.	N/A		21. E-MAIL ADDRESS (if any)		l@yahoo.d				
II. FAMILY BACKGROUNI	7				ice y arrow.				
22. SPOUSE'S SURNAME	N/A			23. NAME of C	CHILDREN (Write	e full name and	d list all)	DATE OF BIR	RTH (mm/dd/yyyy
FIRST NAME	N/A		NAME EXTENSION (JR., SR) N/A				26, 2019		
MIDDLE NAME	N/A.								
OCCUPATION	N/A								
EMPLOYER/BUSINESS NAME	N/A								
BUSINESS ADDRESS	N/A								
TELEPHONE NO.	N/A					Contract Contract V. Contract			
24. FATHER'S SURNAME	CASTIL					1000			
FIRST NAME	NILO		NAME EXTENSION (JR., SR)					<del>                                     </del>	
MIDDLE NAME	MATAFLORIDA								
25. MOTHER'S MAIDEN NAME									
SURNAME	ROMBLON			-				-	
FIRST NAME	REFELYN								
MIDDLE NAME	PALCO								
III. EDUCATIONAL BACK					(U	niunue on se	parate sheet if nece	ssary)	Bearing to the
							HOUSETLEVE		SCHOLARSHIP
26. LEVEL	NAME OF SCHOOL (Write in full)		BASIC EDUCATION/DEGREE/COURSE (Write in full)		UN (if		UNITS EARNED  (if not graduated)	YEAR GRADUATED	The state of the s
ELEMENTARY	MAHALO ELEMENTARY SCHOOL		PRIMARY EDUCATION		From 2003	To 2007	GRADUATED	2007	SALUTATORIA
				SECONDARY EDUCATION				2007	N SALUTATORIA
SECONDARY  VOCATIONAL /	SAINT ANTHONY'S HIG	on SUNUUL		ATION	2007	2011	GRADUATED	2011	N
TRADE COURSE	N/A		N/A		M. St. St. St. St. St. St. St. St. St. St				
COLLEGE	METRO MANILA CO	DLLEGE	BSBA-FINANCIAL MAN	BSBA-FINANCIAL MANAGEMENT		2015	GRADUATED	2015	MAGNA CUN LAUDE
GRADUATE STUDIES	N/A		N/A			hand in the complete photograph			
		ju ju	(Continue on separate sheet if ned	Marine Street, Square,	er se se se	1000			
SIGNATURE	The second state of the second	Townson, it	Jume	reneral and a second	DA	TE	061	09/202	CONSTRUCTION OF THE PARTY.

CS FORM 212 (Revised 2017), Page 1 of 4

27. CARE	ER SERVICE/ PA	1080 (BOARD/ RAR) LINDED		DATE OF				LICENSE (if app	olicable)
SPECIAL LAWS/CES/CSEE RATING			RATING (If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAM	NUMBER	Date of Validity		
			N/A	AWA  FORE ACCOMPLISM	S ISOM TESHS ATAO II	1001131602017	3/27/20		
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WW AS W	V21-3V-3V-3			Continue on separate she	net if necessary)	3	400		
	EXPERIENCE vate employme	: ent. Start from your recent	work) Description	n of duties should be	indicated in the attacl	ed Work Experi	ence sheet		
	USIVE DATES nm/dd/yyyy)	POSITION TI			NCY / OFFICE / COMPANY	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP	STATUS OF	GOV'T SERVICE
From	To	(Write in full/Do not a	abbreviate)	(Write in full/	Do not abbreviate)	WONTHET SALAKT	(Format *00-0") INCREMENT	APPOINTMENT	(Y/N)
5/13/2015	10/5/2015	CUSTOMER SERVICE AS	SISTANT	MARKET STRATEG	SIC FIRM	13,338.00	+82	PROBATIONARY	NO
10/13/2015	12/31/2016	FINANCIAL ANALYST 1	0.0000	DSWD-NCR		18,549.00	SG-9	MOA	YES
2/1/2017	3/15/2018	ADMINISTRATIVE ASSIST	TANTMA	MQ MEDIAZONE PRODUCTIONS		11,000.00	12:14390449	CONTRACTUAL	NO
8/16/2018	5/31/2020	ADMINISTRATIVE AIDE I		VISAYAS STATE UNIVERSITY		9,659.36	63-02577205	J.O	YES
5/1/2020	PRESENT	ADMINISTRATIVE AIDE II		VISAYAS STATE U	NIVERSITY	11,243.63	SG-3	CASUAL	YES
		1883-88	-426-9673   0928-7	320 mm	8.808 (A)	\$00	322-041-301		Sakil e
	MINOREA NECESSARIA	COM	navel@yahoc	ADDRESS (cny)   (inc	21 F MAIL)	and the contract of the contra	A\N	anner men sakanti dapata asar in ciku kamba	
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Name of the State						AO	NILO MATAFLOR	37/A	200 V
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							ROMBLON	30	49%. 107
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SALUTATORIA	1009	2001 GRADUATED	2,005	PRIMARY EDUCATION	Тория	(LO ELEMENTAR)	HAM	VP = 10	
ALUTATORIA I	tros	STIM GRADUATED	7007	SECONOARY EDUCATION	CHOOL	SHOP STROPTION	MIAS	1 2AG	100.10
				NA		AW		19440 Systems	TA-F
MAGNA CUM	2785	2015 GRADUATED	N1 5 2015	A-PHANCIAL HANAGENE	8 8 903	TRO MANUA COL	10.7	18	10
				A.s.		AW		ARCHIRATION	l Air
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SIGN	ATURE		Lum	and the second s	DATE	and the state of t	06/0	9/2021	

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Date/Place of Issuance OCTOBER 27, 2016				0(7-04	-4031			
D/License/Passport No.: CRN-0111-4863951-0		AND STATE OF THE S	and the second	- Eigneiture (Eig-	(marqo (no pex)	DANCING		
ADMINISTRATIVE PERSONNEL ASSOCIATIO		The state of the s		Th	Mr	СООКІИС		
VISAYAS STATE UNIVERSITY CREDIT	Driver's License let attenne	3		INON		(notnimbs8 ,lisdyelloV) STAO92		
MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	rojus aresidada despetualiza	NOUIN	in full)	ACADEMIC DISTING (Write	NON ZE	31. SPECIAL SKILLS and HOBBIES		
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ENCARNACION V OUADRA			OTTE	ZON CITY	09178830085			
МАМЕ.		and Compact to the Assessment Lies	V	DDRESS	JET WO			
REFERENCES (Person not related by consarra	unity or affinity to	applicant (appoi	o(ee)					
	e rough to the television of the Contraction				If YES please speci	VID No		
Are you a solu parent?					(S) 452			
DEVELOPLEMENT OF SOCIAL WELFARE & DEVELOPLEMENT-NATIONAL CAPITAL REGION	Technical	24 hrs.	15/3/5012	12/1/2015	t for BUB Field Staff	y manageraM toejord no prinistT		
DEVELOPLEMENT OF SOCIAL WELFARE & DEVELOPLEMENT-UNATIONAL CAPITAL REGION	st of 2000 (R/ lsoindoeT roup?	8972), pleas end 8f	<b>5/54/5016</b>	following iter 8105/ES/S	Instruction Review	Il bn∃-reaY grinagbud qu-mottod		
DEPRATMENT OF SOCIAL WELFARE & DEVELOPLEMENT-UATIONAL CAPITAL DEVELOPLEMENT-UATIONAL CAPITAL	Technical (RA 8371);	b) Magna Co	4/19/2016 1/18 for Dissi	4/19/2016	Orientation on the National Cultural Heritage Act of 2009			
DEVELOPLEMENT OF SOCIAL WELFARE & DEVELOPLEMENT-UATIONAL CAPITAL REGION	nigrant or per IssinhseT	rhanent reside snf 8	of anothe 5/13/2016	2/13/2016	IsunaM enining on the Implementation Government Accounting Manual			
DEPERTMENT OF SOCIAL WELFARE & DEVELOPLEMENT-NATIONAL CAPITAL REGION	Technical	24 hrs.	7/9/2016 19/204/6	9102/ <i>T</i> /7	gram Implementation Review CY	ord larizemed 1st 1inU inemeganaM eonani 8102		
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(B) STATE UNIVERSITY OF SOCIO	Technical	3 hrs.	11/27/2020	11/27/2020	EIHIOMEU COI	ISO 9001:2015 Awareness/Re-a		
CONDUCTED/SPONSORED BY	Type of LD ( Managerial/ Supervisory/ Technical/etc)	NUMBER OF HOURS	ANCE	INCLUSIVE I		TITLE OF LEARNING AND DEVELOPMENT INT		
any court or silenness.						rt from the most recent L&D'training program and inclu		
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					Date Filed.	Environment intercellips of the complex method partners and the collection of special subject to		
b. Have you been criminally charged be	ginte and see				if YES, give defail			
6. Elegeness haan eriminalite pharead by	E, DIA UNI	-0			1 1 4 5 5	KI NO		
		-						
STIPAC (ca atai need tasus deul as a	n A communes	MAC OHOUSA		-	If YES, give detail			
a. Have you ever been found guilly of a	ma varainishs	nve offense?			L. J. Asset	EA NO		
					If YES, give detail			
b. Within the fourth degree (for Local G	overnment Ur	. Career En	ployees)?		☐ YES	NONE		
PARTITION AND THE WARM TO BRUTAN UNDITIES OF WARFING THE TOTAL GENT SEC.		NUMBER OF HOURS	οŢ	Notal	L Akd	luf ni efhW)		

	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,		NECTAMENDED REPORT OF WAR	Of the second		
	a. within the third degree?	A CONTRACTOR OF THE CONTRACTOR	YES VO	and the state of t		
	b. within the fourth degree (for Local Government Unit - Care	eer Employees)?	YES NO			
			If YES, give details:	Angelija gili za sa po		
35.	a. Have you ever been found guilty of any administrative offe	ense?	YES NO			
			If YES, give details:			
Application of the second	b. Have you been criminally charged before any court?		☐ YES ☑ NO If YES, give details:			
			Date Filed:			
		(Continue on search tends the conserve.	Status of Case/s:	Disport Control of the Control of		
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:			
and the second			owis campa nokon ikuga ya iyakilo anan iko okusa.			
37.	Have you ever been separated from the service in any of the	e following modes: resignation,	✓ YES NO			
	retirement, dropped from the rolls, dismissal, termination, er (abolition) in the public or private sector?		If YES, give details: FINISHED CONTRACT	021		
	a. Have you ever been a candidate in a national or local ele	ction held within the last year (except	☐ YES ☑ NO			
	Barangay election)?13H3_H0.13V3G spinned at the Molegan	(2/2/2/6 (3/2/20/6 (6)	If YES, give details: Vionese A letern & UMA			
	b. Have you resigned from the government service during the		nent Unit 1st SONs VI Program ImpleBBY In R	Finance Managen		
- L	election to promote/actively campaign for a national or local		If YES, give details:			
39.	Have you acquired the status of an immigrant or permanent	resident of another country?				
	DEPARTMENT OF SOCIAL WELFARE &		If YES, give details (country):			
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma	gna Carta for Disabled Persons (RA	E0335-101-1944 RIGINISH HAHINIST UNIONECEDIN EID HOM	Unenia		
	7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972)		Full Sudgeting Year-End Inclementation Review	notice		
a.	Are you a member of any indigenous group?		☐ YES ☑ NO			
b.		12/1/2015 12/3/2015 24	If YES, please specify:  ☐ YES	HOT		
			If YES, please specify ID No:			
С.	Are you a solo parent?		✓ YES NO			
			If YES, please specify ID No:			
41.	REFERENCES (Person not related by consanguinity or affinity to applicant					
· 1	NAME	ADDRESS	TEL. NO.			
MA.	ENCARNACION V. QUADRA	QUEZON CITY	09178830085			
MAR	RILYN S. CANUEL	SAMPALOC, MANILA	09432024794			
- Control			The state of the s			
The second second	I declare under oath that I have personally accomplishe					
Dodgase	complete statement pursuant to the provisions of pertir Philippines. I authorize the agency head/authorized represe	ent laws, rules and regulations of the entative to verify/validate the contents stat	Republic of the ed herein.			
	agree that any misrepresentation made in this docu			0		
2/3	administrative/criminal case/s against me.	# 31 3BCCCER HAROTONTEIG OMEGTOWN 14	8	105/10		
Go	overnment Issued ID (i.e. Passport; GSIS, SSS, PRC, Driver's License, etc.)	MONE	Inoloimbas sa	SPORTS		
	LEASE INDICATE ID Number and Date of Issuance	- Os onto-				
IIE	overnment Issued ID: SSS					
ID/	/License/Passport No.: CRN-0111-4863951-0	oox)				
Da	ate/Place of Issuance: OCTOBER 27, 2015	O( - 09-202)  Date Accomplished	Right Thun	nbmark		
	SUBSCRIBED AND SWORN to before me this	i Dowl , affiant exhibiti	ng his/her validly issued government ID as indicated	d above.		
Section 1				- American Company		
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