

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.

Print legibly. Tick appropriate boxes (☐) and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE.

1. CS ID No.

(Do not fill up. For CSC use only)

I. PERSONAL INFORMATION

2. SURNAME

ALEGRE

FIRST NAME

JOTHAM LLOYD

NAME EXTENSION (JR., SR)

MIDDLE NAME

YAP

3. DATE OF BIRTH
(mm/dd/yyyy)

20/05/2000

16. CITIZENSHIP

☒ Filipino

☐ Dual Citizenship

☐ by birth

☐ by naturalization

Pls. indicate country:

4. PLACE OF BIRTH

ORMOC CITY

5. SEX

☒ Male

☐ Female

6 CIVIL STATUS

☒ Single

☐ Married

☐ Widowed

☐ Separated

Other/s:

7. HEIGHT (m)

1.66

8. WEIGHT (kg)

63

9. BLOOD TYPE

A

10. GSIS ID NO.

N/A

11. PAG-IBIG ID NO.

121312688010

12. PHILHEALTH NO.

13-250765336-0

13. SSS NO.

06-45231695-9

14. TIN NO.

619-947-102-00000

15. AGENCY EMPLOYEE NO.

230228

17. RESIDENTIAL ADDRESS

BLOCK 3

OWAK

House/Block/Lot No.

Street

Subdivision/Village

SAN ISIDRO

Barangay

ORMOC CITY

LEYTE

City/Municipality

Province

6541

18. PERMANENT ADDRESS

BLOCK 3

OWAK

House/Block/Lot No.

Street

Subdivision/Village

SAN ISIDRO

Barangay

ORMOC CITY

LEYTE

City/Municipality

Province

6541

19. TELEPHONE NO.

N/A

20. MOBILE NO.

09502422095

21. E-MAIL ADDRESS (if any)

iothamlloydalegre@gmail.com

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME

N/A

FIRST NAME

N/A

NAME EXTENSION (JR., SR)

MIDDLE NAME

N/A

OCCUPATION

N/A

EMPLOYER/BUSINESS NAME

N/A

BUSINESS ADDRESS

N/A

TELEPHONE NO.

N/A

23. NAME of CHILDREN (Write full name and list all)

N/A

DATE OF BIRTH (mm/dd/yyyy)

N/A

24. FATHER'S SURNAME

ALEGRE

FIRST NAME

JONATHAN

NAME EXTENSION (JR., SR)

MIDDLE NAME

GARCIANO

25. MOTHER'S MAIDEN NAME

N/A

SURNAME

YAP

FIRST NAME

ANA MARIE

MIDDLE NAME

MAGALLANES

(Continue on separate sheet if necessary)

III. EDUCATIONAL BACKGROUND

26. LEVEL

NAME OF SCHOOL
(Write in full)

BASIC EDUCATION/DEGREE/COURSE
(Write in full)

PERIOD OF ATTENDANCE

From

To

HIGHEST LEVEL/
UNITS EARNED
(if not graduated)

YEAR
GRADUATED

SCHOLARSHIP/
ACADEMIC
HONORS
RECEIVED

ELEMENTARY

SAN ISIDRO ELEMENTARY SCHOOL

PRIMARY EDUCATION (ELEMENTARY)

2006

2012

N/A

2012

1st Honorable
Mention

SECONDARY

NEW ORMOC CITY NATIONAL HIGH SCHOOL

SECONDARY EDUCATION (JUNIOR HIGH SCHOOL)

2012

2016

N/A

2016

N/A

VOCATIONAL /
TRADE COURSE

ORMOC CITY SENIOR HIGH SCHOOL

SENIOR HIGH SCHOOL

2016

2018

N/A

2018

With High
Honors

COLLEGE

VISAYAS STATE UNIVERSITY MAIN CAMPUS

BACHELOR OF SCIENCE IN CHEMISTRY

2018

2022

N/A

2022

DOST

GRADUATE STUDIES

N/A

N/A

N/A

N/A

N/A

N/A

N/A

(Continue on separate sheet if necessary)

SIGNATURE

DATE

JULY 30, 2023

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IV. CIVIL SERVICE ELIGIBILITY						
27.	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
					NUMBER	Date of Validity
	CHEMIST LICENSURE EXAMINATION	74.8	OCTOBER 17-18, 2022	TACLOBAN CITY	0015234	20/05/2025
	CHEMICAL TECHNICIAN LICENSURE EXAMINATION	84.5	OCTOBER 19, 2022	TACLOBAN CITY	N/A	N/A

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

[illegible]

(Continue on separate sheet if necessary)



DATE _____

JULY 30, 2023

[illegible]


(Continue on separate sheet if necessary)




[illegible]

(Continue on separate sheet if necessary)

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE		DATE	JULY 30, 2023
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34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to the chief of bureau or office or to the person who has immediate supervision over you in the Office, Bureau or Department where you will be appointed, a. within the third degree? b. within the fourth degree (for Local Government Unit - Career Employees)?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____	
35. a. Have you ever been found guilty of any administrative offense? b. Have you been criminally charged before any court?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ Date Filed: _____ Status of Case/s: _____	
36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____	
37. Have you ever been separated from the service in any of the following modes: resignation, retirement, dropped from the rolls, dismissal, termination, end of term, finished contract or phased out (abolition) in the public or private sector?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____	
38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)? b. Have you resigned from the government service during the three (3)-month period before the last election to promote/actively campaign for a national or local candidate?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____	
39. Have you acquired the status of an immigrant or permanent resident of another country?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details (country): _____	
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), please answer the following items: a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____	
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)		
NAME	ADDRESS	TEL. NO.
Candelario L. Calibo	Dumaguete City	09999906169
Helen Grace F. Oracion	Baybay City	09073118005
Johanalyn Granada	Bato, Leyte	09850369357
42. I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I authorize the agency head/authorized representative to verify/validate the contents stated herein. I agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me.		
Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: PRC ID/License/Passport No.: 0015234 Date/Place of Issuance: 12/01/2022	<div style="text-align: center;">  Signature (Sign inside the box) JULY 30, 2023 Date Accomplished </div>	<div style="text-align: center;">  JOTHAM LLOYD Y. ALEGRE PHOTO  Right Thumbmark </div>
SUBSCRIBED AND SWORN to before me this SEP 13 2023 , affiant exhibiting his/her validly issued government ID as indicated above.		
DOC. NO. 126 PAGE NO. 7 BOOK NO. 11 SERIES OF 2023	<div style="border: 1px solid black; padding: 5px;"> ATTY. DEE ROSE P. PAPA Public Attorney II (Pursuant to R.A. 9406) Person Administering Oath </div>	