CS Form No. 212 Revised 2017	, , ,							
Revised 20,17	PERSO	NAL DA	TA SI	HEE	T			
WARNING: Any misrepres	entation made in the Personal Data Sheet and t	the Work Experience Sheet	shall cause the	filing of adn	ninistrative/	criminal case/s a	gainst the per	son
concerned. READ THE ATTACHED GL	JIDE TO FILLING OUT THE PERSONAL DATAS	SHEET (PDS) BEFORE ACC	OMPLISHING 1	THE PDS FO	RM.			
	oo () and use separate sheet if necessary. Indica	te N/A if not applicable. DO NO	T ABBREVIATE		1. CS ID No.		(Do not fill up. F	or CSC use only
I. PERSONAL INFORMA	VALENCERINA							
2. SURNAME						NAME EXTENSION (JR	, SR) N/A	
FIRST NAME	SUSAN			PARE LATEROIDE (RE, SR) 197				
MIDDLE NAME 3. DATE OF BIRTH	MORENO	•						
(mm/dd/yyyy)	10/22/1961	16. CITIZENSHIP		☑ Filipino ☐ Dual Citizenship ☑ by birth ☐ Pls. indicate co		by naturalization		
4. PLACE OF BIRTH	BRGY. GABAS, BAYBAY,LEYTE	If holder of dual citiz	enship,			Pls. indicate c	country:	
5. SEX	☐ Male ☑ Female	please indicate the	details.					-
6 CIVIL STATUS	☐ Single ☑ Married ☐ Widowed ☐ Separated ☐ Other/s:	17. RESIDENTIAL ADDRESS	House/Block/Lot No ZONE-1				-Street NAGA	
7. HEIGHT (m)	1.55m			ubdivision/Village BAYBAY		Barangay LEYTE		
8. WEIGHT (kg)	62kg.	ZIP CODE	C	ity/Municipality 6521			Province	
9. BLOOD TYPE	A							
10. GSIS ID NO.	N/A	1	Ног	zone-1).		Street NAGA	
11. PAG-IBIG ID NO.	121109601616		Su	bdivision/Village BAYBAY			Barangay LEYTE	
			City/Municipality			Province		
12. PHILHEALTH NO.	13-025010572-0	ZIP CODE	6521					
13. SSS NO.	09-1110748-7	19. TELEPHONE NO.	N/A					
14. TIN NO.	926-679-694	20. MOBILE NO.	09982525798					
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)		vale	ncerina.	susan@gmai	l.com	
II. FAMILY BACKGROU								
22. SPOUSE'S SURNAME	VALENCERINA	NAME EXTENSION (JR., SR)		23. NAME of CHILDREN (Write full name and list all)			DATE OF BIRTH (mm/dd/yyyy	
FIRST NAME	EDGAR	MAINE EXTENSION (JR., 3N)		DMUND MORENO VALENCERINA			3/19/1988	
MIDDLE NAME	SACUROM		LESTER MO	MORENO VALENCERINA			5/14/1989	
OCCUPATION	Brgy. Councilor							
EMPLOYER/BUSINESS NAI								
BUSINESS ADDRESS	N/A							
TELEPHONE NO.	N/A							
24. FATHER'S SURNAME	MORENO							
FIRSTNAME	RAYMUNDO							
MIDDLE NAME	LORETO		-					
25. 10THER'S MAIDEN NAME	ESCUADRA							
FIRSTNAME	SOLEDAD							
MIDDLE NAME	POLEA							
III. EDUCATIONAL BA	CKGPOLIND							
	CHENOUND							SCHOLARSHIP
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGI (Write in full)		PERIOD OF A	To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	ACADEMIC HONORS RECEIVED
ELEMENTARY	Baybay East Central School Baybay, Leyte	Elementary		1968	1974	N/A	1974	N/A
SECONDARY	Franciscan College of the Immaculate	Secondary		1974	1978	N/A	1978	N/A

Conception, Baybay, Leyte **Bachelor of Science in Commerce** COLLEGE Southwestern University, Cebu City 1978 1982 N/A 1982 N/A Major in Accounting System Technology Institute City VOCATIONAL / TRADE COURSE Ormoc Basic Computer "Power Pack 1.7" Oct.2001 N/A games. SIGNATURE DATE August 2, 2021

	ERVICE ELIC			DATE OF				LICENSE (if app	olicable)
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE			RATING (If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT			NUMBER	Date of Validity
	N/	A							
	-								
	EXPERIENCE vate employme	Ent. Start from your rece		tinue on separate sheet	•	nttached V	Vork Expe	rience sheet.	
28. INCLUSIVE DATES (mm/dd/yyyy) P		POSITION TIT (Write in full/Do not al		DEPARTMENT / AGENCY / OFFICE / COMPANY		MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT		GOV'T SERVICE (Y/N)
9/1/2011	Present	Clerk		Accounting Office	y, VSU, Baybay City			Job Order	Yes
11/1/2002	7/1/2007	Accounting Clerk		Rubetan Finance				Regular	No
1990	2000	OFW		Baybay, Leyte Prince Sultan Bin Al-Khobar, K.S.A	Abdulaziz Palace			Contractual	No
1986	1990	Clerk/Bookkeepper		Hi-Quality Trading	j, Davao City			Regular	No
1985	1986	Clerk		Accounting Office			Casual	Yes	
April 1985	May 1985	Census Enumerator		NCSO, Tacloban			Emergency	Yes	
Oct. 1984	March 1985	Typist		Commission On Audit, Cebu City				Emergency	Yes
1983	1984	Secretary/Clerk		LRT Project-LOR			Contractual	No	
June 1982	Oct. 1982	Apprentice		Vito Cruz, Metro Manila Bureau Of Forest Development				Apprenticeship	Yes
				Cebu City					
	1								
							 		
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	-								
			10-	ntinue on separate shee	I formerva				
SIGN	IATURE	Gow	AND AND DESCRIPTION OF THE PARTY OF THE PART	marker in the particular	DATE	August 2,	2021		

29. NAME & ADDRESS OF ORGANIZATION (Write in full)		INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK		
		From	То				
N/A		N/A				N/A	
W 1510000 100 00001 00001 4 0	NAME OF TAXABLE PARTY OF TAXABLE PARTY.	Continue on separate	CONTRACTOR OF THE PERSON NAMED IN COLUMN 2 IS NOT THE PERSON NAMED				
VII. LEARNING AND DEVELOPMENT (L&))) INTERVENTIO	INCLUSIVE		ATTENDED	Type of LD		
30. TITLE OF LEARNING AND DEVELOPMENT INTER PROGRAMS (Wri	VENTIONS/TRAINING te in full)	ATTENI (mm/dc		NUMBER OF HOURS	(Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
Webinar: RA11313 Safe Space Act		12/10/2020		3 Hours		VSU-ISRDS	
Webinar ISO 9001:2015 Awareness/Re-awa	reness Webinar	11/27/2020		4 Hours		Ms. Elvira E. Ongy	
Orientation Workshop Among JO, Clerk & L		1/15/2019		8 Hours		Dr. Lourdes B. Cano	
Frontline Orientation Customer & Work Va	ues	Sept. 9, 2019		8 Hours		Dr. Lourdes B. Cano	
Target Setting Workshop (IPCR)		Aug. 20, 2018	Aug. 21, 2018	16 Hours		Dr. Lourdes B. Cano	
Orientation Basic Customer Service		Sept. 5, 2017		8 Hours		Dr. Lourdes B. Cano	
ISO Orientation and Writeshop		Sept. 21, 2015		8 Hours		Dr. Lourdes B. Cano	
Service Staff Training (OFW)		1991		5 Days		International Center Services Corp.	
Pre-departure Orienatation Seminar (OFW)	1991		4 Hours		OWWA, Manila, Philippines		
Training and Seminar At National Census Office		5/1/1985		5 days		NCSO Tacloban City	
	(0	Continue on separate	sheet if necessar	nr)			
VIII. OTHER INFORMATION						MEMBERSHIP IN	
31. SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC	(Write in full)	RECOGNITION		33. ASSOCIATION/ORGANIZATION (Write in full)	
Computer literate							
Typing	N/A					N/A	
Cooking					***************************************		
				-			
		Continue are a	above W				
		ontinue on separate	Sheet If necessal	y)			

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 appointed,						
.5	a. within the third degree?		YES NO				
	b. within the fourth degree (for Local Government Unit - Car	eer Employees)?	☐ YES ☐ NO				
	b. Wallit ale loard degree (ioi 2004 esterniteri eine		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				
			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		☑ YES □ NO				
	retirement, dropped from the rolls, dismissal, termination, e (abolition) in the public or private sector?	nd of term, finished contract or phased out	If YES, give details: resignation				
20	Have you ever been a candidate in a national or local ele	ection held within the last year (except					
38.	Barangay election)?	out their within the last year (except	☐ YES ☑ NO If YES, give details:				
		ha than a (2) are a than a significant than be look					
	b. Have you resigned from the government service during to election to promote/actively campaign for a national or local		☐ YES ☑ NO If YES, give details:				
			If TEO, give details.				
39.	Have you acquired the status of an immigrant or permanen	resident of another country?	YES NO				
			If YES, give details (country):				
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma	and Carta for Disabled Parsons (PA					
10.	7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972)						
a.	Are you a member of any indigenous group?		YES NO				
			If YES, please specify:				
b.	Are you a person with disability?		☐ YES ☑ NO				
c.	Ara you a cala paranta		If YES, please specify ID No: YES VO If YES, please specify ID No:				
	Are you a solo parent?						
-							
41.	REFERENCES (Person not related by consanguinity or affinity to applica	_					
	NAME	POSITION/ADDRESS	TEL. NO.				
NIC	K FREDDY R. BELLO	OIC, Accounting Office VSU, Baybay City	120				
MS	. SANDRA C. TIU	Administrative Assistant III	1				
-		Accounting Office, VSU, Baybay City					
L							
42	I declare under oath that I have personally accomplished						
	complete statement pursuant to the provisions of pertine Philippines. I authorize the agency head/authorized representations of pertine Philippines.	하이 보고 있는 것 같아. 나는 그 없는 그 전에 가는 아무리 하는 것이 없는 것이 없다.					
	agree that any misrepresentation made in this doc						
	administrative/criminal case/s against me.						
-	DOVERTIMENTE ISSUED TO (I.E.F.8/SSDOT, CSIS, SSS, FRC, DIIVER'S LICENSE, BIC.)		All Property and the second				
	PLEASE INDICATE ID Number: Philhealth 13-		May Manager St.				
ΙГ	POSO10572 0 Covernment Issued ID: Tax Identification Number	Janso 1	undervisiteristis				
H		/ CHIVAL					
	D/License/Passport No.: 926-679-694	oox)					
	oate/Place of Issuance: June 10, 2002	Right Thumbmark					
F	^ ?	CED AND					
	SUBSCRIBED AND SWORN to before me this	SEP 2021, affiant exhibiti	ng his/her validly issued government ID as indicated above.				
	Г	MI.					
	ATTY WYSHING GUNDOOR						
	1						
		th					
		Person Administering Oa					