## 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.

	TO FILLING OUT THE PERSONAL DATA SHI ( and use separate sheet if necessary. Indicate				M. 1. CS ID No.		(Do not fill up. Fo	or CSC use only)	
I. PERSONAL INFORMATIO									
2. SURNAME	TELERON					Market St. Co. Co. Co. Co. Co. Co. Co. Co. Co. Co			
FIRST NAME	MARINA ANGELA  NAME EXTENSION (JR., SR)								
MIDDLE NAME	MARTINEZ								
DATE OF BIRTH     (mm/dd/yyyy)	08/25/1997	16. CITIZENSHIP				Dual Citizenship			
4. PLACE OF BIRTH	ORMOC CITY, LEYTE	If holder of dual citizer	by birth Pls. indicate or			by naturalization country:			
5. SEX	Male Female	please indicate the details.  Phillippines			es			~	
6 CIVIL STATUS	✓ Single	17. RESIDENTIAL ADDRESS	RESIDENTIAL ADDRESS  House/Block/Lot No.			Street BARANGAY GUADALUPE			
7. HEIGHT (m)	1.55		Subdivision/Village BAYBAY CITY		9	Barangay LEYTE			
8. WEIGHT (kg)	50	ZIP CODE	City/Municipality			Province 6521			
9. BLOOD TYPE	A+	18. PERMANENT ADDRESS	232 House/Block/Lot No.		0	Street			
10. GSIS ID NO.	NA		FERDIE TAN SU		TAN SUBDIVISION E  division/Village				
11. PAG-IBIG ID NO.	121242967694			DRMOC CITY ity/Municipality		Barangay LEYTE Province			
12. PHILHEALTH NO.	NA NA	ZIP CODE	Спулнинарану			6541	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
13. SSS NO.	34-7974601-5	19. TELEPHONE NO.				NA			
14. TIN NO.	NA	20. MOBILE NO.	0917-881-3084						
15. AGENCY EMPLOYEE NO.	NA 21. E-MAIL ADDRESS (if any)			teleroni@yahoo.com					
II. FAMILY BACKGROUND	1								
22. SPOUSE'S SURNAME	NA NA	Luarie Evernolou (ID, on)	23. NAME of CHILDREN (Write full name and list all)			DATE OF BIRTH (mm/dd/yyyy)			
FIRST NAME	NA	NAME EXTENSION (JR., SR)	NA NA				NA		
MIDDLE NAME	NA		NA			NA			
OCCUPATION	NA		NA NA			NA			
EMPLOYER/BUSINESS NAME	NA		NA NA			NA			
BUSINESS ADDRESS	NA	NA			NA NA				
TELEPHONE NO.	NA			NA				NA	
24. FATHER'S SURNAME	TELERON		NA				NA		
FIRST NAME	EMMANUEL	NAME EXTENSION (JR., SR)	NA			NA ·			
MIDDLE NAME	MEDROSO		NA				NA		
25. MOTHER'S MAIDEN NAME		NA NA					NA		
SURNAME	MARTINEZ	NA NA				NA			
FIRST NAME	MICHELLE			NA NA					
MIDDLE NAME	TEMPLADO (Continue					on separate sheet if necessary)			
III. EDUCATIONAL BACKG	ROUND								
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGRI	EE/COURSE	PERIOD OF	ATTENDANCE	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS	
ELEMENTARY	ST. PAUL'S SCHOOL OF ORMOC FOUNDATION	BASIC EDUCATION (ELEMENTARY)		From <b>2004</b>	To <b>2010</b>	(ir not graduated)	2010	RECEIVED	
SECONDARY	INC. ST. PETER'S COLLEGE OF ORMOC	BASIC EDUCATION (HIGH SCHOOL		2010	2014	NA NA	2014	WITH HIGH	
VOCATIONAL /	N A	NA NA		NA NA	N A	NA NA	NA NA	HONORS	
TRADE COURSE  COLLEGE	VISAYAS STATE UNIV ERSITY	BACHELOR OF SCIENCE IN	CHEMISTRY	2014	2018	NA	2018	NA	
GRADUATE STUDIES	NA NA	NA NA		NA	NA	NA	NA	NA	
		Continue on separate sheet if ne	cessary)						
SIGNATURE	Them	DATE		FEB. 4, 2019		CS FORM 21:	2 (Revised 2017)	, Page 1 of 4	

. CIVIL <b>S</b> E	RVICE ELIGII	BILITY							
CAREE	R SERVICE/ RA 10 SPECIAL LAW	080 (BOARD/ BAR) UNDER VS/ CES/ CSEE	RATING	DATE OF EXAMINATION /	PLACE OF EXAMINA	TION / CONFER	MENT	LICENSE (if ap	pplicable)  Date of
BARANGAY ÉLIGIBILITY / DRIVER'S LICENSE		(If Applicable)	CONFERMENT				NUMBER	Validity	
CHEMIST'S LICENSE			75.05	OCT. 9-10, 2018	MA	NILA		0014118	8/25/2021
NON-PROFESSIONAL DRIVER'S LICENSE		NA	JAN. 24, 2019	ORMO		H03-19-000399	8/25/2023		
	XPERIENCE	d Stort from your room		ntinue on separate sheet if		J. W I. C			
INCLU	SIVE DATES	t. Start from your recent			le de la companya de	a Work Expe	SALARY/ JOB/ PAY		GOVT
From (mr	n/dd/yyyy) To	//yyyy) POSITION TITLE DEPARTMENT / AGENCY / OFFICE / COMPANY Mor (Write in full/Do not abbreviate) (Write in full/Do not abbreviate) SAI		MONTHLY SALARY	GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	SERVICE (Y/ N)		
1 14 2019	PRESENT	INSTRUCT	ORI		PURE AND APPLIED MISTRY	Php 22, 149	N/A	CONTRACTUAL	YES
SIGNA	TURE	Ω.	(Co	ntinue on separate sheet if	necessary) FEB 4, 2019		CS FORM	212 (Revised 2017), I	Page 2 of A
SIGNA	TORE	Than		DATE	FEB 4, 2019		CS FORM	212 (Revised 2017), I	Page 2 of 4

VI. VOLUNTARY WORK OR INVOLVEI				INTAKT URGAN	TION/S		
29. NAME & ADDRESS OF (Write in	ORGANIZATION fulf)	INCLUSIVE DATES (mm/dd/yyyy)  From To		NUMBER OF HOURS	POSITION / NATURE OF WORK		
NA		NA	NA	NA		NA	
		ontinue on sepa	rate cheet if no				
I. LEARNING AND DEVELOPMENT art from the most recent L&D/training program a	(L&D) INTERVENTIONS/TRAIN	ING PROGR	AMS ATTE	NDED	cutive/Manageri	ial positions)	
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)		INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
NA		From	To NA	NA NA	NA		
						NA	
OTHER INFORMATION	(Co	ontinue on separ	rate sheet if nec	essary)			
. SPECIAL SKILLS and HOBBIES	32. NON-	ACADEMIC DIST	TINCTIONS / RE	COGNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZAT	
GUITAR PLAYING	NA NA					INTEGRATED CHEMISTS OF THE PHILIPPINE	
SINGING	INTEGRATED.						
DANCING							
READING							
RUNNING							
		ntinue on separa	ate sheet if nece	ssary)			
SIGNATURE	Jan		DATE	F	EB 4, 2019	CS FORM 212 (Revised 2017), Page 3	

Marine Control				
34.	Are you related by consanguinity or affinity to the point chief of bureau or office or to the person who has immediate and or Department where you will be apppointed,			
	a. within the third degree?	YES V NO		
	b. within the fourth degree (for Local Government Unit - (	YES VO		
	· ·	If YES, give details:		
		II 1E3, give details.		
	- H			
35.	a. Have you ever been found guilty of any administrative	YES VO		
		If YES, give details:		
	b. Have you been criminally charged before any court?		YES V NO	
			If YES, give details:	
		Date Filed:		
			Status of Case/s:	
36.	Have you ever been convicted of any crime or violation of	f any law days a sydia area as a selection to		
30.	any court or tribunal?	arry raw, decree, ordinance or regulation by	YES VO	
	any obart of tribunar:		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		YES NO	
	(abolition) in the public or private sector?	, one of term, limished contract of phased out	If YES, give details:	
38.	a. Have you ever been a candidate in a national or local	election held within the last year (except	☐ YES ☑ NO	
	Barangay election)?		If YES, give details:	
	b. Have you resigned from the government service during	the three (3)-month period before the last	YES V NO	
	election to promote/actively campaign for a national or lo		If YES, give details:	
			11 1 LO, 9140 dotails.	
39.	Have you acquired the status of an immigrant or permanent	ent resident of another country?	☐ YES ☑ NO	
			If YES, give details (country):	
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) I	Magna Carta for Disabled Persons (RA		
	7277); and (c) Solo Parents Welfare Act of 2000 (RA 897			
a.	Are you a member of any indigenous group?			
	The year a member of any margerious group;		☐ YES ☑ NO If YES, please specify:	
b.	Are you a person with disability?			
	The year a person with disability:		☐ YES ☑ NO If YES, please specify ID No:	
C.	Are you a solo parent?		Market Ma	
	r no you a core parent.		☐ YES ☑ NO If YES, please specify ID No:	
			II 1 LS, please specify ID No.	
41.	REFERENCES (Person not related by consanguinity or affinity to applications)	ant /appointee)		
	NAME	ADDRESS	TEL. NO.	
		Abbiteo	TEL.NO.	
	FELIX M. SALAS	BAYBAY CITY, LEYTE	9392822794	
	CANDELARIO L. CALIBO	BAYBAY CITY, LEYTE	9176341486	
		DATE OF THE STATE	5175541400	(-3)
	JACOB GLENN F. JANSALIN	BAYBAY CITY, LEYTE	9267490881	
42.	I declare under oath that I have personally accomplished	I this Personal Data Sheet which is a true, co	rect and complete	
	statement pursuant to the provisions of pertinent laws	s, rules and regulations of the Republic of	the Philippines.	
	authorize the agency head / authorized representative	to verify/validate the contents stated herein.	I agree that any TELERON,	MARINA ANGELA M.
	misrepresentation made in this document and its attac	hments shall cause the filing of administrati	ve/criminal case/s	PHOTO
	against me.			
G	overnment Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)			
	LEASE INDICATE ID Number and Date of Issuance	Again		5-4
G	overnment Issued ID: Passport	V		
ID	/License/Passport No.: P4642338A	Signature (Sign inside the box		
		)		
Da	ate/Place of Issuance: Oct. 20, 2017/Tacloban city, Leyte	Rig	ht Thumbmark	
		Date Accomplished		
	SUBSCRIBED AND SWORN to before me this	FEB 1 2 2019 , affiant exhibiti	ng his/her validly issued government ID as	s indicated above.
	г			
	1	NI		
	1	Main		
	1	ATTY, RYSAN C. GUIN	COR	
		V Sterlson Administering Sath		
	l l	University Cutt		

## **WORK EXPERIENCE SHEET**

Instructions: 1. Include only the work experiences relevant to the position being applied for.

2. The duration should include start and finish dates, if known, month in abbreviated form, if known, and year in full. For the current position, use the word Present, e.g., 1998-Present. Work experience should be listed starting with the most recent/present employment

## Sample: If applying to Supervising Administrative Officer

- Duration: February 11, 2011 present
- Position: Human Resource Management Officer III
- Name of Office/Unit: Finance and Administrative Service
- Immediate Supervisor: Maria Estrada
- Name of Agency/Organization and Location: Department of Human Resources, Metro Manila
  - List of Accomplishments and Contributions (if any)
    - Developed recruitment plan
    - Designed training program for retirees under EO 366
  - Summary of Actual Duties
    - Responsible for the management of the recruitment and selection process and the coordination of training activities of the Department; provides assistance in the management of the Division's programs and activities and performs other related functions.
- Duration: January 14, 2019 to present
- Position: Instructor I
- Name of Office/Unit: Department of Pure and Applied Chemistry
- Immediate Supervisor: Jacob Glenn F. Jansalin
- Name of Agency/Organization and Location: Visayas State University, Baybay City
  - List of Accomplishments and Contributions (if any)
     On-going
  - Summary of Actual Duties

Teaches assigned subjects and performs other teaching related functions, among others.

(Signature over Printed Name of Employee/Applicant)

Date: 2|4|