CS Form No. 212 Revised 2017	PERSON	NAL DATA	A SH	IEET	\$		
WARNING: Any misraprosontat	tion made in the Personal Data Sheet and the W				minal case/s agai	nst the perso	on
concerned.	TO FILLING OUT THE PERSONAL DATA SHEE				iui vasers aydi	are perso	
	( and use separate sheet if necessary. Indicate N/			1. CS ID No.		(Do not fill up. F	or CSC use only
I. PERSONAL INFORMATIO							
2. SURNAME	CAORTE				In the extension (10	000 4844	
FIRST NAME	CNDIGNE				NAME EXTENSION (JR	R., SR) PA.	
MIDDLE NAME	BSTREMOS						
DATE OF BIRTH     (mm/dd/yyyy)	08 - 02 - 68	16. CITIZENSHIP		Filipino	Dual Citizenship	by natural	lization
4. PLACE OF BIRTH	ALBUERA, LEYTE	If holder of dual citizer			Pls. indicate co	ountry:	izauon
5. SEX	Male Female	please indicate the de	etails.	Philippines			Y
6 CIVIL STATUS	Single Married Widowed Separated Other/s:	17. RESIDENTIAL ADDRESS		ouse/Block/Lot No.  PPK • OK PA ubdivision/Village	· , BR6	Street  Y Zon 6 VO  Barangay	AN
7. HEIGHT (m)	163 cm.				uty	WYTS Province	
8. WEIGHT (kg)	72.5 kgc.	ZIP CODE		65	41		
9. BLOOD TYPE	0"	18. PERMANENT ADDRESS	Но	ouse/Block/Lot No.		Street	
10. GSIS ID NO.	000-6106-5421-5		S	PRK. OKPA ubdivision/Village	, 13M6Y.	Rarangay	7
11. PAG-IBIG ID NO.	121062603037			ORMOC, CIT	ry .	Barangay TF	
12. PHILHEALTH NO.	13-050024648-1	ZIP CODE		City/Municipality 65	각1	Province	
13. SSS NO.	06-1065421-5	19. TELEPHONE NO.			195		1-7, - 5
14. TIN NO.	165-945-346	20. MOBILE NO.		193637	21094		
45 AOTNOVENDLOVET NO	1,201		09363221094 NONE				
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)		(40)48			
II. FAMILY BACKGROUND  22. SPOUSE'S SURNAME	CAORTE		23 NAME OF C	HILDREN (Write full name and	d list all\	DATE OF BID	TH (mm/dd/yyyy
FIRST NAME	PERLA	NAME EXTENSION (JR., SR)		NIND P. CI			0-2002
MIDDLE NAME	PEPITO		3070	10 INO 1 CA	10110	0, ,	0 2002
OCCUPATION	HOUSE WIFE						
EMPLOYER/BUSINESS NAME	N/A						
BUSINESS ADDRESS	N/A	,					
TELEPHONE NO.	N/A						
24. FATHER'S SURNAME	CAOPTE						
FIRST NAME	ENDIONB	NAME EXTENSION (JR., SR)			7.		***************************************
MIDDLE NAME	CALABIA						
25. MOTHER'S MAIDEN NAME SURNAME	BSTRAMOS						
FIRST NAME	VISITACION						
MIDDLE NAME				(Continue on se	parate sheet if neces	sary)	
III. EDUCATIONAL BACKE	ROUND						
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGRE (Write in full)	EE/COURSE	PERIOD OF ATTENDANCE	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	
ELEMENTARY	ALBUTRA CENTRAL SOIL.			From To	, g. washing	1980	RECEIVED
SECONDARY	ALBUERA PRIVATE					1985	
VOCATIONAL /	ITION SOMOOL					1 103	
TRADE COURSE	VISAYAS STATE COllege	BACHBLOK OF S	CIENCE		84 units	( )h lima	6 Tarbuots
COLLEGE	VISAYAS STATE COllege GF AGHICULTURE	IN FORESTRY			of units	Minesto	1, , , , ,
GRADUATE STUDIES	ICC	ontinue on separate sheet if nece	ssary)				
SIGNATURE	1	DATE		-01-2019	CS FORM 212	2 (Revised 2017)	, Page 1 of 4
	'	1.0					- VI 5.25 S.

	RVICE ELIG						) · . :	<b>A</b>	LICENSE (if ap	nlicable
7. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE (If Applicable) (If Applicable)			EXAMINATION /	DATE OF EXAMINATION / CONFERMENT				Date of		
BARA	NGAY ELIGIBILI	TY / DRIVE	R'S LICENSE	(ii Applicable)	CONFERMENT				NUMBER	Validity
								yi.		
									10 x	
-										
				(Co	ntinue on separate sheet it	necessary)				
	PERIENCE e employme	nt. Start	from your recei	nt work) Descriptio	on of duties should be	indicated in the attach	ed Work Ex	perience she	ot.	
	VE DATES dd/yyyy)		POSITION T			NCY / OFFICE / COMPANY	MONTHLY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP	STATUS OF	GOV'T SERVICE
From	То		(Write in full/Do not	abbreviate)	(Write in full/	Oo not abbreviate)	SALARY	(Format *00-0*)/ INCREMENT	APPOINTMENT	(Y/N)
7-02-18	PRESENT	5	BCUPITY G	uappo 1	VSU , BAYR	AY, CITY	12,413		CASUAL	Y 83
2-09-08	07-01-1	8 51	SCURITY (	GUARD 1	VSW, BAYE	bay, city	7,200		J.0	YES
	02-08-	-	SECURITY			BCUIRITY AGONCY	7,000	-	PERMANE	TNE
	6 05-25-		security			cupity AGONCY	11,000		PERMANENT	
/	03-01-			GUARD		CUPITY AGENCY	1		PERMANTH	-
7			SECURIC			SECURITY AGA		100		-
-30-97	09-30-	77	SECONDITU	(-c1440 V)	1		1	1	PERMANTEN	
2-15-97	. 04-30	97	SECURITY	6001PD	MUK! 500	WRITY AGOVOY	3,500		PERMANENT	NC
								1		
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				(0	Continue on separate sheet	if necessary)				
THE RESERVE TO SHARE THE PARTY OF THE PARTY			1	ч	DATE	04-01-201	9	CS EOPM	1 212 (Revised 2017),	Page 2 of

. VOLUNTARY WORK OR INVOLVEMENT IN CIVI	C/NON-GOVERNMENT/			ANIZATION.		
9. NAME & ADDRESS OF ORGANIZ (Write in full)	ATION	(mm/d	IVE DATES (dd/yyyy)	NUMBER OF HOURS		POSITION / NATURE OF WORK
PH DETA KAPPA FRATOR	198S	PRESENT			Mamber	
KABAUKAT CIVICOM	2010	6 KARSAN	r		MONNER	
GUARDIANS - VSU CHAPTE	2010	PRESEN	Т		MEMBER	
III. LEARNING AND DEVELOPMENT (L&D) INTER	RVENTIONS/TRAINING PRO		ENDED		agerial positions)	
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENT (Write in full)	IONS/TRAINING PROGRAMS	ATTEN	/E DATES OF NDANCE /dd/yyyy)	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
PETERSHER TRAINING FOR SE	CUPITY GUARD		08 VEC-10	2018 64	TECH	INO TRAINING CENTER BROY
Merist					The second	DOVA PEUSA MEJIA ORMU
,	•					वास .
FIVE FIGHTING AND RESCHE			OR HOV.19		-	REP/ODA HRD/ SSO
ENTROPHCY PROPER STULL		MARCA IV	2018 03-1	14-12 40	TECH	849/00A HAD/550
HIRE PENEMTION SOMINER AND INCIDENT PE BY THE RIVERSU OF FIRE	SPEASE COMPACES	63-27	1/18	g	TECH	BEP / OND APP / SSO
RE-ORIENTATION SEMINAR FOR	ir stummy	09-04-1	18	8	TECH	SUALTY ASSURANCE CENTER
TIRE PREVENTION SEMMER	(8¢b)	09-21-1	2	8	TECH	BEP/ODA HRD/556
HARASSMONT OPERNTATION FO		M-17-		8	TROH	ODA/IHRD/SSO
STRUICE PROVIDERS.						
		-				
	× 1			329		
						2/11/2
						\(\frac{1}{2} \) \(\fra
			-			
				7.1		
	(Co	ontinue on separate	sheet if necessary	)		
VIII. OTHER INFORMATION	NC	CARDEMIC DIST	TONE I BECOX			MEMBERSHIP IN ASSOCIATION/ORGANIZATION
31. SPECIAL SKILLS and HOBBIES 32.			rite in full)			33. (Write in full)
	SPETIFICATO OF			6FP) 131	pybay o	
	H OCTOBBY					PERSONNEL ASSOCIA
	briticate of				CUMSCIONS	inest (Ad Par)
	COMMEMBATION FOR HAVING ACTIVITY PARTICIPATED					y
· ·	IN FIRE PROVENTION FOR HAVING ACTIVITY PORTICIP					
	N FIRE OUMDI	RECOGNITURN FOR SELFLESS AND				
	outherno Bello	MIMA on separate	SAR Tine Sar	901 10	٥.	
SIGNATURE	22	A Maria	ASS TORK	1	DATE	04-01-2019

Are you related by consanguinity or affinity to the	nting or recommending authority, or to the	
chief of bureau or office or to the person who has imme	ediate supervision over you in the Office,	L
bureau or Department where you will be apppointed,		
a. within the third degree?		YES NO
b. within the fourth degree (for Local Government Unit	Career Employees)?	
		If YES, give details:
35. a. Have you ever been found guilty of any administrativ	o officers 2	
So The year over booth found guilty of any administrative	e oliense /	YES NO
		If YES, give details:
h Harayay baar atatati ita		
b. Have you been criminally charged before any court?		YES NO
		If YES, give details:
		Date Filed:
Brown to purpose the second of		Status of Case/s:
36. Have you ever been convicted of any crime or violation	of any law, decree, ordinance or regulation by	У Пус
any court or tribunal?		LI IES Z NO
		If YES, give details:
37. Have you ever been separated from the service in any continuous service service in any continuous service serv	f the following modes: resignation,	YES NO
retirement, dropped from the rolls, dismissal, termination	, end of term, finished contract or phased out	t If YES, give details:
(abolition) in the public or private sector?		
38. a. Have you ever been a candidate in a national or local	election held within the last year (except	T YES NO
Barangay election)?		YES NO
h Have you maigned from the	and the second	
b. Have you resigned from the government service during	g the three (3)-month period before the last	YES NO
election to promote/actively campaign for a national or lo		If YES, give details:
39. Have you acquired the status of an immigrant or perman	ent resident of another country?	
		YES NO
		If YES, give details (country):
40. Purguant to: (a) Indigenous Beauty A + (DA 0074) (IV)		
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 89)	2), please answer the following items:	
a. Are you a member of any indigenous group?	and the second s	YES NO
b. Are you a person with disability?		If YES, please specify:
Are you a person with disability?	• • • • • • • • • • • • • • • • • • •	YES NO
Are you a solo parent?		If YES, please specify ID No:
Are you a solo parent?		YES NO
		If YES, please specify ID No:
41. REFERENCES (Person not related by consanguinity or affinity to applica	nt (annointee)	
	m reposites)	
NAME	ADDRESS	TEL. NO.
MRS. CHERYL BATUCAN	BRGY. LILO-AN, ORMOC.C	TY
MR. ROMBO CALABIA	LAWIS, ALBUBRA, LOYT	
MR. SALDY PITOGO	2017 1112 11 22 12	
	BRGY. LILO-AN, ORMSe a	ity
12. I declare under oath that I have personally accomplish	ed this Personal Data Sheet which is a tr	
complete statement pursuant to the provisions of per	inent laws rules and regulations of the D	Depublic of the
i implifies. I authorize the agency nead/authorized repre	sentative to verify/validate the contents states	d harrin
agree that any misrepresentation made in this doc	rument and its attachments shall cause	the filing of
administrative/criminal case/s against me.	Annual Control of the	
	Mark Control of the C	
Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)		
PLEASE INDICATE ID Number and Date of Issuance	1~	
Government Issued ID: 6515		
ID/License/Passport No.: 000 - 6106 - 5421-9		
	Signature (Sign inside the box	
Date/Place of Issuance: MAASIN CITY	JAHWARY 04, 2019	
1.112	Date Accomplished	Right Thumbmark
SUBSCRIBED AND SWORN to before me this	3 1 2 2019 affiant exhibiting	
SUBSCRIBED AND SWORN to before me this	, affiant exhibiting	his/her validly issued government ID as indicated above.
		6
	MI	
	Mari	· · · · · · · · · · · · · · · · · · ·
	ATTY RYSAN C. GUINOCO	np l
	VSU LEGISA AGRIFICETING Oath	
		N. C.