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. 1. CS ID No. (Do not fill up. For CSC use only Print legibly. Tick appropriate boxes (  $\square$  and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. 2. SURNAME BAGARINAD NAME EXTENSION (JR., SR) FIRST NAME ALEX MIDDLE NAME POSAS 3. DATE OF BIRTH 16. CITIZENSHIP 7 Filipino Dual Citizenship (mm/dd/yyyy) 12/18/1961 □ by birt by naturalization BRGY. WARLOS BAYBAY CITY 4. PLACE OF BIRTH If holder of dual citizenship, Pls. indicate country: please indicate the details. • 5. SEX Single Married 17. RESIDENTIAL ADDRESS 6 CIVIL STATUS ☐ Widowed Separated House/Block/Lot No. Street BRGY MARCOS Other/s: Subdivision/Village Barangay BAY BAY CITY LEYTE 7. HEIGHT (m) 165 CM City/Municipality Province ZIP CODE 8. WEIGHT (kg) 70 KLS NONE 18. PERMANENT ADDRESS 9. BLOOD TYPE \* 0" House/Block/Lot No. Street BRGY MARCOS 10. GSIS ID NO. 3877 287 Barangay Subdivision/Village LEYTE BAY BAY CITY 11. PAG-IBIG ID NO 170000241483 City/Municipality Province ZIP CODE 12. PHILHEALTH NO. 13-000055900-9 6521 13. SSS NO. 19. TELEPHONE NO. 335 - 2623 NONE 14. TIN NO. 20. MOBILE NO. 114-622-901 09247907444 15. AGENCY EMPLOYEE NO 21. E-MAIL ADDRESS (if any) 00-024 NONE 23. NAME of CHILDREN (Write full name and list all) 22 SPOUSE'S SURNAME BAGARINAO DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) FIRST NAME MERCEDES 1. BAGARINAO, ALMER D. Dec. 23, 1989 MIDDLE NAME DUPAL 2. BAGARINAO, MERLYU D. Mar. 30, 1988 OCCUPATION HOUSE KEEPER Mar. 27, 1989 3. BAGARINAO, ALEX JR. D EMPLOYER/BUSINESS NAME NONE BUSINESS ADDRESS HONE TELEPHONE NO. HONE 24. FATHER'S SURNAME BAGARINAO NAME EXTENSION (JR., SR) FIRST NAME ROBERTO MIDDLE NAME SORIA 25. MOTHER'S MAIDEN NAME SURNAME BAGA RINAO FIRST NAME ASUN CION MIDDLE NAME POSAS (Continue on separate sheet if necessary SCHOLARSHIP HIGHEST LEVEL/ 26 NAME OF SCHOOL PERIOD OF ATTENDANCE BASIC EDUCATION/DEGREE/COURSE YEAR **ACADEMIC** LEVEL UNITS EARNED GRADUATED HONORS (Write in full) (if not graduated) RECEIVED From To BIGH. SAN AGUSTIN BAYBAY ELEMENTARY 1948 NONE 1948 ELEMENTARY 1974 GRADUATED CITY , LEYTE MDER UNDER SECONDARY HIGH SCHOOL, FIRST YEAR 1978 BAYBAY HIGH SCHOOL NONE GRADUATE GRADUME NONE TRADE COURSE COLLEGE NONE **GRADUATE STUDIES** NONE SIGNATURE DATE CS FORM 212 (Revised 2017), Page 1 of 4

Control of the Party of the Par	SERVICE/ RA 1080	RECORD AND ADMINISTRATION OF THE PARTY OF TH	PATING	DATE OF				LICENSE (if ap	n, rable)
7. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE  NONE  NONE					TION / CONFERMENT		NUMBER	Date of Validity	
			NOWE	NONE			NONE	MOM	
							-		
	one coming to the last of the last of		(Co	ntinue on separate shee	t if necessary)				
( MOTER E) notate prova	(PERIENCE te emolovm <b>e</b> nt	Start from your recei	ut work) Descriptio	on of duties should	be indicated in the attach	ed Work Fix	perlence sheet.		
B. INCLUS	INCLUSIVE DATES (mm/dd/yyyy)  POSITION TITLE (Write in full/Do not abbreviate)		DEPARTMENT / AGENCY / OFFICE / COMPANY M		MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable) & STEP (Format *00-0*)/	STATUS OF APPOINTMENT	GOVT SERVICE (Y/N)	
From	То	(							-
11/2017	PRESENT	Adm. Aide	N.		Isu Nort.		121,908	ρ.	
1/1/2014	12/31/2014	Adm. Aide	1		vsu Nat.			P	-
2/2/20K	12/31/2018	Adm. Aide 4		\	ICU NOH.		116,100	þ	-
1/1/2014	2/1/201	Adm. Ajdr	2 1		VSU Nat.			С	-
7/1/2013	12/31/2013	Adm. Aidic	. 1		KIN hat			C	-
1/1/2011	6/30/2013	Adm. Aide	1	WU NOT.			344-32	С	
1/1/2010	12/31/2010	Adm. Aide 1		WW Wat.			311 191	С	
7 1 2008	6 20 2008	Adm. Aide 1		KU NOT.			249.50	С	
7/1/2007	6/20/2002	Adm. Aide 1		was wat.			254.09	С	
3/1/2004	6/30/2007				LEU NOT.			c	
11/2004	2 29 2004				ren not.		231.00	С	
+ 11/2001	12 31 2003			-	visca nat.		231.00	C	
1/1/2000	6 30 2001	Adm. Aide 1		Vis CA NOt.			220.00	c	
7/1/1999	, ,	Utility Aud wo	rker 1		vicca Not.		200.00	c	
1/1/1999	4 /30/1999			Visch Not.			200.00	С	
7 1 1998				Visca Not.			200.00	c	
1/1/1998	4/30/1998	Utility wo			Vis CA NOT.		200.00	C	
1/1/1997	12/31/1997	laborer 1			visca Not.		200 -00	c	
					Visch Not		200.00	С	
7/1/1994	4/30/1946	12/31/1994 Laborer 1		1	VICA NOT.		200.00	c	1
1/1/1994		Volveto			7, 9,				
1/1/1995	12/31/1997	labore	er l		baloaren NC+.		172.79	c	
	12/31/1994			vioca Nat-			127.26	С	
1/1/1994		TWO.	,						
01/01/199	1	Laborer	- 1		Visca Not.		90.90	c	
1/1/1992	12/31/1993	Labor			VISCA NOT.		90.90	c	
	1				Visca Not.		14.95	c	
1 1 1983	1.	Lahore			VISCA NOT.		14.95	C	
7111482	9 3/1109	VIII.		Continue on separate sh			<del></del>		
CICN	ATURE		N	DATE	E		CS FORM	212 (Revised 2017	), Page 2 of

M. VGLGATARY WORK OR INVOLVEMENT	IN CL NON-GO			OLUNTARY O	RG YATIOI	VS	
29. NAME & ADDRESS OF ORGANIZATION (Write in full)		INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK		
	From	То					
иоре		NONE	поне	NOHE		NONE	
	4						
			aparate sheet if ne				
VIL. LEARNING AND DEVELOPMENT (L&D) Start from the most recent L&D/training program and inclu-					hiefExecutive/Mar	er del profforsi	
30. TITLE OF LEARNING AND DEVELOPMENT INTE		INCLUSIV ATTE	E DATES OF NDANCE dd/yyyy)	NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
1. Seminar on Fire Prevent	rion		3/30/2012	8 hours		security office	
2. Certificate of Partici			3/13/2013	8 hours		Department of Friendy	
						7 (10.09)	
	-						
				E STREET		.S. #4154 . #5-4 11	
1. 1							
271							
Name of the second							
*							
					1. W. 1842		
		(Continue on co	parate sheet if nec	accand)			
VIII. OTHER INFORMATION		Continue on se,	arate sireet ii nee				
	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)  33. MEMBERSHIP IN ASSOCIATION/ORG					33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
1. Playing Basketball	1-		100				
2. Driving	2000	Thomas The No. 2004				-	
						,	

34.	Are you related by consanguinity or affinity to the oppointing chief of bureau or office or to the person who have immediate					
	Bureau or Department where you will be apppointed,					
	a. within the third degree?	YES NO				
	b. within the fourth degree (for Local Government Unit - Car	YES NO				
			If YES, give details:			
35.	a. Have you ever been found guilty of any administrative of	☐ 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	☐ YES 🖫 NO				
	by any court or tribunal?	•	If YES, give details:			
37.	,		☐ YES ■ NO			
	retirement, dropped from the rolls, dismissal, termination, e out (abolition) in the public or private sector?	If YES, give details:				
38.	a. Have you ever been a candidate in a national or local ele	☐ YES 💆 NO				
	Barangay election)?		If YES, give details:			
	b. Have you resigned from the government service during to		☐ YES 🖫 NO			
	election to promote/actively campaign for a national or local		If YES, give details:			
39.	Have you acquired the status of an immigrant or permanen	t resident of another country?	☐ YES ■ NO			
			If YES, give details (country):			
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma	gna Carta for Disabled Persons (RA				
	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.	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 /appointee)				
	NAME .	ADDRESS	TEL. NO.			
P	OSAL, OSCAR B.	Bryy. Marcos Baybay City,	MONE			
P	OSAS, MANUEL B	Brgy. Marcos Bayloay City,	NONE			
	03/13, 1.7/1002 0	Ceyfe	1010			
42.	I declare under oath that I have personally accomplishe	d this Personal Data Sheet which is a	true correct and			
	complete statement pursuant to the provisions of pertin	nent laws, rules and regulations of the	Republic of the			
	Philippines. I authorize the agency head / authorized repagree that any misrepresentation made in this doc					
	administrative/criminal case/s against me.					
<u></u>	overnment Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)					
	LEASE INDICATE ID Number and Date of Issuance					
G	overnment Issued ID:	H				
IC	/License/Passport No.:	x)				
D	ate/Place of Issuance:	4 - 27 - 2014 Date Accomplished	Right Thumbmark			
- 20	SUBSCRIRED AND SWORN to before me this	V 0 2 2047				
	SUBSCRIBED AND SWORN to before me this	y 0 2 2017 , affiant exhibiting	his/her validly issued government ID as indicated above.			
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	A	COR				
	<u>L</u>					
	IBP IBP	TOOL VI TO THE TOTAL PIECE	-1/12/17 CS FORM 212 (Revised 2017), Page 4 of 4			
	MC	LE COMP. NO. V-OOD 2280-0	7/20/15			

ROLL OF ATTORNEYS NO. 57467