CS Form No. 212 Revised 2017

PERSONAL DATA SHEET

WARNING: Any misinterpretation 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 SHEE () and use separate sheet if necessary. Indicate N			PDS FORM	1. CS ID No		(Do not fill up.	For CSC use only
	<u> </u>							
2. SURNAME	AURE					NAME EXTENSION (J	R SRI	
FIRST NAME	CALEXTRO					N/A		
MIDDLE NAME	OLLAVE	_						
DATE OF BIRTH (mm/dd/yyyy)		16. CITIZENSHIP		☑ Filip	oino [Dual Citizenship		
	05-02-1958					by birth	by natural	ization
4. PLACE OF BIRTH	BAYBAY CITY , USYTE	If holder of dual citize	100 mar - 100 ma			Pls. indicate of	country:	
5. SEX	☑ Male ☐ Female	please indicate the d	letails.					~
6 CIVIL STATUS	☐ Single ☑ Married	17. RESIDENTIAL ADDRESS	U.	ouse/Block/Lot	No		Street	
	☐ Widowed ☐ Separated ☐ Other/s:	5 (1994) 587 - 377 (1994) 1992 - 1997 - 1995					GABAS Barangay	3
7. HEIGHT (m)	-1-1		S	BAYBA	OF CITY	1		
8. WEIGHT (kg)	5'8"	ZIP CODE		City/Municipalit	У		Province	
T TRAVEL	90 kgs.	18. PERMANENT ADDRESS	tertine B 40	6521	ي وي دور داري	VIII	41.2	GHO
9. BLOOD TYPE	A'	16. PERMANENT ADDRESS	Но	use/Block/Lot	No.		Street	
10. GSIS ID NO.	3899836	JULY AND NEW	St	ubdivision/Villa	ge		GABAS Barangay	>
11. PAG-IBIG ID NO.	1700-0038-0403	3. A State Add		BAY BA	Y CIT	Υ,	LEYTE	normal in
12. PHILHEALTH NO.	TIERE I AU	ZIP CODE		To some			Flownice	
13. SSS NO.	13.05000 8336.1	19. TELEPHONE NO.		0521				
X III WARRE	03-4956103-5	1 N. 18 - N. 19	Ju 30	563-	1328			
14. TIN NO.	915 - 326 - 533	20. MOBILE NO.		4	0917.	534 - 4570		اسامي
15. AGENCY EMPLOYEE NO.	v-00054	21. E-MAIL ADDRESS (if any)		File	Collecto	o orune gyal	nos con	men.
TE PARTLY BACKGROUND								
22. SPOUSE'S SURNAME	NAPOLES TO A	Catal axia	23. NAME of Ch	HILDREN (Wri	te full name an	d list all)	DATE OF BIR	TH (mm/dd/yyyy)
FIRST NAME	IMELDA	NAME EXTENSION (JR., SR)	NEKK	1 ME	NAPOL	ES AURE	12.02.	1990
MIDDLE NAME	MARQUET	LANGERSON TO A	NOREE	N KKY	E NAPO	LES AURE	12-21-	1993
OCCUPATION	TEACHING	ACTAIL	a 200 Apr	12 天	Adjama	ANCIA YORK	SO SO SO	dept.
EMPLOYER/BUSINESS NAME	DEP. ED. / GABAS INTEG	RATED SCHOOL	w HC	IA JUIL	Afterd	MONCOLL	lan kunul	ni H
BUSINESS ADDRESS	BRGY GABAS, BAYBAY	CITY, LEYTE					La kan	man III
TELEPHONE NO.	563 - 1995	n Mark Frau				4.		
24. FATHER'S SURNAME	AURE	य हाराव , भारती					and to one	
FIRST NAME	JUAN	NAME EXTENSION (JR., SR)		Transfer .	राज अवस	- 393	18	0.10
MIDDLE NAME	SANCHEI			1-1-	These of the	- III Mari	Ole world	
25. MOTHER'S MAIDEN NAME	OLLAYE .			2	d- 40	MIG	189 80%	0,80%.
SURNAME	AURE							
FIRST NAME	MELANIA							
MIDDLE NAME	SILAO			(0	ontinue on se	parate sheet if neces	sary)	
	COUND					1		
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGRE	E/COURSE	PERIOD OF	ATTENDANCE	HIGHEST LEVEL/ UNITS EARNED	YEAR	SCHOLARSHIP/ ACADEMIC HONORS
	(Wite it foll)	(Write in full)		From	То	(if not graduated)	GRADUATED	RECEIVED
ELEMENTARY	GARAS COMMUNITY SCHOOL						1071	N/A
SECONDARY	YISAYAS STATE COLLEGE	PRIMARY FOU	CATION	1967	1971	GRADUATED	1971	N/A
VOCATIONAL /	OF AGRICULTURE	HIGH SCHOOL		1971	1976	GRADUATED	1976	N/A
TRADE COURSE	N/A	N/A		N/X	NA	N/A	NK	N/A
COLLEGE		1/1		1	111.	· ,		111.
GRADUATE STUDIES	IV/A	N/A		N/A	N/A	N/A	N/A	N/A
GIVID GIODIES	I N/A	ontinue on separate sheet if nace	ssarvi	IN/A	N/A	I N/A	N/A	N/A
SIGNATURE		Similar on Separate Sheet it 1808	- stery)	D	ATE			
C. STATUME	N					04 25 CS		d 2017), Page 1 of 4

. CAREE	R SERVICE/ RA 10	080 (BOARD/ BAR) UNDER		DATE OF				LICENSE (if ap	plicable)
SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE		RATING (If Applicable)	EXAMINATION / CONFERMENT	TION / CONFER	MENT	NUMBER	Date o		
N/A		N/A	N/x			N/A	N/		
						\$480 pt			
ichi le priva	(PERIENCE is emillovinen SIVE DATES	(Start from your recent		ntinue on separate sheet if		Work Exact	SALARYI JOBI PAY		
	n/dd/yyyy)	POSITION TI (Write in full/Do not a			NCY / OFFICE / COMPANY Do not abbreviate)	MONTHLY SALARY	GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV SERVIO (Y/ N
161/2017	PRESENT	ADANHISTBATUE	AIDE III	- NATI		11.795	la Bri	PERMANENT	Y
5/17/2014	12/31/2016	ADAMINISTRATIVE	AIDE III	- NKT	odal Te university	11 298	A	PERMANENT	- у
577	<35	ADMINISTRATION	AL	VIGAVAS ST	CTE UNIVERSITY	11.193		PERMANENT	· y
		ADMINISTRATIVI			ete unnersity	10716		PERMANENT	, y
		ADMINISTRATIVE			COLAL CHINEKSHY	9 876		DESMANEN	
		ADMINISTRATIUS			CHE CHIVERSITY	9142		PERMANENT	
017 2010	06/23/2010	ADVAINISTRATIVE	MOEII		CONAL ATE CONDERGITY	8409		PERMANENT	· y
7 101120009	Q5/16/2010	ADMINISTRATIVE	ADEIII	- NAT		8243		PERMANE	ТУ
50 -SO	La Francis	APMINISTRATIV	ALEXANTER.		ONAL UNIDERSITY	7489	J. 34	PERMANS	
F2		ADMINISTRATIVE			ie unnereny	6808	-262	PERMANENT	. 7
		ADMINISTRATIVE		LEYTE STATE	ie unnerging	6039		PERMANEN	- >
1	11 80 2004	PRIVER		LEYTE STAT	e unnersity	6039		PERMANEN	. ,
1 01/2004	05/14/2004	DRIVER I		LEYTE STATE		8235		CASUAL	У
101/2003	R 31 12003	PRIVER I		-NATIO		8235	426	CASUAL	>
	12/31/2002	DRIVER I		LEYTE STATE	N/AL	8235		CASUAL	_ >
8 101 2002	আহ্ন	DRIVER) TAY -	DNAL	8235		CASUAL	7
	3 / 43 14		-1						15
1 11	M GEING								-3 6
	4 ×								
	TURE		A (Co	ontinue on separate sheet i	(necessary) DATE		125 /20		

	NAME & ADDRESS OF ORGANIZATION (Write in full) INCLUSIVE DATES (mm/dd/yyyy) From To			NUMBER OF HOURS	POSITION / NATURE OF WORK		
N/A		N/A	N/A	N/A	N	/A	
				The state of the s	/		
		- 100	1				
· I est	Account to the second						
			-				
	The state of the s	COMPANY DESCRIPTION OF SUCCESSION	sheel if necessary				
LEARNING AND DEVELOPMENT (LSD)	NTERVENTIONS/TRAINING PRI de only the roll vent L&D Conting Taken of	APPEAR TO BE FOR THE REAL PROPERTY.		iet/Executive/Mem	igeliai positionsi		
TITLE OF LEARNING AND DEVELOPMENT INTO		ATTE	VE DATES OF	NUMBER OF HOURS	Type of LD (Managerial/	CONDUCTED/ SPONSORED BY	
(Write in ful)	From	/dd/yyyy)		Supervisory/ Technical/etc)	(Write in full)	
AINFORESTATION ORIENTATI	an and cross	11-21	11-23-201	24	TECHNICAL	ITEEM - VSJ	
	(A) TEATOR	08-08	08-11-201		TECHNICAL	ITESAN - VSU	
RELIVING ON RAINFOR ARALEGAL TRAINING ON P	D 705 AND OTHER	03-07	03 - 08 24		TECHNICAL	BROY. TUROD, SUAGO, SOUTHERN LETTE	
RELATED LAWS ASIC ORIENTATION ON THE	to hollylada 3h		09-12 201		TECHNICAL	SILAGO BOJITERN UDJE	
MACHAL	NGACO ON ON	0-12-18			TICATION OF THE	SINGLY, SICH WAS SUPER	
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	700	Laure de	W.A.			بالديد عدو	
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	(Co	ntinue on separat	e sheet if necessary	1			
ESTHER INFORMATION	T NO	N-ACADEMIC DIS	TINCTIONS / RECO	GNITION		MEMBERSHIP IN ASSOCIATION/ORGANIZATI	
11. SPECIAL SKILLS and HOBBIES	32.		/rite in full)			33. (Write in full)	
COOKING GARDENING							
		X¥		11.60	382103		
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	T & ALKADA	ontinue on separ	ate sheet if necessi	TIAL	DATE	04 25 2017	
			The second secon		The second second second	CS FORM 212 (Revised 2017), P	

34. Are you related by consanguinity or affinity to the apprehief of bureau or office or to the person who has imm. Bureau or Department where you will be approinted,	를 보면 있다면 생물로 있었다. [18] 전 10 전 12					
a. within the third degree? b. within the fourth degree (for Local Government United Section 1).	☐ YES ☑ NO ☐ YES ☑ NO If YES, give details:					
35. a. Have you ever been found guilty of any administrat	☐ 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 violatic any court or tribunal?	☐ YES ☑ NO If YES, give details:					
37. Have you ever been separated from the service in an retirement, dropped from the rolls, dismissal, terminat (abolition) in the public or private sector?		YES NO NO If YES, give details:				
38. a. Have you ever been a candidate in a national or lo Barangay election)?	☐ YES ☑ NO If YES, give details:					
b. Have you resigned from the government service du election to promote/actively campaign for a national of	☐ YES ☑ NO If YES, give details:					
39. Have you acquired the status of an immigrant or perm	☐ YES ☑ NO If YES, give details (country):					
Are you a person with disability? Are you a solo parent?	If YES, please specify: YES NO If YES, please specify ID No: YES NO If YES, please specify ID No:					
41. REFERENCES (Person not related by consanguinity or affinity to ap	oplicant /appointee)					
NAME HUMBERTO R. MONTES, JR	ADDRESS VISCA, YSU, BAYBAY, LEYTE	TEL NO:				
YICTOR ASIO MARLITO JOSE M. BANDE 42. I declare under oath that I have personally accomposite statement pursuant to the provisions of Philippines. I authorize the agency head/authorized magree that any misrepresentation made in this administrative/criminal case/s against me.	pertinent laws, rules and regulations of the epresentative to verify/validate the contents state	rue, correct and Republic of the				
Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: DRIVER'S LICENSE ID/License/Passport No.: NOG-82-014576 Date/Place of Issuance: 04 29 29 4	Signature (Sign inside the bo	Right Thumbmark				
SUBSCRIBED AND SWORN to before me this	ATTY. RVSAN D. GUINDOL NOTAPENSON Administering Oath					
	PTR 0495858 BAYBAYYLEYTE IBP 1030924 - TAGL OBAN CITY - 12	1/12/17 119/16 CS FORM 212 (Revised 2017), Pa				