

CSC FORM 212 (Revised 2005)

V-00948

PERSONAL DATA SHEET

Print legibly Mark appropriate boxes

☐ with " / " and use separate sheet if necessary

1. CS ID No.

(to be filled y CSC)

I. PERSONAL INFORMATION

2. SURNAME	JAYME			3. NAME EXTENSION (e.g. Jr. Sr.)
FIRST NAME	JENEFER			
MIDDLE NAME	BAGARINAO			
4. DATE OF BIRTH (mm/dd/yyyy)	12/10/1991	16. RESIDENTIAL ADDRESS	Brgy. Hibunawan Baybay City, Leyte	
5. PLACE OF BIRTH	Baybay City, Leyte	ZIP CODE	6521	
6. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	17. TELEPHONE NO.		
7. CIVIL STATUS	<input type="checkbox"/> Single <input type="checkbox"/> Widowed <input checked="" type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Annulled <input type="checkbox"/> Others, specify _____	18. PERMANENT ADDRESS	Brgy. Hibunawan Baybay City, Leyte	
8. CITIZENSHIP	FILIPINO	ZIP CODE	6521	
9. HEIGHT (m)	5'6	19. TELEPHONE NO.		
10. WEIGHT (kg)	61.3	20. E-MAIL ADDRESS (if any)	iebhang22@gmail.com	
11. BLOOD TYPE	O+	21. CELL PHONE NO. (if any)	9161722209	
12. GSIS ID NO.		22. AGENCY EMPLOYEE NO.		
13. PAG-IBIG ID NO.		23. TIN	452-660-397	
14. PHILHEALTH NO.	13-025202659-3			
15. SSS NO.				

II. FAMILY BACKGROUND

24. SPOUSES' SURNAME	JAYME	25. NAME OF CHILDREN (Write full name and list all)	Date of Birth (mm/dd/yyyy)
FIRST NAME	DAVE PETER	Dayne Paul B. Jayme	11/5/2011
MIDDLE NAME	GODOY	Javern Myke B. Jayme	9/29/2014
OCCUPATION			/ /
EMPLOYER/BUS. NAME			/ /
BUSINESS ADDRESS			/ /
TELEPHONE NO.			/ /
(Continue on separate sheet if necessary)			/ /
26. FATHER'S SURNAME	N/A		/ /
FIRST NAME			/ /
MIDDLE NAME			/ /
27. MOTHER'S MAIDEN NAME			/ /
SURNAME	BAGARINAO		/ /
FIRST NAME	FLORENCIA		/ /
MIDDLE NAME	TOLERO		

III. EDUCATIONAL BACKGROUND

28. LEVEL	NAME OF SCHOOL (Write in full)	DEGREE/ COURSE (Write in full)	YEAR GRADUATED (if graduated)	HIGHEST GRADE/ LEVEL/ UNITS EARNED (if not graduated)	INCLUSIVE DATES OF ATTENDANCE		SCHOLARSHIP ACADEMIC/ HONORS RECEIVED
					From	To	
ELEMENTARY	Ormoc City, Central SPED Center		2004		1999	2004	
SECONDARY	Baybay National High School		2008		2004	2008	6th Honorable Mention
VOCATIONAL/ TRADE COURSE							
COLLEGE	Visayas State University	BSHRTM	2013		2008	2013	
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

Page 1 of 4

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125










[illegible]

V. WORK EXPERIENCE (Include private employment. Start from your current work)

[illegible]

CS FORM 212 (Revised 2005, page 2 of 4)

[illegible]

36. Are you related by consanguinity or affinity to any of the following:		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ _____ _____					
a. Within the third degree (for NATIONAL GOVERNMENT Employees): appointing authority, recommending authority, chief of office/bureau/department or person who has immediate supervision over you in the Office, Bureau or Department where you will be appointed?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ _____ _____					
b. Within the fourth degree (for LOCAL GOVERNMENT Employees): appointing authority or recommending authority where you are appointed?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ _____ _____					
37. a. Have you ever been formally charged?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ _____ _____					
b. Have you ever been guilty of any administrative offense?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ _____ _____					
38. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ _____ _____					
39. Have you ever been separated from the service in any of the following modes; resignation, retirement, dropped from the rolls, dismissal, termination, end of term, finished contract, AWOL or phased out, in the public or private sector?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ _____ _____					
40. Have you ever been a candidate in a national or local election (except Barangay election)?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ _____ _____					
41. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 7277); and © Solo Parents Welfare Act of 2000) RA 8972), please answer the following items:							
a. Are you a member of any indigenous group?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, pls. specify: _____					
b. Are you differently abled?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, pls. specify: _____					
c. Are you a solo parent?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, pls. specify: _____					
42. REFERENCES (Person not related by consanguinity or affinity to applicant/ appointee)							
NAME		ADDRESS	TEL. NO.				
Atty. Rysan C. Guinocor		VSU, Baybay City	563-7643				
Dr. Lourdes B. Cano		VSU, Baybay City	563-7643				
43. I declare under oath that this Personnel Data Sheet has been accomplished by me, and is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines I also authorize the agency head/ authorized representative to verify/ validate the contents stated herein. I trust that this information shall remain confidential.							
<table border="1"><tr><td>CCI2015 01110217</td></tr><tr><td>COMMUNITY TAX CERTIFICATE NO.</td></tr></table>		CCI2015 01110217	COMMUNITY TAX CERTIFICATE NO.	<table border="1"><tr><td> JENEFER B. JAYME SIGNATURE (Sign Inside the box)</td></tr><tr><td>5-Jan-17 DATE ACCOMPLISHED</td></tr></table>		 JENEFER B. JAYME SIGNATURE (Sign Inside the box)	5-Jan-17 DATE ACCOMPLISHED
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