CS FORM 212 (Revised 2005)			DATE OF		(BOARD/BAR)			
TC BTAG YIBBNUV	PERSO	NAL DA	ATA:	SHEET				
Print legibly. Mark appropriate bo	oxes with " \(\sqrt{\text{and use separate sheet if necessary.} \)			1. CS ID No.			(te	o be filled up by CS
I. PERSONAL INFORM	IATION							
2. SURNAME	GODOY							W17 1 C
FIRST NAME	CELSO							
MIDDLE NAME	POLIQUIT			3. NAME	EXTENSION (e.g. J	r., Sr.)	1	
4. DATE OF BIRTH (mm/dd/yy	yy) 02/27/1966	16. RESIDENTIAL	ADDRESS					
5. PLACE OF BIRTH	BRGY.SAN ISIDRO, BAYBAY, LEYTE			BRGY, GUADALU	PE. BAYBAY CI	TY. LEYTE		
6. SEX	☐ Male ☐ Female				5 30 to 10 t			
7. CIVIL STATUS	☐ Single ☐ Widowed		ZIP CODE	6521				
	Married ☐ Separated	17. TELEPHONE N	10.	NONE				
	☐ Annulled ☐ Others, specify	18. PERMANENT A		113.12				
8. CITIZENSHIP	FILIPINO	nazo en 11 tabeta etmo	que de alimina	BRGY, GUADALU	PE RAYBAY CI	TY LEYTE		
9. HEIGHT (m)	54"			D. C. T. C.	, o,	11,00		
10. WEIGHT (kg)	60 kgs.		ZIP CODE	6521	in a particular of the second	3218	SIVE DA	INCLUS
11. BLOOD TYPE	O VASHEDINI VSALIAS	19. TELEPHONE N		NONE (Manual		1	(T/Libb	((1)
12. GSIS ID NO.	602270274	20. E-MAIL ADDRE		NONE	Shirt)	01		mor4
13. PAG-IBIG ID NO.				00400557630	MIN. AIDET	do to	Droce	07/20/2013
14. PHILHEALTH NO.	13-000061918-4	21. CELLPHONE N		09199557632	100h riam	2/4 . 200	Prese	Orvanam
2010 2011 2011 2011	13-000061918-4	22. AGENCY EMPL	OYEE NO.	V000608	Hey Worker!	2013 UU	e1170	12/10/2005
15. SSS NO. II. FAMILY BACKGRO		23. TIN		116-624-602				
II. FAMILY BACKGRO 24. SPOUSE'S SURNAME	- Venuezi					T SATE	- 2127	
	GODOY	In a Charles		CHILD (Write full name a				H (mm/dd/yyyy)
FIRST NAME	TO LIVE	lisayas State Unive	ROCHELL		19100	en feet	07/20/	
MIDDLE NAME	MANUBAG		RONIEL GO	DOY			07/21/	/1992
OCCUPATION	NONE							
EMPLOYER/BUS. NAME	NONE						1	1
BUSINESS ADDRESS	BAYBAY CITY, LEYTE		-				-1	-1
TELEPHONE NO.						1	1	1/
	(Continue on separate sheet if necessary)						1	1
26. FATHER'S SURNAME	GODOY						1	1
FIRST NAME	FEDERICO					1-1-	1	11
MIDDLE NAME	RASONABE	*****					-1	1
27. MOTHER'S MAIDEN NAME							1	1
SURNAME	POLIQUIT						1	1
FIRST NAME	DOLORES						1	1
MIDDLE NAME	MAZO			(Continu	re on separate shee	et if necessary)		
III. EDUCATIONAL BA	ACKGROUND							
28.			YEAR	HIGHEST GRADE/	INCLUSIVE		T ,	SCHOLARSHIP/
LEVEL	NAME OF SCHOOL (Write in full)	DEGREE COURSE (Write in full)	GRADUATED (if graduated)	LIMITO EADMED	From	DANCE	0.28	ADEMIC HONORS RECEIVED
ELEMENTARY	Brgy. Candadam Elementtary School, Baybay City, Leyte		1981		1975	1981	none	\ \ \
SECONDARY	Baybay High School	2000	1985		1981	1985	none	1 1
VOCATIONAL / TRADE COURSE	N F E Baybay Vocational School		1991	6 mos.				1
COLLEGE	Visayas State College of Agriculture	FRC		First Year only	1985	1986	None	
		-				-		-
GRADUATE STUDIES	NONE		1.					
							+	
	Anthorn State Country and the same transfer of the same of the sam	al second to toads of the	and the sounding	(1)	TOTAL CHARLES HAVE CONSTRUCT	the selection of the selection of	od animals	Constitution -

IV. CIVIL S	ERVICE ELIC	GIBILITY	0						
	ER SERVICE/ RA	1080 (BOARD/ BAR)	RATING	DATE OF EXAMINATION /	PLACE OF EXAMINAT	ION / CONFER	MENT	LICENSE (if	applicable) DATE OF
.01	NDER SPECIAL D	AWS/ CES/ CSEE	A 40 1 1 5	CONFERMENT	BANGA.			NUMBER	RELEAS
be falled up by CS	0)				Energise	i tagala i denggab a	en bres / wall	appropriate buses	legibly. Mark
NONE							YOU	ə	BMAMBUS
							elso	0	EMAIL TERRE
		ac extension e.g. ut. so	AN E)	TIAL ADDRESS	02/27/1956 \ \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		1100130	(monodeveyy)	ALE OF BLA
	ЕУТЕ	LIPSE BAYBAY CITY. I	BŘGY, GUADA		EVIE E STYB.	J YASYAB G	OY SAN ISIDE	A8 M	B RO BOAU
			6521	3000 diz.		Esmode 1 Widowed	Maje [] Single [JUNE STATU
			BMON	RIE NO ENT ADDRESS	TI. TELEPIN	j separated j Others, spe	Married		
	271/2	L VTIO VÁGVEG, GOLÍ	CONTRACTOR OF TAXABLE	Continue on separate	sheet if necessary)	ade oranie.	ONIG	ial a	983219717
	EXPERIENCE USIVE DATES	(Include private	employmen	t. Start from yo	our current work)		l _{ou} in		
	nm/dd/yyyy)	POSITION (Write in			GENCY / OFFICE / COMPANY MONTHLY & STEP (Write in full) SALARY INCREMENT (Format *00-0*)			STATUS OF APPOINTMENT	GOVT SERVICE (Yes / No
07/20/2013	Present	ADMIN. AIDE I	09199557632	DLABS, Visayas	s State University		Grade Ioo	Permanent	Yes
02/16/2005	07/19/2013	Utility Worker I	V000608 116-624-602	DLABS, Visayas	s State University		4-816160000	Permanent	Yes
01/02/2000	01/02/2005	Laborer	oran field of Maria	PRCRTC, Visay	ras State University	90/day; 200/day	You	MOOE	Yes
07/01/1988	12/03/1999	Laborer	YOGO	PRCRTC, Visay	as State University	60/day	Alga	Casual	Yes
-1-1	1 1		- Y52	- KONIEC POL			NUBAG	DIE NAME ING	MI MOTARUSON
1 1	1 1						E E	JA, NAME NO	месоувны
1 1	1 1					VIE	LL VALID VARI	ORFSS (PA)	ELEPHONE
1 1	1-1-				74025	pen II made site	rades uc eriopira	BMAHR	JE 89REHTA
1 1	11						SODOY	200017	EMAM TERM
1 1	11						3940024	P SMAN NAGE	HOOLE NAME HOTHER'S M
1 1							TIUOLO		BMAVAU
1 1	1 10/1250	o Proedz slawijeji na sun	dno3)				OLORES AZO	A	EMAN TERI
	1 1								
HIHSALIOH ADAL TOUR		RATURITA	LEVEL LEVEL LEVEL UNITS PARNED		With an all Mills of the state	Vitate in Sul)	44		
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1 1	anoni 24	1881		1985			Leyte.	CIN	YSAGNOO
1 1	1 1		o mos.	1881		ational School	E Baybay Voe	эи	ADAMORTAD
J 1	Snow _dt	doel	VICE TREE TRUE		TRO FIRE	inothya in are	OS SIAIB CO	SZIV	ADE COURS
1 1	11								
1-1	1-1-						J. C. St	231G8	ADUATE ST
11	11								

VI. VOLUNTARY WORK	OR INVOLVEMENT	CIVIC / NON	N-GOVERNMEN	NT / PEOPLE / V	CVTARY	ORGANIZATION/S
31. NAME & /	ADDRESS OF ORGANIZATION (Write in full)	orw noste	no thembay(mm/	VE DATES dd/yyyy)	NUMBER OF HOURS	POSITION / NATURE OF WORK
Couples for Christ			Tiom	To		?behnodds
	CIVES IZNO		06/12/2012	Present	el Covernmen	Member
Knights of Columbus	If YES, give details:		12/01/2005	Present Presen	iding authority	Member services and services services
			1 1	1 1		
	CIVES CINO		1 1	1 1	harged?	gr. a. Have you ever been formally
	If YES, give details:		1 1	1 1		
VII. TRAINING PROGRA	AMS (Start from the m	Name and Address of the Owner, where the Owner, which is the O	e on separate sheet aining.)	if necessary)		The state of the s
32. TITLE OF SEMINAR/CONF	ERENCE/WORKSHOP/SHORT in full)	T COURSES (Write		S OF ATTENDANCE dd/yyyy)	NUMBER OF HOURS	CONDUCTED/ SPONSORED BY (Write in full)
	TYES TYNO If YES, give details:		present From sets	Just you To otheror	any crime or	28. Have you ever been convicted of regulation by any court or bibuna
NONE	TYES TINO	nober	nng modes: resig	in any of the follow	om the service	39. Have you eyer been separated in
	If YES, give details:	act AVVOL	rin, finished çonu		er Jassimaid ,	retirement, dropped from the rotal or phased out, in the public or pr
The state of the s	CIYES (C/IO		ept Barangay els	local election (exc	in a national o	40 Have you ever been a candidate
		ersons (RA nng items:	ta for Disabled Pi answer the follow	71); (b) Magna Car (RA 8972), plaase	e's Act (RA-8) are Act of 200	41- Pursuant to: (a) Indigenous Paor 7277): and (c) Solo Parents Well
	TYES TWO		1 1	1 1	Squarg auo	a. Are you a member of any indiger
and a contract of	If YES, please specify.		1 1	1 1		h Are you differently abled?
	II YES, please specify:		1 1	1 1		c. Are you a solo parent?
and with an instructive of the security grade with a con-	TTES, piedse specify.		1 1	B KOONB VIRSON VIB OF VI	sangunity of affin	42. REFERENCES (Passon not related by cor
	.Cu JET		грзяода	1 1		MAME
			YOTY, LEYTE	VSU, BAYBA		DR. JOSE L DACUSMO DR. ANNIE P. GRAVOSO
			1 1	1 1		55547416 . 1 417117 .714
		id is a true, consist of the Republic	iplished by me. al les ar † l reg ≬ lation	et has been nocon if pertinent hws, ru	ional Data 3h re provisions (complete statement pursuant to t
VIII. OTHER INFORMAT	TON	(Continue	on separate sheet i	if necessary)		Philippines
CAPTAN AND INCAME TO DESCRIPT A CAPTAN		No	ON-ACADEMIC DIST	INCTIONS / RECOGN	ITION:	MEMBERSHIP IN
33. SPECIAL SKII	LLS / HOBBIES:	34.		rite in full)	Ulteria	35. ASSOCIATION/ORGANIZATION (Write in full)
Bicycle Mechanic			(mes		TE	Administrative Personnel Association
Carpentry		go keefde the box)	. BIGINATURE (Sig			188UED AT
Cooking NAMEMUHT THO	18	OMPLISHED	DATE ADD		(V)	ISSUED ON (mn/Idd/y)
2 (Revised 2005) Page 4 of 4	CS FORM 21			and the state of		
					A CONTRACTOR OF THE CONTRACTOR	
			THE RESIDENCE OF THE PARTY OF			

		and the second s
a. Within the third degree (for National Governmental appointing authority, recommending authority, has immediate supervision over you in the Off appointed?	chief of office/bureau/department or person who	If YES, give details:
vedmet/	06/12/2012 Present	Journal of Christ
b. Within the fourth degree (for Local Governmer appointing authority or recommending authority		☐ YES ☐ NO and mulc ○ to atheir If YES, give details:
37 a. Have you ever been formally charged?		☐YES ☐NO If YES, give details:
b. Have you ever been guilty of any administra	y a survey of the survey of th	☐YES ☐NO If YES, give details:
	JRSES (With Inclusive DATES DE ATTENDATION JRSES (With	22 TITLE OF SEWILARING IN ENRINGE WORKSHOOM PIECE
38. Have you ever been convicted of any crime or regulation by any court or tribunal?	violation of any law, decree, ordinance or	☐ YES ☐ NO If YES, give details:
39. Have you ever been separated from the service retirement, dropped from the rolls, dismissal, to or phased out, in the public or private sector?	e in any of the following modes: resignation, ermination, end of term, finished contract, AWOL	☐YES ☐NO If YES, give details:
	or local election (execut Personally election)?	
40. Have you ever been a candidate in a national	or local election (except barangay election)?	☐ YES ☐ NO If YES, give details:
41. Pursuant to: (a) Indigenous People's Act (RA 8		If YES, give details:
41. Pursuant to: (a) Indigenous People's Act (RA 8 7277); and (c) Solo Parents Welfare Act of 200 a. Are you a member of any indigenous group? b. Are you differently abled? c. Are you a solo parent?	3371); (b) Magna Carta for Disabled Persons (RA 00 (RA 8972), please answer the following items:	If YES, give details:
41. Pursuant to: (a) Indigenous People's Act (RA 8 7277); and (c) Solo Parents Welfare Act of 200 a. Are you a member of any indigenous group? b. Are you differently abled?	3371); (b) Magna Carta for Disabled Persons (RA 00 (RA 8972), please answer the following items:	If YES, give details:
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41. Pursuant to: (a) Indigenous People's Act (RA & 7277); and (c) Solo Parents Welfare Act of 200 a. Are you a member of any indigenous group? b. Are you differently abled? c. Are you a solo parent? 42. REFERENCES (Person not related by consanguinity or affinate NAME DR. JOSE L. BACUSMO DR. ANNIE P. GRAVOSO 43. I declare under oath that this Personal Data Structure Complete statement pursuant to the provisions Philippines. I also authorize the agency head / authorized in the provisions of the provisions	ADDRESS VSU, BAYBAY CITY, LEYTE Peet has been accomplished by me, and is a true, of pertinent laws, rules and regulations of the Representative to verify / validate the contents state	If YES, give details:
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