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.

READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM.

| Print legibly. Tick appropriate boxes | (and use separate sheet if n | ecessary. Indicate N | I/A if not applic | able. DO NOT A | BBREVIATE. | | 1. CS ID No. | | (Do not fill up. F | or CSC use only) |
|---------------------------------------|---------------------------------|---|-------------------|---|--|--|-----------------|---------------------------------|--------------------|---------------------|
| I. PERSONAL INFORMATIO | N | | | | 1 14 6 | | | | 186 | |
| 2. SURNAME | CANA | | | | | | | | | |
| FIRST NAME | LOLITO NAME EXTENSION (JR., SR) | | | | | | | | | |
| MIDDLE NAME | DE LA | CRUZ | | | | | | | | |
| DATE OF BIRTH (mm/dd/yyyy) | 12 - 26 - 5 | | 16. CITIZENSHIP | | | Filipino Dual Citizenship | | | | |
| 4. PLACE OF BIRTH | TUBURAN, | CEBU | lf h | nship, | □ by birth □ by naturalization Pls. indicate country: | | | ation | | |
| 5. SEX | Male | ☐ Female | pl | ease indicate the de | etails. | | | | | • |
| 6 CIVIL STATUS | ☐ Single ☐ Widowed ☐ Other/s: | ☐ Married ☐ Separated | 17. RESIDENT | TIAL ADDRESS | | use/Block/Lot N | | PAN | Street IGASU | CAN |
| 7. HEIGHT (m) | 5'2" | | 1 | | | | | 7 | Barangay | |
| 8. WEIGHT (kg) | 130 166 | | ZIP CODE | | | BAYBAY CITY LETTE City/Municipality Province 6521 | | | | |
| 9. BLOOD TYPE | 0 | 1140 | - | NT ADDRESS | 0 | 771 | | | | |
| 10. GSIS ID NO. | 0 | 72178A | HOTTAG | | | USE/Block/Lot N | | PAI | Street | GAA) |
| FORMA | 1700 0001 | GUAVING JUES. | GITATO TO | | Su | Subdivision/Village Barangay | | | | DEF |
| 11. PAG-IBIG ID NO. | 1700-0624 | -4756 | SAVASIV | | | City/Municipality Province | | | | |
| 12. PHILHEALTH NO. | | .50 () | ZIF | CODE | (2 | 521 | | | Hosad | 1 , 51 |
| 13. SSS NO. | | | 19. TELEPHON | NE NO. | | | | | | |
| 14. TIN NO. | 116 - 623 - | 601 | 20. MOBILE NO. | | | 7058443626 | | | | |
| 15. AGENCY EMPLOYEE NO. | 21. E-MAIL ADDRESS (if any) | | | DRESS (if any) | | lito cana @g mail. com | | | | |
| II. FAMILY BACKGROUND | | | | | | | | | | |
| 22. SPOUSE'S SURNAME | CAÑA | | | | 23. NAME of CH | HLDREN (Write | e full name and | d list all) | DATE OF BIRT | ΓΗ (mm/dd/yyyy) |
| FIRST NAME | | AMAL | NAME EXTENSION | ON (JR., SR) | ROPI | NEY | CAT | NA | AUG. | 2,1980 |
| MIDDLE NAME | GATCHAL | | | | RAN | | CAT | | | 15,1982 |
| OCCUPATION | HOUSEWIFE | | | | | | | 2,1984 | | |
| EMPLOYER/BUSINESS NAME | | | | EMILYN CARA | | | | 7, 1985 | | |
| BUSINESS ADDRESS | | | | | | - 111 | | | 1041/ 2 | 1,1100 |
| TELEPHONE NO. | | | | | | | | | | |
| 24. FATHER'S SURNAME | CAÑA | | | | | | | | | |
| FIRST NAME | DANIEL NAME EXTENSION (JR., SR) | | | | | | | | | |
| MIDDLE NAME | AUMENTAR | | | | | | | | | |
| 25. MOTHER'S MAIDEN NAME | 3 5 | | | | | | | | | |
| SURNAME | CANA | | | | | | | | | |
| FIRST NAME | | | | | | | | | | |
| MIDDLE NAME | VERGILLA DE LA CRUZ | | | (Continue on separate sheet if necessary) | | | | | | |
| III. EDUCATIONAL BACKGI | ROUND | CRUZ | | | | | | ourate sheet ii mees | sury) | 4 1 2 EV 4 E |
| 26. | NAME OF SCHO | 201 | DACIO E | NICATION/DEODE | FIGOLIBOS | DEBIOD OF | ATTENDANCE | HIGHEST LEVEL/ | | SCHOLARSHIP/ |
| LEVEL | (Write in full) | JOL . | BASIC EL | OUCATION/DEGRE (Write in full) | E/COURSE | PERIODOFA | | UNITS EARNED (if not graduated) | YEAR GRADUATED | ACADEMIC HONORS |
| ELEMENTARY | CAMP 7 ELEM. SCHOOL | | | | From 1963 | (e) | | | RECEIVED | |
| SECONDARY | TUBURAN NAT SCHOOL | | | | 1970 | 74 | | | | |
| VOCATIONAL / TRADE COURSE | CERU COLLEGE OF COMMERCE | | | | 974 | 75 | | | | |
| COLLEGE | | V | | | | | | | | |
| GRADUATE STUDIES | | | | | | | | | | |
| | | (C | ontinue on sepa | arate sheet if nece | ssary) | | | | | |
| SIGNATURE (| | N. C. | > | DATE | | (23, | 2019 | CS FORM 212 | (Revised 2017), | Page 1 of 4 |
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| | SERVICE ELIC | | DANDALINDED | | | | | | LIOSNOS (1 | · · |
| | EER SERVICE/ RA SPECIAL LA | WS/ CES/ | CSEE | RATING (If Applicable) | EXAMINATION / | DATE OF EXAMINATION / PLACE OF EXAMINATION / CONFERMEN | | | LICENSE (if a | pplicable) Date of |
| BA | RANGAY ELIGIBIL | ITY / DRIVI | ER'S LICENSE | (II Applicable) | CONFERMENT | 3 | | | NUMBER | Validity |
| | | | | | | , | 161 | | | |
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| | | | | | | | ALIA | ~ | | |
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| | EXPERIENCE | | | | | | | | | |
| | vate employme USIVE DATES | ni. Stari | from your recen | t work) Description | of duties should be | e indicated in the attache | | SALARY/ JOB/ PAY | | |
| (m | (mm/dd/yyyy) POSITION TITLE (Write in full/Do not abbreviate) | | DEPARTMENT / AGE (Write in full/ | MONTHLY SALARY | GRADE (if applicable)& STEP (Format "00-0")/ | STATUS OF APPOINTMENT | GOV'T SERVICE (Y/N) | | | |
| From | То | | | 1-(1-3) | SOUTHERN PHIL. | | | INCREMENT | . 0.000 | (17 N) |
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| 1979 | | OFF | SET MAC | line opera | OR STA | ENGRAVING FIONERY S STATE 2 SI TY | | | PERMA- NENT | |
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| SIGN | ATURE | | - CV | > | DATE | JULY 23, 2 | 019 | CS FORM 2 | 12 (Revised 2017), F | age 2 of 4 |
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| VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMEN | T / PEOPLE / VOLUNTARY | ORGANIZATION/S | | |
|---|--------------------------------------|--|---|--|
| 29. NAME & ADDRESS OF ORGANIZATION (Write in full) | INCLUSIVE DATES (mm/dd/yyyy) | NUMBER OF HOURS | POSITION / NATURE OF WORK | |
| (| From To | | | |
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| (Cont | tinue on separate sheet if necessary |) | | |
| II. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING | | | | |
| start from the most recent L&D/training program and include only the relevant L&D/training taken fo | | | 9) | |
| 30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS | INCLUSIVE DATES OF ATTENDANCE | Type of LD (Managerial/ Supervisory/ | CONDUCTED/ SPONSORED BY | |
| (Write in full) | (mm/dd/yyyy) From To | Technical/etc) | (Write in full) | |
| JUDGE-POSTER MAKING COMPETITION | FEB. 8 FEB. 10 2 | 2019 | PHIL. SOCIETY OF AGREC | |
| SEMINAR - WORKSHOP | JUNE 29, 2018 | | SPECIAL PROGRAM | |
| CULTURE AND THE ARTS FESTIVAL | NOV. 13 NOV. 14 | 2018 | PHIL. ASSOCIATION OF STA | |
| JUDGE PENCIL DRAWING | | | PASUC VIII CULTURE & AR | |
| | OCT - 27, 2017 | | PASUC VIII CULTURE PART | |
| COACH CHARCOAL RENDERING | OCT. 27, 2017 | | MISAYAS STATE UNIVERS | |
| JUDGE CHARCOAL RENDERINE | OCT. 27,2017 | | VISAYAS STATE UNIVERSI | |
| COACH PENCIL BRAWING | OCT. 27, 2017 | | PASUC VIII CULTURE & ART | |
| COACH IN PENCIL PRAWING AND CHORCO | NOV. 9 DEC. 1,20 | 7 | PHIL. A SSOCIATION OF STA | |
| COOR DINATOR VISUAL ARTS CONTEST | | | VISAYAS STATE UNIVERS | |
| COACH PENCIL PRAWING | NOV. 16, 2016 | | REGIONAL PASUC CULTURE THE ARTS FESTIVAL NAVAL, BU | |
| PAGUE & REGIONAL CULTURE & THE ART | NOV 10 2016 | | NAVAL STATE UNIVERSIT | |
| LESTINAL | OCT. 22 - 23 | | 19T NATIONAL CONSIDES | |
| FACILITATOR | | | OF PEOPLES ORGANIZATI | |
| JUDGE- MURAL PAINTING CONTEST | 1 | | ISROS VISAYAS STATE | |
| | OCT. 7,2015 | | UNIVERSITY | |
| JUDGE- POSTER MAKING CONTEST | FEB. 23,2016 | | ISRDS VISAYAS STATUNIVERSITY SPECIA PROGRAM IN | |
| SEMINAR - WORKSHOP | JUNE 30, 2016 | | THE ARTS (SPA) | |
| CITY SEAL DESIGN COMPETITION | MAY 2, 2000 | | BAYBAY LGU | |
| - 1 St 10 | | | | |
| . ~. | | | | |
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| (Co | ntinue on separate sheet if necessa | (y) | | |
| VIII. OTHER INFORMATION | | | | |
| NO NO | N-ACADEMIC DISTINCTIONS / RECO | OGNITION | MEMBERSHIP IN ASSOCIATION/ORGANIZATION | |
| 31. SPECIAL SKILLS and HOBBIES 32. | (Write in full) | | Write in full) | |
| VISUAL ARTIST CERTIF | CATES & | XWARDS | ASSOCIATION IN BAY | |
| | 016 | - | | |
| | | | | |
| | - | | | |
| 40. | ELLAND C. DOBNO | MHA | | |
| | - CARTO MAI | 1-1-1 | | |
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| IF. | ontinue on separate sheet if necessa | ary) | | |
| SIGNATURE | DATE | 7-23-1 | CS FORM 212 (Revised 2017), Page 3 of 4 | |
| SISTITUTE . | | 1 6 | | |

| 34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to the chief of bureau or office or to the person who has immediate supervision over you in the Office, 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)? | ☐ YES ☐ NO If YES, give details: | | | | | | |
| 35. a. Have you ever been found guilty of any administrative offense? | ☐ YES ☐ NO If YES, give details: | | | | | | |
| b. Have you been criminally charged before any court? | ☐ YES | | | | | | |
| 36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal? | ☐ YES ☐ NO If YES, give details: | | | | | | |
| 37. 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 or phased out (abolition) in the public or private sector? | ☐ YES | | | | | | |
| a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)? b. Have you resigned from the government service during the three (3)-month period before the last election to promote/actively campaign for a national or local candidate? | ☐ YES If YES, give details: The proof of t | | | | | | |
| 39. Have you acquired the status of an immigrant or permanent resident of another country? | ☐ YES | | | | | | |
| 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 8972), please answer the following items: a. Are you a member of any indigenous group? | YES NO | | | | | | |
| b. Are you a person with disability? c. Are you a solo parent? | ☐ YES | | | | | | |
| 41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee) | | | | | | | |
| NAME ADDRESS | TEL. NO. | | | | | | |
| DIOGDADO TORRECAMPO BROY. GUADALUPE, BAYBAY, LETTE | ID picture taken within | | | | | | |
| 42. I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I authorize the agency head / authorized representative to verify/validate the contents stated herein. I agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me. | | | | | | | |
| Government Issued ID (i.e. Passport GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: VODO 35 ID/License/Passport No.: Date/Place of Issuance: VISAAS STATE Date Accomplished Right Management | | | | | | | |
| SUBSCRIBED AND SWORN to before me this 2 9 JUL 2019 , affiant exhibiting his/her validly issued government ID as indicated above. ATTY. RYSANC. GUINOCOR VSU LEGAL DESAR GRADINISTERING Oath | | | | | | | |
| | CS FORM 212 (Revised 2017), Page 4 of 4 | | | | | | |
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