## PERSONAL DATA SHEET

WARNING: Any misrepresental	tion made in the Personal Data Sheet and the N	Work Experience Sheet shall	Il cause the fili	ng of adminis	strative/crin	ninal case/s agai	nst the persoi	n concerned.	
READ THE ATTACHED GUIDE	TO FILLING OUT THE PERSONAL DATA SHE	ET (PDS) BEFORE ACCOMI	PLISHING THE	PDS FORM.			4.6		
Print legibly. Tick appropriate boxes  I. PERSONAL INFORMATIO	s ( and use separate sheet if necessary. Indicate N	/A if not applicable. DO NOT A	BBREVIATE.	1	. CS ID No.		(Do not fill up. F	or CSC use only)	
2. SURNAME									
FIRST NAME	TANAID  NAME EXTENSION (JR., SR)								
MIDDLE NAME	RIZAL N.A.								
3. DATE OF BIRTH	ROBLES	AC OUTSTAINING		_/	_				
(mm/dd/yyyy)	05-29-62	16. CITIZENSHIP	Filipino Dual Citizenshi				by naturalization		
4. PLACE OF BIRTH	Bry. Bidlinan Baybay	If holder of dual citize				Pls. indicate or			
5. SEX	Male Female	please indicate the d	ridiis,					~	
6 CIVIL STATUS	☐ Single ☐ Married ☐ Separated ☐ Other/s:	17. RESIDENTIAL ADDRESS	House/Block/Lot No. Street  Zone3 GUADALUPE  Subdivision/Village						
7. HEIGHT (m)	1.524 M-		BAYE	BAYBAY, CITY LEYTE					
8. WEIGHT (kg)	65 kg.	ZIP CODE	City/Mdnicipality Province 06521-A						
9. BLOOD TYPE	Ot	18. PERMANENT ADDRESS	Hou	ise/Block/Lot No.			Street		
10. GSIS ID NO.	CM-3877294	FAREAS.		bdivision/Village	2	one3 Gu		Æ	
11. PAG-IBIG ID NO.		ETAIN GRANT		AY BAY, CITY LEYTE  City/Municipality Province					
12. PHILHEALTH NO.	13-000014376-7	ZIP CODE	1-7	06521-A					
13. SSS NO.		19. TELEPHONE NO.	N.A.						
14. TIN NO.	110-627-155	20. MOBILE NO.	09355953092					And will	
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)	riza	itamaid	eyab	10, Com			
II. FAMILY BACKGROUND									
22. SPOUSE'S SURNAME	BULAWAN Chesca		23. NAME of CHILDREN (Write full name and list all)				DATE OF BIRTH (mm/dd/yyyy)		
FIRST NAME	ANECITA	NAME EXTENSION (JR., SR)  N : A.	DARLTH B. TANAID				02-28-1990		
MIDDLE NAME			DARIEL B. TANAID				11-04-1991		
OCCUPATION	Housewife.		RECIEZ AMM B. TANAID				04-19-1994		
EMPLOYER/BUSINESS NAME			RINEBETH 19. TANAID				09-19-1997		
BUSINESS ADDRESS			ARADEL MAE 13. TANAID				10-17-2000		
TELEPHONE NO.									
24. FATHER'S SURNAME	TANAID		2.5						
FIRST NAME	Lucio	NAME EXTENSION (JR., SR)	V 25	/ /20A					
MIDDLE NAME	SABAL		93						
25. MOTHER'S MAIDEN NAME			- 1-6						
SURNAME	ROBLES								
FIRST NAME	AHITZUL							2 4	
MIDDLE NAME	PERERO			(Cor	ntinue on sej	parate sheet if neces	ssary)	1.111	
III. EDUCATIONAL BACKS	GROUND								
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGR (Write in full)	PERIOD OF ATTENDANCE From. To			HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED	
ELEMENTARY	PANGASUGAN ELEM. SON	OIL ELEM. GRA	DUATE		1976		1976	N.A	
SECONDARY	VISCA ERITS	H.S. GRADUA	ATE	1977	1981		1981	N. A	
VOCATIONAL / TRADE COURSE		- F 3/No. 17	220	a Wus		8			
COLLEGE	NISCA	BSA		1983	1984	42 units			
GRADUATE STUDIES	11(1			1					
	l " (	Continue on separate sheet if neo	T 7	م جارد					
SIGNATURE	-	DATE	4	25/17		CS FORM 21	2 (Revised 2017)	, Page 1 of 4	

CAREER SERVICE/ RA	IBILITY 1080 (BOARD/ BAR) UNDER		DATE	OF					LICENSE (if ap	plicable)
77. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE (If Applicable)			EXAMINATION / PLACE OF EXAMINATION / CONFERMENT				ION / CONFER	MENT	NUMBER	Date o
	TITY DRIVERS EIGENSE		OOM EN	IVILIAI						Validity
N.A.										
							- 0			
		1			************					
. WORK EXPERIENCE		(Con	ntinue on sepa	arate sheet if r	ecessary)					
	nt. Start from your recent	work) Description	of duties s	hould be in	dicated in	the attached	l Work Expe	rience sheet.		
3. INCLUSIVE DATES (mm/dd/yyyy)	POSITION T	TLE	DEPARTA	MENT / AGENO	Y/OFFICE	COMPANY	MONTHLY	SALARY/ JOB/ PAY GRADE (if	STATUS OF	GOVT
From To	(Write in full/Do not			(Write in full/Do			SALARY	applicable)& STEP (Format "00-0")/ INCREMENT	APPOINTMENT	SERVIC (Y/ N)
PIO 1/17 Acsen	-HOUSE HOLD A	TENDANTI	VASA	Ac co	TE III	NIS SED PE	B11 1/90	CG-3	Regular P.	
80116 12 3116			1	•			10,985,		Regular P.	
11 11	HOUSEHOLD ATT									
1 1 1 1	HOUSEHOLD ATTE					YERSITY			Regular P.	
801 13 12 31 15	HOUSEHOLD ATTE					YERSITY			Regular P.	
60112 07/31/13	GHESTHOUSE CAR	EDKER	VISAYA	SSTAT	E ann	ERSITY	-		Regular P.	
05 31 12	GUEST MOUSE CA	RETAKTE	VISAX	STATE	- Unive	RSITY	9,400,0	59-2	Regular P.	
00110 053111	GUESTHOUSE CAR	ETAKER	MISSYA	S STATE	unix	ERSITY	8,733,		Regular P.	
6/24/10/09/30/10	GUETHOUSE CARE	TAKER	4184348	STATE	Unive	RSITY	81594	59-2	Regular P.	
7/01/09/06/23/10	GUEXT HOUSE CH	ETAKER	VISAYA	STATE	unive	RSITY	7,906,	59-2	Regular P.	1 749
7/01/08/06/30/09	GUEST HOUSE CAN	RETAKER	XISAYAS	CTATE	Unive	RSIJY	7,219.	99-2	Regular P.	
	GHESTHOUSE CAN		MISAYA	५ ५७गा	Unixe	arsity	6,563.	56-2	Regular P	
	GUESTHOUSE CARD		VISAYAS	STATE	unive		6,402	Sa-2	Regular P	
	GUESTHOUSE CAR			STATE			51745,	115	Rogular P	
0/01/01/09/30/04				STATE			5,718.		Regular C.	
07/01/01/09/30/01	The state of the s					AGRIC,			Regular P.	
1 1 1 1										
1 1 1 1	GUEST HOUSE CARD							39-2	REGULAT P	
	GUESTHOUSE CARE				,	faric.			Regular P.	
1 1 1 1	GUESTHOUSE CA					AGRIC,	1	56-2	CASUAL	
17/01/96 12/31/96	GUESTHOUSE CA						218D	56-2	CASHAL	
1 1 1	UTILITY WORKE					AGRIC.	206 D	89-2	CASUAL	
10195 12/3195	WILLITY WORRE	RI	YISAYAS	STATE	CUL. P	AGRIC.		56-2	EASWAL	
10194 12/3/94	UTILITY WORKED	11	VISAXHC	CHIE	可几个	AGRIC,	127/D	99-2	CACUAL	
110193 12/30/93	UTILITY WORKED	41	VISAYAS	STATE	瓜子	Maric	90.700	84-2	CASUAL	
70187 12/31/92	UTILITY WORKER	. 1	VISAYAS	STATEC	R.F.F	GRICA	32. D	59-2	CASUAL	
	CARPENTERMAIN		WISAYAS	STATE	0L.0F	KGRIC.	22.900	562	CHSWIL	
	CARPENTER MAIL		1	7 %			19.90/	056-2	CHENAL	
	CARPENTER MAN	A CONTRACTOR OF THE PARTY OF TH	The state of the s				1		CASUAL	
06/01/82 03/31/83						= AGRICI		59-2	CASUBL	
	2000	(Cor	ntinue on sepa	arate sheet if i	ecessary)					
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29. NAME & ADDRESS OF (Write in		INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK		
		From	То				
Not	) .						
	· ·						
	3						
		(Continue on sepa	rate sheet if neces	ssary)			
II. LEARNING AND DEVELOPMENT	(L&D) INTERVENTIONS/TRAI	NING PROGR	AMS ATTEN	DED			
Start from the most recent L&D/training program a	nd include only the relevant L&D/traini	In which the property of	Egypton of American State	r Division Chief/Ex	ecutive/Manageria	al positions)	
30. TITLE OF LEARNING AND DEVELOPMENT IN	TERVENTIONS/TRAINING PROGRAMS	(mm/dd/yyyy) From To		NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY	
(Write in						(Write in full)	
WORK CONFERENCE ST	MFF DIV. SEMIRAR	12/10/93	12/12/93	48 hrs.		CSC-ROS	
VALUES ORIENTATION		08/17/98	08/1998	24 hr.		CSC-ROB & VSU	
						,	
		118		-			
						-x -	
		m. 1-10	M24 6 .	- 3 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2		· ( ) ( ) 4 4 7 • ( - 1 )	
	*						
						2	
W. ATUSA WEARNATION		(Continue on sepa	rate sheet if nece:	ssary)			
/III. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES	32. N	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)  MEMBERSHIP IN ASSOCIA (Write in					
CLEANING	N.A.		ROM-CATHOLIC -				
DRIVING	1 1 1 1 1 1 1 2 2 3 7 1	The sylvanian and the sylvania				KARISMATIC MOVEME	
SERVING							
MARKETING							
111111111111111111111111111111111111111							
		-					
		(Continue on sep	arate sheet if nece	ssary)			
SIGNATURE	- 1		DATE	1	1/25/1	CS FORM 212 (Revised 2017), Page 3 of	

34.	Are you related by consanguinity or affinity expositing 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 INO If YES, give details:  Date Filed:  Status of Case/s:				
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 NO If YES, give details:				
38.	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	If YES INO If YES, give details:  NO NO				
39.	election to promote/actively campaign for a national or local candidate?  Have you acquired the status of an immigrant or permanent resident of another country?	If YES, give details:  YES  If YES, give details (country):				
40. a. b.	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:  Are you a member of any indigenous group?  Are you a person with disability?  Are you a solo parent?	If YES NO If YES, please specify:  YES NO If YES, please specify ID No: YES NO				
41.	REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)	If YES, please specify ID No:				
PR	OF. FRUDENCIO 9. MORQUEZ By. KILIM BAYBAY	TEL. NO.				
42.	I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, constant statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Phithe agency head / authorized representative to verify/validate the contents stated herein. The misrepresentation made in this document and its attachments shall cause the filing of administration against me.	I agree that any RIZA) R TANAD				
G ID	overnment Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)  LEASE INDICATE ID Number and Date of Issuance  overnment Issued ID: VS VI ID  Officense/Passport No.: V.— 0 0 0 5 0 A  Signature (Sign inside the believe of Issuance)  Date Accomplished	DIX) Right Thumbmark				
	SUBSCRIBED AND SWORN to before me this	his/her validly issued government ID as indicated above.				
	Person Administering Oath	1 Y / E - 1/12/17 CS FORM 212 (Revised 2017), Page 4 of 4				