

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 necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE.

1 CS ID No.

(Do not fill up. For CSC use only)

I. PERSONAL INFORMATION

2 SURNAME	MASCARIÑAS		
FIRST NAME	IKE	NAME EXTENSION (JR., SR)	
MIDDLE NAME	ELORCHA		
3 DATE OF BIRTH (mm/dd/yyyy)	April 09, 1990	16 CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:
4 PLACE OF BIRTH	Baybay City, Leyte	If holder of dual citizenship, please indicate the details.	
5 SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		
6 CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:		
7 HEIGHT (m)	170 cm	17 RESIDENTIAL ADDRESS	House/Block/Lot No. Street Subdivision/Village Barangay City/Municipality Province
8 WEIGHT (kg)	80 kg	ZIP CODE	
9 BLOOD TYPE	'O'	18 PERMANENT ADDRESS	House/Block/Lot No. Street Subdivision/Village Barangay City/Municipality Province
10 GSIS ID NO.		ZIP CODE	
11 PAG-IBIG ID NO.	1212-0822-7191		
12 PHILHEALTH NO.	13-0254524930		
13 SSS NO.	NONE	19 TELEPHONE NO.	NONE
14 TIN NO.	334-111-293	20 MOBILE NO.	09059734821
15 AGENCY EMPLOYEE NO.		21 E-MAIL ADDRESS (if any)	


II. FAMILY BACKGROUND

22 SPOUSE'S SURNAME	NONE		23 NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME		NAME EXTENSION (JR., SR)	XANDRIA IRAH P. MASCARIÑAS	07-01-2010
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24 FATHER'S SURNAME	MASCARIÑAS			
FIRST NAME	RAFAEL	NAME EXTENSION (JR., SR)		
MIDDLE NAME	CAINTIC			
25 MOTHER'S MAIDEN NAME				
SURNAME	MASCARIÑAS			
FIRST NAME	ELVIRA			
MIDDLE NAME	ELORCHA		(Continue on separate sheet if necessary)	

III. EDUCATIONAL BACKGROUND

26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE		HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	GUADALUPE ELEMENTARY SCHOOL		1997	2003	GRADUATED	2003	
SECONDARY	BAYBAY NATIONAL HIGH SCHOOL		2003	2010	GRADUATED	2010	
VOCATIONAL / TRADE COURSE							
COLLEGE	STO. NIÑO COLLEGE OF OMOG		2012	2016	GRADUATED	2016	
GRADUATE STUDIES							


(Continue on separate sheet if necessary)

SIGNATURE		DATE	6/27/19	CS FORM 212 (Revised 2017), Page 1 of 4
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[illegible]

V. WORK EXPERIENCE

[illegible]

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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION

[illegible]

(Continue on separate sheet if necessary)

VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED


[illegible]




(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
DRIVING	NONE	NONE
COOKING		
BASKETBALL		

(Continue on separate sheet if necessary)

SIGNATURE		DATE	6/27/19	CS FORM 212 (Revised 2017), Page 3 of 4
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34. Are you related by consanguinity or affinity to the appointing or recommending authority, 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 appointed, a. within the third degree? b. within the fourth degree (for Local Government Unit - Career Employees)?		<div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details:</div>												
35. a. Have you ever been found guilty of any administrative offense? b. Have you been criminally charged before any court?		<div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details:</div> <div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details:</div> <div>Date Filed: _____</div> <div>Status of Case/s: _____</div>												
36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?		<div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details:</div>												
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?		<div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details:</div>												
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 election to promote/actively campaign for a national or local candidate?		<div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details:</div> <div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details:</div>												
39. Have you acquired the status of an immigrant or permanent resident of another country?		<div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details (country):</div>												
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? b. Are you a person with disability? c. Are you a solo parent?		<div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, please specify: _____</div> <div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div> <div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div>												
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)														
<table><tr><td>NAME</td><td>ADDRESS</td><td>TEL. NO.</td></tr><tr><td>HON. DEXTER S. MAGAN</td><td>Brgy. Pangasugan, Baybay City</td><td></td></tr><tr><td>DR. OTHELLO B. CAPUNO</td><td>VSU, Visca, Baybay City, Leyte</td><td></td></tr><tr><td>ENGR. CELSO GUMAOD</td><td>VSU, Visca, Baybay City, Leyte</td><td></td></tr></table>			NAME	ADDRESS	TEL. NO.	HON. DEXTER S. MAGAN	Brgy. Pangasugan, Baybay City		DR. OTHELLO B. CAPUNO	VSU, Visca, Baybay City, Leyte		ENGR. CELSO GUMAOD	VSU, Visca, Baybay City, Leyte	
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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.														
<div>Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</div> <div>Government Issued ID:</div> <div>ID/License/Passport No.:</div> <div>Date/Place of Issuance:</div>	<div></div> <div>Signature (Sign inside the box)</div> <div>Date Accomplished</div>	<div></div> <div>MASCARIÑAS, IKE E.</div> <div>PHOTO</div> <div></div> <div>Right Thumbmark</div>												
SUBSCRIBED AND SWORN to before me this 02 JUL 2019, affiant exhibiting his/her validly issued government ID as indicated above.														
<div>ATTY. RYSAN C. GUINOCOR</div> <div>Person Administering Oath</div>														