CS Form No. 212 Revised 2017

PERSONAL DATA SHEET

	ion made in the Personal Data Sheet and the TO FILLING OUT THE PERSONAL DATA SHE					minal case/s agai	nst the perso	n concerned.
Print legibly. Tick appropriate boxes ((and use separate sheet if necessary. Indicate N				1 CS ID No.		(Do not fill up. F	or CSC use only)
I. PERSONAL INFORMATION								
2. SURNAME	AVENIDO							
FIRST NAME	JERSON NAME EXTENSION (JR., SR) N/A						N/A	
MIDDLE NAME	BERAY							
3. DATE OF BIRTH (mm/dd/yyyy)	JULY 23,1983	16. CITIZENSHIP		✓ Filipino ☐ Dual Citizenship ✓ by birth			by naturalization	
4. PLACE OF BIRTH	INOPACAN, LEYTE	If holder of dual citiz	enship,			Pls. indicate of	ountry:	
5. SEX	✓ Male · · · Female	please indicate the details.						-
6 CIVIL STATUS	☐ Single ☑ Married ☐ Widowed ☐ Separated ☐ Other/s:	17. RESIDENTIAL ADDRESS	ESIDENTIAL ADDRESS House/Block/Lot No. Subdivision/Village			Street CONALUM Barangay		
7. HEIGHT (m)	5'8"		INOPACAN		Leyte			
8. WEIGHT (kg)	80kl	ZIP CODE	City/Municipality 6522		/	Province		
9. BLOOD TYPE	AB	18. PERMANENT ADDRESS	1					
10. GSIS ID NO.	2004236615			use/Block/Lot I		- 0	Street	
11. PAG-IBIG ID NO.	N/A		INOP	ACAN			Barangay Leyte	
12. PHILHEALTH NO.	13-00004976-4	ZIP CODE		city/Municipalit	У		Province	
13. SSS NO.	N/A	19. TELEPHONE NO.	N/A					
14. TIN NO.	426-623-706	20. MOBILE NO.	09057	727830				
15. AGENCY EMPLOYEE NO.	V000740	21. E-MAIL ADDRESS (if any)				N/A		
II. FAMILY BACKGROUND								
22. SPOUSE'S SURNAME	AVENIDO		23. NAME of Ch	HILDREN (Wr	ite full name and	d list all)	DATE OF BIRT	H (mm/dd/yyyy)
FIRST NAME	ELAINE	NAME EXTENSION (JR., SF N/A	(1)	JOSE FELIX L. AVENIDO			AUG.17,2013	
MIDDLE NAME	LOZARES		_	Lagi L Avanido			Say -22-2017	
OCCUPATION	BRANCH SECRETARY							
EMPLOYER/BUSINESS NAME	MOTOR TRADE NATIONWIDE COOP.							
BUSINESS ADDRESS	DAET, CAMARINES NORTE							
TELEPHONE NO.	N/A							
24. FATHER'S SURNAME	AVENIDO						riz mr (
FIRST NAME	JOSE	NAME EXTENSION (JR., SR) N/A						
MIDDLE NAME	DAPEGRAN							
25. MOTHER'S MAIDEN NAME	BERAY							
SURNAME	AVENIDO	1 1						
FIRST NAME	MAOLITA							
MIDDLE NAME	PECSON			(4	Continue on se	parate sheet if neces	ssary)	
III. EDUCATIONAL BACKG	ROUND							
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGI (Write in full)			ATTENDANCE	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
ELEMENTARY	INOPACAN CENTRAL SCHOOL	Primary Educa	ation	1993	1997	N/A	1997	N/A
SECONDARY	INODACAN INOTITIES	High Shool Edu	cation	1997	2001	N/A	2001	N/A
VOCATIONAL /	INOPACAN INSTITUTE HIGH SCHOOL	GENERAL AUTO	MOTIVE	2004	2005	N/A	2005	N/A
TRADE COURSE COLLEGE	PATEROSMAN POWER	N/A		N/A	N/A	N/A	N/A	N/A
GRADUATE STUDIES	N/A N/A	N/A		+	-			
GRIDORIE GLODIES		Continue on separate sheet if ne	cessarv)	N/A	N/A	N/A	N/A	N/A
SIGNATURE	A.	DATE	T	-8-	2018	CS FORM 21	2 (Revised 2017)	, Page 1 of 4

	BU (BOARD) BAR) UNDER 1							(aldenila)
		RATING (If Applicable)	DATE OF EXAMINATION / PLACE OF EXAMINATION / CONFERMENT CONFERMENT			MENT	LICENSE (if ap	Date of Validity
N/A			1188 814					

	+							
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			17. 11.					
		(Cor.	ntinue on separate sheet i	f necessary)				
EXPERIENCE								
LUSIVE DATES mm/dd/yyyy)	POSITION T	ITLE	DEPARTMENT / AGE	NCY / OFFICE / COMPANY	MONTHLY	SALARY/ JOB/ PAY GRADE (II	STATUS OF	GOV'T SERVICE
То	(Write in full/Do not	abbreviate)	(Write in full/	Do not abbreviate)	SALARY	(Formal *00-0")/ INCREMENT	APPOINTMENT	(Y/ N)
2006	WELDER		SECTION	COMPANY	8,000.00	N/A	contract	no
2007	DRIVER		THRE	E TOUCH	8,000.00	N/A	contract	no
2010	DRIVER				12,000.00	N/A	REGULAR	no
PRESENT	ADMINISTRATIVE A	NDE III	PHILROO	TCROPS, VSU	11,488.00	SG 3	Permanent	yes
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	EXPERIENCE vate employmen USIVE DATES nm/dd/yyyy) To 2006 2007 2010 PRESENT	EXPERIENCE vate employment. Start from your recen. USIVE DATES mm/dd/yyyy) To 2006 WELDER 2010 DRIVER PRESENT ADMINISTRATIVE A	EXPERIENCE Vate employment. Start from your recent work) Description USIVE DATES mm/ddyyyy) To 2006 WELDER 2010 DRIVER PRESENT ADMINISTRATIVE AIDE III Contact of the process of t	EXPERIENCE vate simployment. Start from your recent work) Description of duties should be USIVE DATES minddyyyy) To 2006 WELDER SECTION 2010 DRIVER THRE 2010 DRIVER MGMM PRESENT ADMINISTRATIVE AIDE III PHILROO	(Confinue on separate sheet if necessary) EXPERIENCE value engaloyment. Start from your recent world Description of duties should be indicated in the attended by the start of the start	EXPERIENCE Value on playariant. Start from your recent world Description of duties, should be instituted in the attachment Works Graph (Write in MIDo not abbreviate) To Description ITILE (Write in MIDo not abbreviate) Description ITILE (Write	(Confiner on asperate sheet if necessary) EXPERIENCE Vote simple symmet. Start from your second work) Description of duties about 5 th inside and in the attended North Experience sheet. 150-FE ANTES POSITION TITLE (Write in \$400 not abbreviate) TO DRIVER SECTION COMPANY \$1,000.00 NIA 2007 DRIVER THREE TOUCH \$1,000.00 NIA ADMINISTRATIVE AIDE III PHILROTOROPS, VSU 11,488.00 SG 3 (Confiner on asperate sheet if necessary)	Confinite on separate sheet if measury) EXPERIENCE SET from your second second post property and the property of the second post post property of the second post post post post post post post post

29. NAMI	E & ADDRESS OF ORGANIZATION		/E DATES			he with the literature
	(Write in full) (mm/dd/yyyy) NUMBER OF		NUMBER OF HOURS	POSIT	SITION / NATURE OF WORK	
	N/A					
				1 4 2 1		
		-		100		
II. LEARNING AND I	DEVELOPMENT (L&D) INTERVENTIO		eparate sheet if			
	\$D/training program and include only the relevan				hiel/Executive/Managerial	positions)
30. TITLE OF LEARNING PROGR	AND DEVELOPMENT INTERVENTIONS/TRAININ AMS (Write in full)	G ATTEN	E DATES OF NDANCE Md/yyyy)	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
		From	То			
	N/A					
		+		+		
		-				
			100			
		(Continue on	separate sheet ii	necessary)		
/III. OTHER INFORM	ATION					.
31. SPECIAL SKILLS 8	and HOBBIES 32.	NON-ACADEM	C DISTINCTION (Write in full)	S / RECOGNITION		33 MEMBERSHIP IN ASSOCIATION/ORGANIZATIO (Write in full)
Driving			N/A			N/A
Basic Mecha	nic					
Welding						
			1			
					-5	

34.	Are you related by consanguinity or affinity to appointing chief of bureau or office or to the person who has immediate Bureau or Department where you will be appointed,					
	a. within the third degree? b. within the fourth degree (for Local Government Unit - Care	YES NO				
			If YES, give details:			
35.	a. Have you ever been found guilty of any administrative offer	ense?	YES NO			
			If YES, give details:			
	b. Have you been criminally charged before any court?		YES NO If YES, give details:			
			Date Filed:Status of Case/s:			
36.	Have you ever been convicted of any crime or violation of a	ny law, decree, ordinance or regulation by	☐ YES ☑ NO			
	any court or tribunal?	If YES, give details:				
37.	Have you ever been separated from the service in any of the dropped from the rolls, dismissal, termination, end of term, from the public or private sector?	☐ YES ☑ NO If YES, give details:				
38.	A. Have you ever been a candidate in a national or local ele Barangay election)?	ction held within the last year (except	YES NO If YES, give details:			
	b. Have you resigned from the government service during the election to promote/actively campaign for a national or local	☐ YES ☑ NO If YES, give details:				
39.	Have you acquired the status of an immigrant or permanent	☐ YES ☑ NO If YES, give details (country):				
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag					
a.	and (c) Solo Parents Welfare Act of 2000 (RA 8972), please Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag					
	and (c) Solo Parents Welfare Act of 2000 (RA 8972), please	☐ YES ☑ NO If YES, please specify:				
b.	Are you a person with disability?		☐ YES ☑ NO If YES, please specify ID No:			
C.	Are you a solo parent?		☐ YES ☑ NO If YES, please specify ID No:			
41.	REFERENCES (Person not related by consanguinity or affinity to applica	nt /appointee)				
	NAME	ADDRESS	TEL. NO.			
	Maria Elsa M. Umpad	Ormoc City	563-7229			
	Enrique Abogadie	VSU. Baybay, Leyte	563-7229			
- 10	Erlinda Vasquez	VSU. Baybay, Leyte	563-7229			
42.	I declare under oath that I have personally accomplished the statement pursuant to the provisions of pertinent laws, rules the agency head / authorized representative to verification made in this document and its attachmagainst me.	s and regulations of the Republic of the Phi y/validate the contents stated herein.	lippines. I authorize			
	Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Drive's License, etc.) PLEASE INDICATE ID Number and Date of Issuance		X			
	Government Issued ID: VSU ID		A.			
Ľ	D/License/Passport No.: V000740	Signature (Sign inside the bo	x)			
	Date/Place of Issuance: N/A	Date Accomplished	Right Thumbmark			
	SUBSCRIBED AND SWORN to before me this NOV	ATTY. RYSAN C. GUINOR	his/her validly issued government ID as indicated above.			
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