

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	CASTAÑAS		
FIRST NAME	CARMELINO	NAME EXTENSION (JR., SR)	
MIDDLE NAME	CORTEZ		
3. DATE OF BIRTH (mm/dd/yyyy)	8/19/1066	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship
4. PLACE OF BIRTH	BUNGA, BAYABAY CITY, LEYTE	If holder of dual citizenship, please indicate the details.	<input type="checkbox"/> by birth <input type="checkbox"/> by naturalization
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		Pls. indicate country:
6 CIVIL STATUS	<input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	House/Block/Lot No. Street
7. HEIGHT (m)	5'3	ZIP CODE	BUNGA
8. WEIGHT (kg)	56 KG.		Subdivision/Village Barangay
9. BLOOD TYPE	"O"		BAYABAY LEYTE
10. GSIS ID NO.	956-0641318-01-0		City/Municipality Province
11. PAG-IBIG ID NO.	1700-0028-9362	ZIP CODE	6521
12. PHILHEALTH NO.	13-00073897-3		18. PERMANENT ADDRESS
13. SSS NO.	NONE	ZIP CODE	BUNGA
14. TIN NO.	930-232-692		Subdivision/Village Barangay
15. AGENCY EMPLOYEE NO.	V000148		BAYABY LEYTE
19. TELEPHONE NO.	NA		City/Municipality Province
20. MOBILE NO.	NA	6521	
21. E-MAIL ADDRESS (if any)	NA		

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	CASTAÑAS		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	GENEROSA	NAME EXTENSION (JR., SR)	LALA-JANE R. CASTAÑAS	12/5/1989
MIDDLE NAME	RAMERIZ			
OCCUPATION	HOUSE WIFE			
EMPLOYER/BUSINESS NAME	NONE			
BUSINESS ADDRESS	NONE			
TELEPHONE NO.	NONE			
24. FATHER'S SURNAME	CASTAÑAS			
FIRST NAME	ANTONIO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	MORALES			
25. MOTHER'S MAIDEN NAME				
SURNAME	CORTEZ			
FIRST NAME	FELECIDAD			
MIDDLE NAME	MENDEZ		(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	BUNGA ELEM. SCHOOL	N/A	1973	1979	GRADUATED	1979	NONE
SECONDARY	BUNGA NATIONAL HIGH SCHOOL	N/A	1979	1981	2ND YEAR	1981	NONE
VOCATIONAL / TRADE COURSE	SAINT JOSEPH TECHNICAL SCHOOL	N/A					
COLLEGE	N/A	N/A					
GRADUATE STUDIES	N/A	N/A					

(Continue on separate sheet if necessary)

SIGNATURE		DATE	04/21/2017	CS FORM 212 (Revised 2017), Page 1 of 4
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[illegible]

(Continue on separate sheet if necessary)

(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.

[illegible]

(Continue on separate sheet if necessary)

CS FORM 212 (Revised 2017), Page 2 of 4

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

[illegible]

(Continue on separate sheet if necessary)

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

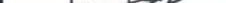
(Start from the most recent L&D/training program and include only the relevant L&D/training taken for the last five (5) years for Division Chief/Executive/Managerial positions)


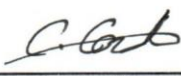
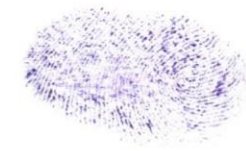

[illegible]

(Continue on separate sheet if necessary)

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
FINISHING CARPENTER	N/A	LSU, ADMINISTRATIVE PERSONNEL ASSOCIATION
FINISHING MASON	N/A	
ELECTRICAL WIRING	N/A	
DRIVING	N/A	

(Continue on separate sheet if necessary)

SIGNATURE		DATE	04/21/2017	CS FORM 212 (Revised 2017), Page 3 of 4
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<p>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 appointed,</p> <p>a. within the third degree?</p> <p>b. within the fourth degree (for Local Government Unit - Career Employees)?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>													
<p>35. a. Have you ever been found guilty of any administrative offense?</p> <p>b. Have you been criminally charged before any court?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>													
	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p style="text-align: right;">Date Filed: _____</p> <p style="text-align: right;">Status of Case/s: _____</p>													
<p>36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>													
<p>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?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>													
<p>38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?</p> <p>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?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>													
	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>													
<p>39. Have you acquired the status of an immigrant or permanent resident of another country?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details (country): _____</p>													
<p>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:</p> <p>a. Are you a member of any indigenous group?</p> <p>b. Are you a person with disability?</p> <p>c. Are you a solo parent?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify: _____</p>													
	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p>													
	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p>													
	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p>													
<p>41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)</p> <table border="1" style="width: 100%; border-collapse: collapse;"><thead><tr><th style="width: 35%;">NAME</th><th style="width: 35%;">ADDRESS</th><th style="width: 30%;">TEL. NO.</th></tr></thead><tbody><tr><td>ENGR. MARIO LILIO P. VALENZONA</td><td>VSU, BAYBAY CITY, LEYTE</td><td>NONE</td></tr><tr><td>MR. FLORENCIO MACARIOLA</td><td>BUNGA, BAYBAY CITY, LEYTE</td><td>NONE</td></tr><tr><td> </td><td> </td><td> </td></tr></tbody></table>		NAME	ADDRESS	TEL. NO.	ENGR. MARIO LILIO P. VALENZONA	VSU, BAYBAY CITY, LEYTE	NONE	MR. FLORENCIO MACARIOLA	BUNGA, BAYBAY CITY, LEYTE	NONE				<div style="text-align: center;"> <small>PHOTO</small></div>
NAME	ADDRESS	TEL. NO.												
ENGR. MARIO LILIO P. VALENZONA	VSU, BAYBAY CITY, LEYTE	NONE												
MR. FLORENCIO MACARIOLA	BUNGA, BAYBAY CITY, LEYTE	NONE												
<p>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.</p>														
<div style="border: 1px solid black; padding: 2px;"><p>Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)</p><p>PLEASE INDICATE ID Number and Date of Issuance</p><p>Government Issued ID: VSU ID</p><p>ID/License/Passport No.: V000148</p><p>Date/Place of Issuance: BAYBAY CITY, LEYTE</p></div>	<div style="border: 1px solid black; padding: 5px; text-align: center;"> Signature (Sign inside the box) <u>4-26-2017</u> Date Accomplished</div>	<div style="border: 1px solid black; padding: 5px; text-align: center;"> Right Thumbmark</div>												
<p>SUBSCRIBED AND SWORN to before me this <u>APR 26 2017</u>, affiant exhibiting his/her validly issued government ID as indicated above.</p> <div style="text-align: center; margin-top: 20px;"><div style="border: 1px solid black; padding: 10px; display: inline-block;"> ATTY. RYSZARD C. GUINOCOR Person Administering Oath</div></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div><p><small>D. 8-8-2017 10:22:11 AM LEYTE - 42/47</small></p><p><small>IBF 1030427 - TAGLORAN CITY - 12/19/16</small></p><p><small>MCLE COMP. NO. V-0003507-07/2015</small></p><p><small>ROLL OF ATTORNEYS NO. 57467</small></p></div><div style="text-align: right;"><small>CS FORM 212 (Revised 2017), Page 4 of 4</small></div></div>														