CS Form No. 212 Revised 2017

PERSONAL DATA SHEET

WARNING: Any misrepresentation 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 2. SURNAME POLIQUIT NAME EXTENSION (JR., SR) FIRST NAME **MARIA ARIES** MIDDLE NAME **ORTEGA** 3. DATE OF BIRTH 12/4/1982 16. CITIZENSHIP ☑ Filipino ☐ Dual Citizenship (mm/dd/yyyy) ☐ by birth ☐ by naturalization Pls. indicate country: PARAÑAQUE CITY 4. PLACE OF BIRTH If holder of dual citizenship please indicate the details 5. SEX ☐ Male ☑ Female Y ☐ Single ☑ Married 17. RESIDENTIAL ADDRESS 6 CIVIL STATUS House/Block/Lot No Street ☐ Widowed □ Separated BRGY. STA. CRUZ PUROK 2 Other/s: Subdivision/Village Barangay BAYBAY LEYTE LEYTE 1.52 7. HEIGHT (m) City/Municipality Province 54 6521 8. WEIGHT (kg) ZIP CODE 18 PERMANENT ADDRESS 9. BLOOD TYPE A House/Block/Lot No Street PUROK 2 BRGY, STA CRUZ 10. GSIS ID NO. Subdivision/Village Barangay BAYBAY LEYTE 1210-4131-2763 11 PAG-IBIG ID NO Province City/Municipality 12. PHILHEALTH NO. 01-025365423-1 ZIP CODE 6521 13 SSS NO 06-3563085-8 19 TELEPHONE NO 14. TIN NO. 229-084-697-000 20. MOBILE NO. 09156505743 15. AGENCY EMPLOYEE NO 21. E-MAIL ADDRESS (if any) ortega mariaaries@yahoo.com FAMILY BACKGROUND 22. SPOUSE'S SURNAME POLIQUIT 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) FIRST NAME JOSE KAYE ANGELINE O. POLIQUIT 8/7/2005 MIDDLE NAME ORACION SELF EMPLOYED OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO. FATHER'S SURNAME ORTEGA NAME EXTENSION (JR., SR) FIRST NAME BENITO MIDDLE NAME CANO MOTHER'S MAIDEN NAME SURNAME **AVELLANA** LOLITA FIRST NAME DELANTAR MIDDLE NAME (Continue on separate sheet if necessary) **EDUCATIONAL BACKGROUND** SCHOLARSHIP HIGHEST LEVEL PERIOD OF ATTENDANCE NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE YEAR ACADEMIC I FVFI UNITS FARNED HONORS RECEIVED GRADUATED (Write in full) (Write in full) (if not graduated) From To **Graduate With** LYCEE D' REGIS MARIE ELEMENTARY FLEMENTARY 1990 1996 1996 Distinction SECONDARY PARAÑAQUE SCIENCE HIGH SCHOOL SECONDARY 1999 1996 1999 VOCATIONAL / TRADE COURSE COLLEGE ADAMSON UNIVERSITY **BS IN ACCOUNTANCY** 2007 2011 2011 **GRADUATE STUDIES** VISAYAS STATE UNIVERSITY **MM - BUSINESS MANAGEMENT** 2017 On-going Present ue on separate sheet if necessary) SIGNATURE DATE 17/ 2020

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CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE			RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINA	TION / CONFERMENT		LICENSE (if a	Date of
CAREER SERVICE EXAMINATION			87.32%	10/17/2004	n Ch. Part Part Services Neor Ma	Manila Manila		school in	Validity
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34.	chief of bureau or office or to the person who has immediate Bureau or Department where you will be apppointed, a. within the third degree?	☐ YES ☑	NO				
	b. within the fourth degree (for Local Government Unit - Car	☐ YES ☑ NO If YES, give details:					
35.	a. Have you ever been found guilty of any administrative of	☐ 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 by any court or tribunal?	☐ YES ☑ NO If YES, give details:					
37.	Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, evout (abolition) in the public or private sector?	☐ YES ☑ NO If YES, give details: When I ended my Contract of Service with BFAR					
38.	a. Have you ever been a candidate in a national or local ele Barangay election)?	☐ YES ☑ NO If YES, give details:					
	b. Have you resigned from the government service during to last election to promote/actively campaign for a national or	☐ YES ☑ NO If YES, give details:					
39.	Have you acquired the status of an immigrant or permanen	☐ YES ☑ NO If YES, give details (country):					
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972)						
a.	Are you a member of any indigenous group?	☐ 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 applicant	t /appointee)					
The second	NAME	ADDRESS	TEL. NO.	2			
	LINA F. ZULUETA, CPA	BFAR-CENTRAL OFFICE	0998-435-9273				
	LORELEI S. DATU, CPA	COA - GAS	0942-018-0786				
	JAY CABREA, CPA	BURAUEN COMMUNITY COLLEGE	0995-486-9251				
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	In the state of the passport, GSIS, SSS, PRC, Driver's License, etc.) ILEASE INDICATE ID Number and Date of Issuance Overnment Issued ID: PHILHEALTH		1				
lŀ	O/License/Passport No.: 01-025365423-1	Signature (Sign inside the b	van)	THE RESERVE THE STATE OF THE ST			
D	ate/Place of Issuance: 05/06/2014	, and a second	Right Thumbmark				
	SUBSCRIBED AND SWORN to before me this1_7	SEP 2020 , affiant exhib	iting his/her validly issued g	povernment ID as indicated above.			
		ATTY. RYSAN C. GUINOCO					