Revised 2017	PERSO	NAL	DAT	A SH	IEE	_			
WADNING: Any misinferpreta	ntion made in the Personal Data Sheet and the						fariminal case/s	enginet the r	- Arrivan
concerned.							Criminai Casers	against ure p	Derson
	E TO FILLING OUT THE PERSONAL DATA SEES (and use separate sheet if necessary. Indicate				HE PDS FO	1. CS ID No.		(Do not fill up.	For CSC use only)
I. PERSONAL INFORMATIO									
2. SURNAME	ISRAEL							-1.00	
FIRST NAME	ZANDRO						NAME EXTENSION (JF	L, SR)	****
MIDDLE NAME	GALGO								
DATE OF BIRTH (mm/dd/yyyy)	5/3/1974	16. CITIZENSI	HIP		✓ Filipi	F	Dual Citizenship		
(mm/dd/yyyy)					Thip	IIIO L	by birth	by natural	ization
4. PLACE OF BIRTH	GUADALUPE, BAYBAY CITY, LEYTE	Ifh	older of dual citize	enship,			Pls. indicate of		
5. SEX	✓ Male Female	pk	ease indicate the d	etails.					•
6 CIVIL STATUS	Single Married	17. RESIDENT	TIAL ADDRESS		C. V. Selbergrage Phys. C.	distribution of the second	and the second second	P-13	
Experience of the Comment of the Com	☐ Widowed ☐ Separated	The Albert of Texase pureous	o to the same of the complete over the	Hou	ise/Block/Lot N	lo.		Street PATAG	
	Other/s:			Sul	bdivision/Villag	le		Barangay	
7. HEIGHT (m)	5'5			Ci	BAYBAY ity/Municipality		19.00.20.0000000000000000000000000000000	Province Province	1 1
8. WEIGHT (kg)	61 KG	ZIF	CODE				6521		
9. BLOOD TYPE	"0"	18. PERMANE	NT ADDRESS						
10. GSIS ID NO.	NONE	BONABS		Hou	ise/Block/Lot N	lo.	etsi.	Street PATAG	el ca
		THE STATE		Sut	bdivision/Villag		A.i	Barangay LEYTE	e a usaw
11. PAG-IBIG ID NO.	NONE	1		Ci	ity/Municipality			Province	
12. PHILHEALTH NO.	13-200414126-5	ZIP	CODE		M.D		6521	FUEATI	DECEMBER 1
13. SSS NO.	NONE	19. TELEPHON	NE NO.	-	9131	aneal	NONE	50.337	3007/4.0/
14. TIN NO.	917-637-678	20. MOBILE N	0.		näi	09	268423403	ORG.1	\$60 <u>0</u> 2012
15. AGENCY EMPLOYEE NO.	VJ00414	21. E-MAIL AD	DRESS (if any)				NONE	490 mm	3 5561 17
II. FAMILY BACKGROUND									
22. SPOUSE'S SURNAME	ISRAEL			23. NAME of CH	IILDREN (Writ	te full name an	d list all)	DATE OF BIR	TH (mm/dd/yyyy)
FIRST NAME	MARIFE	NAME EXTENSION	ON (JR., SR)	VANESSA F.	ISRAEL			10/1	0/1996
MIDDLE NAME	FERNANDEZ			VELLEJOEF.	. ISRAEL			3/6	/2002
OCCUPATION	HOUSE WIFE		THE PROPERTY OF THE PARTY OF TH						
EMPLOYER/BUSINESS NAME	NONE		allows was translationed also as		A				· / · · · · · · · · · · · · · ·
BUSINESS ADDRESS	NONE		42 14 14 14 14 14 14 14 14		A state of the sta				
TELEPHONE NO.	NONE				-				
24. FATHER'S SURNAME	ISRAEL						-		
FIRST NAME	CRISOLOGO	NAME EXTENSION	ON (JR., SR)						
MIDDLE NAME	BALLEBAS								-
25. MOTHER'S MAIDEN NAME	DALLEDAS								
	04100			-					water and
SURNAME	GALGO								
FIRST NAME	ROSETA								
MIDDLE NAME	MABALE				(Co	ontinue on se	parate sheet if neces	sary)	
III. EDUCATIONAL BACKG	FROUND								
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC ED	OUCATION/DEGRI (Write in full)	EE/COURSE	PERIOD OF /	ATTENDANCE To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
ELEMENTARY	GUADALUPE ELEMENTARY SCHOOL		N/A		1982	1986	GRADUATED	1986	NONE
SECONDARY	BAYBAY HIGH SCHOOL	N/A			1987	1992	GRADUATED	1992	NONE
VOCATIONAL / TRADE COURSE	N/A		N/A						
COLLEGE	N/A		N/A						
GRADUATE STUDIES	N/A.		N/A					Maria Maria Maria	
SIGNATURE	(0	ontinue on sep	DATE		luly 11, 2019		CS FORM 212	(Revised 2017)	, Page 1 of 4

	ERVICE ELIGIBI	LIII						20 10	
_	ER SERVICE/ RA 1080	(BOARD/ BAR) UNDER	RATING	DATE OF			NAME OF TAXABLE PARTY.	LICENSE (if ap	oplicable)
	SPECIAL LAWS/ RANGAY ELIGIBILITY	CES/ CSEE	(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINA	TION / CONFER	MENT	NUMBER	Date o Validity
	N/A	a secondary contra h	ornaer han pla	10720 x 191045 2 x 1	There is a second		2 8 5 50		
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							152		
							2 (18)		
5.2									
			(Cor	ntinue on separate sheet if	necessary)				
	EXPERIENCE rate employment.	Start from your recen	t work) Descriptio	n of duties should be	indicated in the attach	ed Work Exp	erience shee	t	
INCLU	USIVE DATES m/dd/yyyy)	POSITION TI	38.86		CY / OFFICE / COMPANY	MONTHLY	SALARY/ JOB/ PAY GRADE (if	STATUS OF	GOVT
From	То	(Write in full/Do not			o not abbreviate)	SALARY	applicable)& STEP (Format "00-0")/ INCREMENT	APPOINTMENT	SERVIC (Y/N)
/2014	PRESENT	ADMINISTRATIV	E AIDE III	GENERAL SERVI	CES DIVISION, VSU	11,000.00		PERMANENT	YES
0/2014	1/1/2009	LANDCAPE FO	REMAN		ANT OFFICE, VSU	6,500.00		J.0	YES
31/2008	1/1/2006	LABORE	R		ANT OFFICE, VSU	5,500.00		J.0	YES
31/2005	1/1/2005	LABORE	R		NT OFFICE, VSU	4,000.00	1979	J.0	YES
31/2004	1/1/2000	LABORE	R	VS	J, ITE	4,000.00	73.2%	J.O	YES
1/1999	6/1/1994	NARSERY WO	ORKER		A, GTZ	4,000.00	oracis. 4	J.O	YES
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29. NAME & ADDRESS OF OR		INCLUSIV	E DATES	32 35 5200	C	
(Write in full)		(mm/di	d/yyyy) To	NUMBER OF HOURS		POSITION / NATURE OF WORK
N/A		FION	10			N/A
						NA
	277			1-34c a vs		
	dy Sint I					
	(Con	tinue on separate s	heet if necessa	y)		
II. LEARNING AND DEVELOPMENT (L&D)						
tart from the most recent L&D/training program and includ	e only the relevant L&D/training taken for	INCLUSIVE	NAME AND ADDRESS OF THE OWNER, WHEN PERSON NAMED AND ADDRESS OF TH	Chief/Executive/Manag		
TITLE OF LEARNING AND DEVELOPMENT INTE (Write in full)	RVENTIONS/TRAINING PROGRAMS	ATTENI (mm/do	DANCE	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/	CONDUCTED/ SPONSORED BY
(vinc ar loay		From	To	A Cara La year	Technical/etc)	(Write in full)
N/A	No. of Control and Advanced					
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	(Co	ntinue on separate	sheet if necessa	ry)		
VIII. OTHER INFORMATION						The second secon
31. SPECIAL SKILLS and HOBBIES	32. NO	N-ACADEMIC DISTI		OGNITION	\$100 S.A.S.A	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATIO
STECHE SINELS and TIODELES	32	(Writ	e in full)			33. (Write in full) LSU, ADMINISTRATIVE PERSONNEL
N/A	Company of the second s	N//	A			ASSOCIATION
					The second second	1 - 10 - 12 1 1 1 - 1 1 1 1 1 1 1 1 1 1 1 1 1
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	(Co	ontinue on separate	sheet if necess			
SIGNATURE	1		DATE	named a second control of	luly 11, 2019	CS FORM 212 (Revised 2017), Page 3

34. Are you related by consanguinity or affinity to the appoin	ting or recommending authority or to the		
chief of bureau or office or to the person who has immed	하는 기급하는 것이 없는 그의 전치를 받아 다시가 가게 급하는데 되었다. 그 가급하는 것 같아 없는 것이 없다.		
Bureau or Department where you will be apppointed,	mate supervision over you in the Onice,		
a. within the third degree?		☐ YES ☑ NO	
b. within the fourth degree (for Local Government Unit -	Career Employees)?	YES NO	
b. Within the local degree (for Local Government only	Odicci Employecs):	If YES, give details:	
		II TES, give details.	
	"		
35. a. Have you ever been found guilty of any administrative	offense?	YES NO	
		If YES, give details:	
		YES NO	
b. Have you been criminally charged before any court?		If YES, give details:	
		Date Filed	4.
		Status of Case/s	
		Status of Gase/s	
36. Have you ever been convicted of any crime or violation of	of any law, decree, ordinance or regulation	YES VO	
by any court or tribunal?		If YES, give details:	
37. Have you ever been separated from the service in any o	of the following modes: resignation		
retirement, dropped from the rolls, dismissal, termination		☐ YES ☑ NO If YES, give details:	
out (abolition) in the public or private sector?	, one or term, mission conductor princes	ii 120, give detaile.	
38. a. Have you ever been a candidate in a national or local	election held within the last year leveent		
Barangay election)?	election field within the last year (except	YES NO	
balangay decitori):		If YES, give details:	
b. Have you resigned from the government service durin	ig the three (3)-month period before the	YES V NO	
last election to promote/actively campaign for a national	or local candidate?	If YES, give details:	
39. Have you acquired the status of an immigrant or perman	nent resident of another country?		
33. That's you dodained the states of all miningrant of political	ione roodone or another octavaly.	YES NO	
		If YES, give details (country):	
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b)	Magna Carta for Disabled Persons (RA	and the second of the second o	
7277); and (c) Solo Parents Welfare Act of 2000 (RA 89)	72), please answer the following items:		
a. Are you a member of any indigenous group?		YES NO	
		☐ YES ☑ NO If YES, please specify:	
b. Are you a person with disability?		If YES, please specify: YES NO	
Are you a person with disability? Are you a solo parent?		☐ YES ☑ NO If YES, please specify ID No: ☐ YES ☑ NO	
		☐ YES ☑ NO If YES, please specify ID No:	
c. Are you a solo parent?	ant (annointea)	☐ YES ☑ NO If YES, please specify ID No: ☐ YES ☑ NO	
c. Are you a solo parent? 41. REFERENCES (Person not related by consanguinity or affinity to applications)	ant /appointee)	☐ YES ☑ NO If YES, please specify ID No: ☐ YES ☑ NO	
c. Are you a solo parent?	ant /appointee) ADDRESS	☐ YES ☑ NO If YES, please specify ID No: ☐ YES ☑ NO	
c. Are you a solo parent? 41. REFERENCES (Person not related by consanguinity or affinity to applications)	ADDRESS	☐ YES ☑ NO If YES, please specify ID No: ☐ YES ☑ NO If YES, please specify ID No: TEL NO.	
c. Are you a solo parent? 41. REFERENCES (Person not related by consanguinity or affinity to applica NAME DR. PACIENCIA P. MILAN		☐ YES ☑ NO If YES, please specify ID No: ☐ YES ☑ NO If YES, please specify ID No:	
c. Are you a solo parent? 41. REFERENCES (Person not related by consanguinity or affinity to applica	ADDRESS	☐ YES ☑ NO If YES, please specify ID No: ☐ YES ☑ NO If YES, please specify ID No: TEL NO.	
c. Are you a solo parent? 41. REFERENCES (Person not related by consanguinity or affinity to applica NAME DR. PACIENCIA P. MILAN MR. FELIX ABANERA	ADDRESS GUADALUPE, BAYBAY CITY, LEYTE PATAG, BAYBAY CITY, LEYTE	☐ YES	
c. Are you a solo parent? 41. REFERENCES (Person not related by consanguinity or affinity to applicate NAME DR. PACIENCIA P. MILAN MR. FELIX ABANERA DR. JOSE L. BACUSMO	ADDRESS GUADALUPE, BAYBAY CITY, LEYTE PATAG, BAYBAY CITY, LEYTE VSU, BAYBAY CITY, LEYTE	☐ YES	
c. Are you a solo parent? 41. REFERENCES (Person not related by consanguinity or affinity to applica NAME DR. PACIENCIA P. MILAN MR. FELIX ABANERA DR. JOSE L. BACUSMO 42. I declare under oath that I have personally accomplisi	ADDRESS GUADALUPE, BAYBAY CITY, LEYTE PATAG, BAYBAY CITY, LEYTE VSU, BAYBAY CITY, LEYTE hed this Personal Data Sheet which is a	☐ YES	
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