CS Form No. 212						
Revised 2017	PERS	SONAL DAT	A SI	IEET		
WARNING: Any misrepresenta	ntion made in the Personal Data Sheet	and the Work Experience Sheet si	nall cause the f	iling of administrative/cri	minal case/s aga	inst the person
concerned.	TO FILLING OUT THE PERSONAL DA					•
	s (and use separate sheet if necessary.			1. CS ID No.		(Do not fill up. For CSC use only
I. PERSONAL INFORMATIO	NC					
2. SURNAME	CAINTIC					
FIRST NAME	HEHRY				NAME EXTENSION (J	R., SR) N/A
MIDDLE NAME	SABEJON				HW	DAA .
3. DATE OF BIRTH *	11-20-194	16. CITIZENSHIP			7	
(mm/dd/yyyy)	No constitution	0.8		Filipino	Dual Citizenship by birth	by naturalization
4. PLACE OF BIRTH	MANILA	If holder of dual ci	izenship,		Pls. indicate of	
5. SEX	Male Fer	male please indicate th	e details.	Philippines		-
6 CIVIL STATUS	Single Ma	fried 17. RESIDENTIAL ADDRESS				
	Widowed Sep	parated	Н	ouse/Block/Lot No.	X DALLIE	Street Zone 6 - The class
7.115(0)(5.6.)	E'011	- 150 / X		Subdivision/Village (40)	it NINT	Barangay PRGX
7. HEIGHT (m)	100	(DOZI-A	1	City/Municipality BA	PAYO	Province DEXT
8. WEIGHT (kg)	196/65.	ZIP CODE	(a50)	J-A		
9. BLOOD TYPE	13	18. PERMANENT ADDRESS	Н	ouse/Block/Lot No.		Street
10. GSIS ID NO.	1P-580520	7/28/92			DALYPE	BRZX
11. PAG-IBIG ID NO.	1400-00028-	20/4		subdivision/village 5 4	BAYCE	Barangay J
12. PHILHEALTH NO.	1/2-5×XXXXXX+2	Z Z ZIP CODE	15	City/Municipality		Province DD 176
13. SSS NO.	18 0000 150	4	100			
	(1-56/10TT5	19. TELEPHONE NO.	Xai	77 m Y 2 1	T11	
14. TIN NO.	909-7-10 9	20. MOBILE NO.		36 208 2		-2
15. AGENCY EMPLOYEE NO.	1000582	21. E-MAIL ADDRESS (if any)	BRG	Y-GUAPAL	WHE,	PH. COM
II. FAMILY BACKGROUND						•
22. SPOUSE'S SURNAME		NAME CATENCION (ID. 60)	23. NAME of 0	CHILDREN (Write full name and	d list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME		NAME EXTENSION (JR., SR)				
MIDDLE NAME						
OCCUPATION			1			
EMPLOYER/BUSINESS NAME						
BUSINESS ADDRESS						
TELEPHONE NO.						
24. FATHER'S SURNAME	CAINTIC					
FIRST NAME	BIENVENID	NAME EXTENSION (JR., SR)				
MIDDLE NAME	CORPIZ					7
25. MOTHER'S MAIDEN NAME	10			2 =		
SURNAME	SABEJON	TECE ASED				
FIRST NAME	MELENA	July 5				
MIDDLE NAME	BALLEBAS			(Continue on se	parate sheet if neces	ssary)
III. EDUCATIONAL BACKS						
26.	NAME OF SCHOOL	BASIC EDUCATION/DEC	PEE/COLIBSE	PERIOD OF ATTENDANCE	HIGHEST LEVEL/ UNITS EARNED	SCHOLARSHIP/ YEAR ACADEMIC

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)

From To

FRANCISCA NOOLLOF THE IMM CONSCRPTION FOUTH YEAR 980 1984

VOCATIONAL / TRADE COURSE

COLLEGE

FOR TO

TUNIOR BEREFY 1985 UNDER GRADUATE

GRADUATE

GRADUATE

CONL. DE VELL

CONTINUE ON Separate sheet if necessary)

DATE

TAN. 23, 2019

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SIGNATURE

IV. CIVIL SERVICE ELIGIBILITY IT. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER												
			D/ BAR) UNDER	RATING	DATE O	DATE OF EXAMINATION / PLACE OF EXAMINATION / CONFERM				LICENSE (if		
SPELIAL LAVISICES/CSEE		(If Applicable)	CONFERM		PLACE OF EXAMINA	(TION / CONFER	MENI	NUMBÉR	Date of Validity			
	(ON	H					Non	NONE				
				Υ			(-)+					
				(Co	ntinue on separa	nte sheet	if necessary)				-	
WORK EXPER lude private em		Start	from your recen				e indicated in the attack	ied Work Ext	serience she	9 /	and the second	
INCLUSIVE DA (mm/dd/yyy			POSITION TI (Write in full/Do not a		DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)			MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/N)	
75 20	800 8	300	RITY GU	iRD	VAS SCTY, AGENCY			6,000				
oos ats	Prezen	<i>t</i>	11 11		VPS SCTY, AGENCY VOUSCTY OFFICE			13,000	1	CASCUL	2190×	
			j	10=1					- 57		Meso	
							FX(*)					
		•										
	-	i a				1.51						
				2-1-2-7-2-8-1			1					
			1,211		4	1 15	- Carrier Comment					
	4, 7		A CONTRACTOR									
				1								
E1.634 - 3					264	84C)		VARIAN				
				infic	ntinue on separa	ite sheet	if necessary)	19	3			

NAME & ADDRESS OF ORG	GANIZATION	INCLUSIVE (mm/dd/y		NUMBER OF HOURS		POSITION / NATURE OF WORK
(Write in full)		From	To	NOMBER OF HOURS		FOSITION / NATURE OF WORK
			1/			
NONE						HONA
						77-042
	(Con	itinue on separate s	heet if necessa	ny)		
ARNING AND DEVELOPMENT (L&D) In the most recent L&D training program and include	NTERVENTIONS/TRAINING PR	OGRAMS ATTE	ENDED		nial positions)	
TITLE OF LEARNING AND DEVELOPMENT INTER (Write in full)	VENTIONS/TRAINING PROGRAMS	INCLUSIVE D ATTEND (mm/dd/	ANCE	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
	101 1615	17/151	H			STANDA DIE
		111111111111111111111111111111111111111	12 Mr.			-34-10 WA
						\$70
OTHER INFORMATION	(Cor	ntinue on separate s	heet if necessa	(ייי)		
SPECIAL SKILLS and HOBBIES	32. NON-	ACADEMIC DISTING (Write i		GNITION	Service of the servic	MEMBERSHIP IN ASSOCIATION/ORGANIZA (Write in full)
	4/2	Visite in				
	The said	1 V5	074-5			

			The state of the s			
34	Are you related by consanguinity or affinity to the chief of bureau or office or to the person who has immedi	ing or recommending authority, or to the				
	Bureau or Department where you will be approinted,	ate supervision over you in the Office,		. ,		
	a. within the third degree?	YES NO				
	b. within the fourth degree (for Local Government Unit - C	YES NO				
			If YES, give details:			
35.	a. Have you ever been found guilty of any administrative	offense?				
	Jan, 1 an, annual auto	311311301	☐ YES ☑ NO If YES, give details:			
			ii 125, give details.			
	b. Have you been criminally charged before any court?					
	oranged boloro any court:	If YES, give details:				
		Date Fi	led:			
26	Have you ever been convicted of any stime or violation of		Status of Cas	e/s:		
36.	Have you ever been convicted of any crime or violation of any court or tribunal?	any law, decree, ordinance or regulation by	I I IES E NO			
			If YES, give details:			
37.	Have you ever been separated from the service in any of the	he following modes: resignation				
	retirement, dropped from the rolls, dismissal, termination,	end of term, finished contract or phased out	☐ YES NO If YES, give details:			
	(abolition) in the public or private sector?					
38.	Have you ever been a candidate in a national or local el Barangay election)?	ection held within the last year (except	☐ YES ☑ NO If YES, give details:)		
	b. Have you resigned from the government service during	the three (3)-month period before the last	YES NO	0		
	election to promote/actively campaign for a national or loc	If YES, give details:				
39.	Have you acquired the status of an immigrant or permaner	nt resident of another country?	☐ YES ☑ NO			
			If YES, give details (country	/):		
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) M	agna 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?		YES NO	0		
b.	Are you a person with disability?		If YES, please specify:			
			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 applican	4 (one sintes)	IT I L'S, piease specify ID No.			
	NAME	T				
*		ADDRESS	TEL. NO.	ID picture taken within the last 6 months		
P	DDING BALTAZAR	TAB ANAMILIM	HORFE	3.5 cm. X 4.5 cm (passport size)		
R	BERTA GALVEZ	TAB-ANG, KILIM		With full and handwritten		
D	ELHIA CALLINGA	TABANG, KILLIO	11	ame tag and signature over printed name		
42.	I declare under oath that I have personally accomplished to	his Personal Data Sheet which is a true, cor	rect and complete	Computer generated or photocopied picture		
	statement pursuant to the provisions of pertinent laws, authorize the agency head / authorized representative to	rules and regulations of the Republic of	the Philippines. I	is not acceptable		
	misrepresentation made in this document and its attachr	ments shall cause the filing of administrati	ve/criminal case/s	PHOTO		
	against me.	·				
Go	evernment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)			control Wear life		
PL	EASE INDICATE ID Number and Date of Issuance	Rozaiotie				
Go	vernment Issued ID: 13-505059507-7					
ID/	License/Passport No.: VOOO 582)				
Da	te/Place of Issuance: TAH, Q, 2010	9	Dight Thumbwook			
_		Date Accomplished		Right Thumbmark		
	SUBSCRIBED AND SWORN to before me this	0 4 2019 affiant exhibiting	ng his/her validly issued governmen	nt ID as indicated above.		
		M				
			4			
)				
		VSULE Person Administrating Oath		6 . The street of the street		