

CS Form No. 212 Revisza 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 READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM.) 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 **BENITEZ** NAME EXTENSION (JR., SR) FIRST NAME **CECILIO** MIDDLE NAME **MONTEROLA** 3. DATE OF BIRTH 10/31/1959 16. CITIZENSHIP (mm/dd/yyyy) ✓ Filipino Dual Citizenship by birth by naturalization 4. PLACE OF BIRTH BAYBAY, LEYTE If holder of dual citizenship. Pls. indicate country: please indicate the details. 5. SEX ✓ Male ✓ Female ✓ Single Married 17. RESIDENTIAL ADDRESS 6 CIVIL STATUS Widowed ✓ Separated House/Block/Lot No Street KILIM Other/s: Subdivision/Village Barangay 7. HEIGHT (m) 152.4 m BAYBAY CITY LEYTE City/Municipality Province 8. WEIGHT (kg) 64.2 kg ZIP CODE 6521 18. PERMANENT ADDRESS 9. BLOOD TYPE "AB" House/Block/Lot No. Street 10. GSIS ID NO. N/A KILIM Subdivision/Village Barangay 11. PAG-IBIG ID NO. BAYBAY CITY 1210-4827-2421 LEYTE City/Municipality 12. PHILHEALTH NO. 13-025105498-4 ZIP CODE 6521 13. SSS NO. 03-5764954-1 19. TELEPHONE NO. N/A 14. TIN NO. 145-335-135 20. MOBILE NO. 0926 890 9440 15. AGENCY EMPLOYEE NO. 21. E-MAIL ADDRESS (if any) cmb benitez530@yahoo.com II. FAMILY BACKGROUND 22. SPOUSE'S SURNAME N/A 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) FIRST NAME N/A MIDDLE NAME N/A OCCUPATION N/A EMPLOYER/BUSINESS NAME N/A **BUSINESS ADDRESS** N/A TELEPHONE NO. N/A 24. FATHER'S SURNAME BENITEZ NAME EXTENSION (JR., SR) FIRST NAME CATALINO (DECEASED) MIDDLE NAME SENO 25. MOTHER'S MAIDEN NAME SURNAME **MONTEROLA** FIRST NAME MACARIA (DECEASED) MIDDLE NAME CERNA

MIDDLE NAME	CERNA		(Continue on separate sheet if necessary)				
III. EDUCATIONAL BAC	CKGROUND		Variable)		MUNICAL	evivation	
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)			HIGHEST LEVEL/ UNITS EARNED	YEAR GRADUATED	SCHOLARSHIP ACADEMIC HONORS
			From	То	— (If not draduated) I	RECEIVED	
ELEMENTARY	KILIM ELEMENTARY SCHOOL	PRIMARY	1968	1973		1973	N/A
SECONDARY	BAYBAY HIGH SCHOOL	SECONDARY	1973	1978	= 120	1978	N/A
VOCATIONAL / TRADE COURSE		N/A					7
COLLEGE	FRANCISCAN COLLEGE OF THE IMMACULATE CONCEPCION	ASSOCIATE IN SECRETARIAL SCIENCE	1978	1980		1980	N/A
GRADUATE STUDIES		N/V					7 - 4
		(Continue on separate sheet if necessary)					
SIGNATURE	Man/		DATE		10-7 - 0%		

and

10-7-7019

DATE

	SERVICE ELIGII	BILITY	SAMAN						
27. CAF	REER SERVICE/ RA 10 SPECIAL LAW	80 (BOARD/ BAR) UNDER	RATING	DATE OF EXAMINATION /	PLACE OF EXAMINA	TION / CONFE	RMENT	LICENSE (if a	1
E		Y / DRIVER'S LICENSE	(If Applicable)	CONFERMENT	T BACE OF EARININA	MINATION / CONFERMENT		NUMBER	Date of Validity
	N/A				N	N/A			
						,			
	·		*		*				
						-			
								3	
			,						
V WORK	EXPERIENCE		(C	ontinue on separate sheet	if necessary)				
		t. Start from your recent	work) Descript	ion of duties should	be indicated in the attach	ed Work Ex		et.	
	(mm/dd/yyyy) POSITION TITLE		DEPARTMENT / AGENCY / OFFICE / COMPANY		MONTHLY	SALARY/ JOB/ PAY GRADE (if applicable) & STEP	STATUS OF	GOV'T SERVICE	
From	То	(Write in full/Do not ab	obreviate)	(Write in full/Do not abbreviate)		SALARY	(Format "00-0")/ INCREMENT	APPOINTMENT	(Y/N)
7/1/2014	Present	Job Order Cl	erk	Institute of Tropical Ecology & Environmental Management		240.00/day		Job Order	Yes
8/7/2006	6/30/2014	Job Order Cl	erk	PhilRootcrops		240.00/day		Job Order	Yes
2/9/2005	3/31/2005	Job Order Cl	erk	Department of Deve	lopment Communication	220.00/day		Job Order	Yes
4/1/2004	6/30/2004	Job Order Cl	erk	Security Office		220.00/day		Job Order	Yes
4/8/1994	12/31/1999	Clerk I		ViSCA-GTZ Ecology Program		6,273.60/ month		Casual	Yes
5/17/1993	7/31/2993	Library Cler	k	Dela Salle University		75.00/day		Contractual	No
12/1/1992	4/30/1992	Data Entry Ope	erator	Data Entry Operator		75.00/day		Contractual	No
1/5/1990	11/30/1992	Qualita Network	k,Inc.	Data Entry Operator		75.00/day		Contractual	No
3/6/1990	6/30/1990	Data Encod	er	Omnidata Computer Corporation		75.00/day		Contractual	No
6/1/1990	10/31/1990	Encoder		Dynamic Party Sales		75.00/day		Contractual	No
12/16/1988	12/9/1999	Production CI	erk	American Jeans & Sportswear, Inc.		3,000.00/ month		Contractual	No
6/1/1985	12/15/1988	Clerk Typis	t	Allied Banking Corporation- MSD Department		2,500.00/		Contractual	No
						month			
					-				
		5							
			(Co	ontinue on separate sheet	if necessary)				
SIGN	NATURE	fin	1		DATE	lo	-7.701	ч	
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VI. VOLUNTARS WORK OR INVOLVEMENT IN CIVIC			ORGANIZA.	.1/5	
29. NAME & ADDRESS OF ORGANIZATION (Write in full)	(mm/c	VE DATES id/yyyy)	NUMBER OF HOURS		POSITION / NATURE OF WORK
N/A	From	То			
	-				
	N - 8 12 - 280	100 5 100			
	3				
VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING F		TTENDED			
Start from the most recent L&D/training program and include only the relevant L&D/training taken for	INCLUSIV	E DATES OF	Chief/Executive/Man	agerial positions) Type of LD	
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)		IDANCE id/yyyy)	NUMBER OF HOURS	(Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
Seminar Workshop on Personality Development, Customer Service, Human Relations, Oral and	From	2/7/1998	8.0		Cora Doloroso Career Center
Writeen Communications Product Launching of BIOTEC-DOST		7/29/2009	4.0		PhilRootcorps Training Center
Training on Safety Driving and Traffic Rules and Regulations		12/10/2010	4.0		LTO Baybay
Renewable Energy Sources for Rural Development		3/26/2012	4.0		PhilRootcorps Training Center
Anti-Red Tape Law & CSC Policy on Cash Advances		9/24/2012	4.0		ODAHRD
Workshop to Review and Improve Citizen's Charter		9/1/2016	8.0		ODAHRD
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irta -	- 131				
(Coi	ntinue on separate	sheet if necessa	ary)		
VIII. OTHER INFORMATION					
31. SPECIAL SKILLS and HOBBIES 32. NOT	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)				33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
cooking & driving	N	/A			N/A
				,	
					/ -
	ntinue on separat	e sheet if necess	AT \$1000 TO LEGIS		
SIGNATURE			D.	ATE	0-7- WLG CS FORM 212 (Revised 2017) Page 3 of

chief of bureau or office or to the person who has immedia Bureau or Department where you will be apppointed, a. within the third degree?	te supervision over you in the Office,	☐ YES ☑ NO	PO ,	
b. within the fourth degree (for Local Government Unit - Ca	reer Employees)?	YES VO		
35. a. Have you ever been found guilty of any administrative of	YES NO			
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, e out (abolition) in the public or private sector?	☐ YES ☑ NO If YES, give details:			
a. Have you ever been a candidate in a national or local ele Barangay election)? b. Have you resigned from the government service during the service during	☐ YES ☑ NO If YES, give details: ☐ YES ☑ NO			
election to promote/actively campaign for a national or loca	If YES, give details:			
39. Have you acquired the status of an immigrant or permanen	☐ YES ☑ NO If YES, give details (country):			
 Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972) 	gna Carta for Disabled Persons (RA , please answer the following items:	V		
a. Are you a member of any indigenous group?		☐ YES ☑ NO If YES, please specify:		
b. Are you a person with disability?	Are you a person with disability?			
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	/appointee)			
NAME	ADDRESS	TEL. NO.		
Dr. MARLITO M. BANDE, Dr.sc.agr.	VSU, Baybay City, Leyte	563-7497		
Dr. HUMBERTO R. MONTES, Jr., PhD Marine Science	VSU, Baybay City, Leyte	563-7726	47	
Dr. ERLINDA A. VASQUEZ, PhD Entomology	VSU, Baybay City, Leyte			
42. I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertine Philippines. I authorize the agency head/authorized repre I agree that any misrepresentation made in this doct administrative/criminal case/s against me.	ent laws, rules and regulations of the Resentative to verify/validate the contents	epublic of the stated herein.		
Government Issued ID (i.e. Passport, CSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance			221(4/1	
Government Issued ID: PhilHealth ID No. 13-025105498-4	0, 1/			
ID/License/Passport No.:	Signature (Sign inside the box			
Date/Place of Issuance:	Date Accomplished	Ric	ght Thumbmark	
SUBSCRIBED AND SWORN to before me this	Mai	ng his/her validly issued government ID as	s indicated above.	
	ATTY, RYSAY C. GL VSU LEGAL OFFICE Person Administering Oath	RAUCULA R		
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