

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 () <input type="checkbox"/> 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		ISRAEL									
FIRST NAME		ANTONIETA						NAME EXTENSION (JR., SR)		N/A	
MIDDLE NAME		DIAZ									
3. DATE OF BIRTH (mm/dd/yyyy)		06/13/1969		16. CITIZENSHIP		<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:					
4. PLACE OF BIRTH		BAYBAY CITY, LEYTE		If holder of dual citizenship, please indicate the details.		Philippines					
5. SEX		<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		17. RESIDENTIAL ADDRESS		#19 A. MABINI STREET					
6. CIVIL STATUS		<input type="checkbox"/> Single <input type="checkbox"/> Married <input checked="" type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:		18. PERMANENT ADDRESS		#19 A. MABINI STREET					
7. HEIGHT (m)		156.5 m		19. TELEPHONE NO.		None					
8. WEIGHT (kg)		65 kg		20. MOBILE NO.		09173041369					
9. BLOOD TYPE		"O"		21. E-MAIL ADDRESS (if any)		jadi_34@yahoo.com					
10. GSIS ID NO.		69061301224		17. RESIDENTIAL ADDRESS		#19 A. MABINI STREET					
11. PAG-IBIG ID NO.		1210-7546-6112		18. PERMANENT ADDRESS		#19 A. MABINI STREET					
12. PHILHEALTH NO.		13-000065403-6		19. TELEPHONE NO.		None					
13. SSS NO.		06-1625485-5		20. MOBILE NO.		09173041369					
14. TIN NO.		186-774-847		21. E-MAIL ADDRESS (if any)		jadi_34@yahoo.com					
15. AGENCY EMPLOYEE NO.		V000615		17. RESIDENTIAL ADDRESS		#19 A. MABINI STREET					
				18. PERMANENT ADDRESS		#19 A. MABINI STREET					
				19. TELEPHONE NO.		None					
				20. MOBILE NO.		09173041369					
				21. E-MAIL ADDRESS (if any)		jadi_34@yahoo.com					
II. FAMILY BACKGROUND											
22. SPOUSE'S SURNAME		ISRAEL		23. NAME OF CHILDREN (Write full name and list all)		DATE OF BIRTH (mm/dd/yyyy)					
FIRST NAME		JOHN		NAME EXTENSION (JR., SR)		JOHANN ANGELO D. ISRAEL		05/05/2002			
MIDDLE NAME		FLANDEZ		N/A							
OCCUPATION		DECEASED									
EMPLOYER/BUSINESS NAME		N/A									
BUSINESS ADDRESS		N/A									
TELEPHONE NO.		N/A									
24. FATHER'S SURNAME		DIAZ		25. MOTHER'S MAIDEN NAME							
FIRST NAME		AQUILINO		SURNAME		CALUNGSOD					
MIDDLE NAME		ESCUADRA		FIRST NAME		CHRISTINA					
				MIDDLE NAME		MONTEFOLKA					
(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		BAYBAY SOUTH CENTRAL SCHOOL		PRIMARY EDUCATION		1975 1981		N/A		1981	N/A
SECONDARY		FRANCISCAN COLLEGE OF THE IMMACULATE CONCEPTION		HIGH SCHOOL		1981 1985		N/A		1985	N/A
VOCATIONAL / TRADE COURSE		N/A		N/A		N/A N/A		N/A		N/A	N/A
COLLEGE		UNIVERSITY OF SAN CARLOS		BACHELOR OF SCIENCE IN COMMERCE		1985 1989		N/A		1989	N/A
GRADUATE STUDIES		N/A		N/A		N/A N/A		N/A		N/A	N/A
(Continue on separate sheet if necessary)											
SIGNATURE				DATE		1/4/21				CS FORM 212 (Revised 2017), Page 1 of 4	

[illegible]

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]

VIII. OTHER INFORMATION

21	SPECIAL SKILLS and HOBBIES	22	NON-ACADEMIC DISTINCTIONS / RECOGNITION	23	MEMBERSHIP IN ASSOCIATION/ORGANIZATION
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(Continue on separate sheet if necessary)

11/1/21

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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, a. within the third degree? b. within the fourth degree (for Local Government Unit - Career Employees)?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>
35. a. Have you ever been found guilty of any administrative offense? b. Have you been criminally charged before any court?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: Date Filed: _____ Status of Case/s: _____</div>
36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>
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?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>
38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)? 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?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>
39. Have you acquired the status of an immigrant or permanent resident of another country?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details (country): _____</div>
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: a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div> <div><input checked="" type="checkbox"/> YES<input type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____ <div>NONE</div></div>

41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)		
NAME	ADDRESS	TEL. NO.
DR. JOSE L. BACUSMO	VSU, ViSCA, Baybay City, Leyte	-
DR. MA. JULIET C. CENIZA	VSU, ViSCA, Baybay City, Leyte	-
DR. VICTOR B. ASIO	VSU, ViSCA, Baybay City, Leyte	-
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.		



PHOTO

Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance	
Government Issued ID:	UMID
ID/License/Passport No.:	006-0068-8286-0
Date/Place of Issuance:	TACLOBAN CITY

Signature (Sign inside the box)
1/4/21
Date Accomplished



Right Thumbmark

SUBSCRIBED AND SWORN to before me this 17 FEB 2021, affiant exhibiting his/her validly issued government ID as indicated above.	
<div></div> <div>ATTY. RYSA C. GUINOCOR VSU Chief Legal Officer Person Administering Oath</div>	

WORK EXPERIENCE SHEET

Instructions: 1. Include only the work experiences relevant to the position being applied to.

2. The duration should include start and finish dates, if known, month in abbreviated form, if known, and year in full. For the current position, use the word Present, e.g., 1998-Present. Work experience should be listed from most recent first.

- Duration: **July 1, 2001 - present**
 - Position: **Administrative Aide III**
 - Name of Office/Unit: **Office of the University/Board Secretary**
 - Immediate Supervisor: **Dr. Guinaldo C. Fernandez, Jr.**
 - Name of Agency/Organization and Location: **Visayas State University, Visca, Baybay City**
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- List of Accomplishments and Contributions (if any)
 - Summary of Actual Duties
 - Recording and filing of incoming documents.


ANTONIETA D. ISRAEL
Employee

Date: 1/26/21