CS Form No. 212 Revised 2017	PERSO	NAL DAT	A SI	1EE	о— Т		e e e Grégoria	Section 80
WARNING: Any microprocesses	tion made in the Personal Data Sheet and th		+			o/criminal case/s	egainst the p	erson
concerned.								
Print legibly. Tick appropriate boxes	TO FILLING OUT THE PERSONAL DATA SH  ) and use separate sheet if necessary. Indicate	a N/A if not applicable. DO NOT	ABBREVIAT	E.	1. CS ID No.		(Do not fill up.	For CSC use only
I. PERSONAL INFORMATIO	N							
2. SURNAME	GERMONES					NAME EXTENSION (J	R. SR)	
FIRST NAME	CHRISTIAN		-			TOTAL EXTENSION (A		Interest Charles or party
MIDDLE NAME	DACOY		ŧ.					
3. DATE OF BIRTH (mm/dd/yyyy)	12/22/1995	18. CITIZENSHIP		☑ Filipino □ Dual Citizenship □ ②by birth □ □by naturalizati				ation
4. PLACE OF BIRTH	HINABANGAN, SAMAR	If holder of dual citizens	ship,	Pls. indicate			country:	
5. SEX	☑ Male ☑ Female	please indicate the det	lails.	Philippine	es ·	A PARTY OF THE	and the delivery	a frage of the second
6 CIVIL STATUS	☑ Single ☐ Married	17. RESIDENTIAL ADDRESS		House/Block/Lof No.			PUROK 3 Street	
The state of the s	☐ Widowed ☐ Separated	THE 20 10	1				RAWIS	, - · · ·
	Other/s:	Estraçui de la C		ubdivision/Villa HINABANGAI			Barangay SAMAR	
7. HEIGHT (m)	1.69			City/Municipali	fy	0712	Province	er ude
8. WEIGHT (kg)	. e 85 Pul No	ZIP CODE (0)	1	#3091 F		6713	PUROK 3	
9. BLOOD TYPE TOWN TWO O	2 - "O"     TVA3 4.1. /	18. PERMANENT ADDRESS	Ho	ouse/Block/Lot	No.		Street	- Va
10. GSIS ID NO.	N/A	The second secon	S	ubdivision/Villa	9 <b>9</b> 0	-	RAWIS Barangay	
11. PAG-IBIG ID NO.	1212-8782-5068		HINAB	ANGAN City/Municipali			SAMAR Province	
I have desired to the second to the second		ZIP CODE		6713	iy .			
12. PHILHEALTH NO.	`13-025576798-5					NA		
13. SSS NO.	35-1038559-7	19. TELEPHONE NO.					-	
14. TIN NO.	364-898-173-00000	20. MOBILE NO.		+639659975433				
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)		cgermones63@gmail.com				
II. FAMILY BACKGROUND			-					
22. SPOUSE'S SURNAME	N/A		23. NAME of CI	HILDREN (Wr	ite full name and	l list all)	DATE OF BIF	TH (mm/dd/yyyy)
FIRST NAME		NAME EXTENSION (JR, SR)						
MIDDLE NAME								
OCCUPATION								
EMPLOYER/BUSINESS NAME			-					
BUSINESS ADDRESS		and the state of t						
TELEPHONE NO.		Care on the contract of the contract of					and the same of th	-
24. FATHER'S SURNAME	GERMONES							
FIRST NAME	ANACLETO	NAME EXTENSION (JR., SR)						
MIDDLE NAME	ASEBIAS		T					
25. MOTHER'S MAIDEN NAME	The section of the se		1					
SURNAME	DACOY							
FIRST NAME	EVELYN							
MIDDLE NAME	ABARRACOSO			(	Continue on se	parate aheet if neces	saary)	-
III. EDUCATIONAL BACKG	ROUND							100
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE (Write in full)	COURSE	PERIOD OI	F ATTENDANCE To	HIGHEST LEVEU UNITS EARNED (If not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
ELEMENTARY	HINABANGAN CENTRAL ELEMENTARY SCHOOL	PRIMARY EDUCATION	141-14-	2002	2008		2008	
SECONDARY	HINABANGAN NATIONAL HIGH SCHOOL	SECONDARY EDUCATION		2008	2012		2012	W/ HONOR
VOCATIONAL / TRADE COURSE					e			
COLLEGE	LEYTE COLLEGE	BS CRIMINOLOGY		2018	2022		2022	
GRADUATE STUDIES				A CONTRACTOR	4	* ** ** ** ** ** ** ** ** ** ** ** ** *	Contract to a standard and	ALCON 1815 1816 1
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SIGNATURE	Jum		territorio de la companya	D	ATE	MAU	10,202	3

IV. CIVIL	SERVICE ELIG	BILITY							BU-ST
	SPECIAL LAV	080 (BOARD/ BAR) UNDER NS/ CES/ CSEE TY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINA	TION / CONFE	RMENT	NUMBER	Date of Validity
CRIMIN	OLOGY LICENS	SURE EXAMINATION	81.85	01/04/2023	TACLO	BAN CITY	1	ТВА	ТВА
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v. Work	EXPERIENCE			ontinue on separate sheet			N. Carre	Contract of the second	
(include pr	ivate employme	nt. Start from your recei	nt work) Descript	ion of duties should	be Indicated in the attac	hed Work E	SALARY/JOB/PAY	eL	
	LUSIVE DATES mm/dd/yyyy)	POSITION T (Write in full/Do not			ENCY / OFFICE / COMPANY //Do not abbreviate)	MONTHLY SALARY	GRADE (if applicable)& STEP (Format "00-0") INCREMENT	STATUS OF APPOINTMENT	SERVICE (Y/N)
From	То	ANUMICIDAL IO	D ORDER	I GII SAN SE	BASTIAN, SAMAR	4000.00	INCREMENT	CONTRACT	Y
09/08/2020	06/28/2022	MUNICIPAL JO		1.	OAN, EASTERN SAMAR	4000.00		CONTRACT	Y
01/16/2023	present	MUNICIPAL JO	BORDER	LOO QUINAFOND	AN, EAGLERN GAMAN				
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SIGN	ATURE	gin	m		DATE	MA	9 10,0	1023	Silve

VI VOLUNTARY WOR	K OR INVOLVEMENT	IN GIVIC I NON-GOVERNME	NT (DEAD) E/	VOLUNTARY	ORCANIZATIO	W/S	
29.	NAME & ADDRESS OF			SIVE DATES	T T	10/5	
29.	(Write in fu			/dd/yyyy) To	HAMBER OF HOURS	Laboration to	POSITION / NATURE OF WORK
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VIII I SARNING AND	DEVELOPMENT (LD	() INTERVENTIONS/TRAINING	Continue on separate		y)	NAME OF TAXABLE	
VII. LEARNING AND	DEVELOPMENT (LG)	) RTERVENTICIS RAIMING	INCLUSIN	E DATES OF	The second second	Type of LD	of the material and are a second to the material and the second an
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)		ATTENDANCE (mm/dd/yyyy)		HUMBER OF HOURS	(11)	CONDUCTED/ SPONSORED BY (Write in fulf)	
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	BASIC LIFE SUPF	PORT	03/27/2023	03/28/2023	ТВА	TBA	LGU QUINAPONDAN AND DOH R8
	BASIC FIRST A	ID	03/28/2023	03/31/2023	TBA	TBA	LGU QUINAPONDAN AND DOH R8
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		(C	ontinue on separate	sheet if necessary	)		
VIII. OTHER INFORMA	ATION						
31. SPECIAL SKI	ILLS and HOBBIES	32. NO	ON ACADEMIC DIST	INCTIONS / RECOC	DNITION	ign-8	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
COMPUTER	ENCODING		N/				N/A
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JIGHA I	The state of the s				ACCESSOR OF SECURIOR	the second second	CS FORM 212 (Revised 2017), Page 3 of

34. Are you related by consanguinity or affinity to the appoint chief of bureau or office or to the person who has immediate.	ng or recommending authority, or to the ate supervision over you in the Office,				
Bureau or Department where you will be apppointed,			☑ NO		
a. within the third degree?	☐ YES ☐ NO				
b. within the fourth degree (for Local Government Unit - Co	If YES, give details:				
as. 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 deta Date Filed:	lio.		
	and the second s	Status of Case/s:			
66. Have you ever been convicted of any crime or violation of by any court or tribunal?	any law, decree, ordinance or regulation	☐ YES If YES, give deta	☑ NO ils:		
37. Have you ever been separated from the service in any of retirement, dropped from the rolls, dismissal, termination, out (abolition) in the public or private sector?	☐ YES If YES, give detai	☑ NO :: 4 33.6			
a. Have you ever been a candidate in a national or local e Barangay election)?	election held within the last year (except	☐ YES If YES, give deta	☑ NO		
b. Have you resigned from the government service during election to promote/actively campaign for a national or loc	☐ YES If YES, give deta	☑ NO ills:			
39. Have you acquired the status of an immigrant or permane	☐ YES ☐ NO If YES, give details (country):				
D. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) M		7			
7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972 Are you a member of any indigenous group?	(), please answer the following items:	☐ YES If YES, please speci	☑ NO		
Are you a person with disability?	☐ YES ☐ NO  If YES, please specify ID No:				
Are you a solo parent?		☐ YES If YES, please speci	☑ NO		
11. REFERENCES (Person not related by consanguinity or affinity to applicant	nt /appointee)				
NAME	ADDRESS	TEL. NO.			
MAY T. CINCO	HINABANGAN, SAMAR	9630941883	513		
EUGENIO N. NABUAL JR	HINABANGAN, SAMAR	9684566098	(60)		
RODOLFO J. NABUAL	HINABANGAN, SAMAR	9171076504			
42. I declare under oath that I have personally accomplishe complete statement pursuant to the provisions of pertin Philippines. I authorize the agency head/authorized repr I agree that any misrepresentation made in this doc administrative/criminal case/s against me.	nent laws, rules and regulations of the freeentative to verify/validate the contents	Republic of the stated herein.	CHRISTIAN D GERMONES		
Government Issued ID (i a Passport, GSIS, SSS, PRC, Drive's Liconso, etc.) PLEASE INDICATE ID Number and Date of Issuance	A.				
Government Issued ID: PHILHEALTH ID	- Curring				
ID/License/Passport No.: 13-025576798-5	Signature (Sign inside the bo	ox)			
Date/Place of Issuance: PHILHEALTH TACLOBAN	Date Accomplished		Right Thumbmark		
SUBSCRIBED AND SWORN to before me this 202	affirm of hibitir	ng hie/her validly issued	government ID as indicated above.		
	111/109				
<u> </u>	ATTY, EDWIN Y. CH Notary Public	IUA	arung terustuan		
	ATTY, EDWIN Y. CI- Notary Public Until Dec. 61, 2024 Appointed by Affinite and Oat	A STATE OF THE STA	STING LOTTING?		

**CS** CamScanner