CS Form No. 212 Revised 2017	PERSC	NAL DAT	'A SH	IEE	<u> </u>				
WARNING: Any misrepresenta	ation made in the Personal Data Sheet and th	ne Work Experience Sheet sh	all cause the fili	ng of admin	istrative/cri	minal case/s agai	inst the perso	n concerned.	
	TO FILLING OUT THE PERSONAL DATA SH			PDS FORM.					
Print legibly. Tick appropriate boxe I. PERSONAL INFORMATION	as [_]) and use separate sheet if necessary. Indica	ate N/A if not applicable. DO NO	ABBREVIATE.		1. CS ID No.		(Do not fill up.	For CSC use only	
2. SURNAME	РОТОТ								
FIRST NAME	JESSA			NAME EXTENSION (JR., SR)					
MIDDLE NAME	ACEBUCHE								
3. DATE OF BIRTH									
(mm/dd/yyyy)	02/14/2000	16. CITIZENSHIP		✓ Filip	ino 🗆	Dual Citizenship	_		
4. PLACE OF BIRTH	LAOANG NORTHERN SAMAR	If holder of dual citiz	by birth by nat □ by lirth □ by nat □ by lirth □ by nat □ b				lization		
5. SEX	☐ Male ☐ Female	please indicate the	<u> </u>						
	Single Married	17. RESIDENTIAL ADDRESS		150			ACEBRON		
6 CIVIL STATUS	☐ Widowed ☐ Separated		Hou	use/Block/Lot N	0.		Street		
	Other/s:		Su	ıbdivision/Villag	9		VIGO Barangay		
7. HEIGHT (m)	1.63			LAOANG City/Municipality		NC	Province	R	
8. WEIGHT (kg)	52	ZIP CODE		· · · · · · · · · · · · · · · · · · ·		6411			
9. BLOOD TYPE	В	18. PERMANENT ADDRESS		150			ACEBRON		
10. GSIS ID NO.	N/A		Hot	use/Block/Lot N	0.		Street VIGO		
	·		Su	bdivision/Villag			Barangay NORTHE	RN SAMAR	
11. PAG-IBIG ID NO.	121330586629		C	City/Municipality			Province		
12. PHILHEALTH NO.	13-252216573-9	13-252216573-9 ZIP CODE		6411					
13. SSS NO.	06-4688521-0	19. TELEPHONE NO.		N/A					
14. TIN NO.	496-672-269-000000	20. MOBILE NO.		09567O48407					
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	jessaapotot@gmail.com						
II. FAMILY BACKGROUND			2						
22. SPOUSE'S SURNAME	N/A		23. NAME of CH	ILDREN (Write	full name and l	ist all)	DATE OF BIR	TH (mm/dd/yyyy)	
FIRST NAME	N/A	NAME EXTENSION (JR., SR)	N/A				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	РОТОТ								
FIRST NAME	JUDY	SR							
MIDDLE NAME	SISTER								
25. MOTHER'S MAIDEN NAME									
SURNAME	ACEBUCHE								
FIRST NAME	EDITHA								
MIDDLE NAME	CORONA	(Continue on separate sheet if necessary)							
III. EDUCATIONAL BACKO	GROUND								
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGI (Write in full)		PERIOD OF	ATTENDANCE To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED	
						Ì		SAI UTATO	

	*******					•"		
III. EDUCATIONAL BACKGROUND								
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF	ATTENDANCE To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED	
ELEMENTARY	VIGO ELEMENTARY SCHOOL	ELEMENTARY	06/01/2007	03/30/2012		12012	SALUTATO RIAN	
SECONDARY	UNIVERSITY OF EASTERN PHILIPPINES LAOANG LABORATORY HIGH SCHOOL	HIGH SCHOOL	06/04/2012 03/30/2018			12018	WITH HONOR	
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
COLLEGE	UNIVERSITY OF EASTHERN PHILIPPINES MAIN CAMPUS	BACHELOR OF ART IN POLITICAL SCIENCE	08/30/2018	06/16/2022		2022	N/A	
GRADUATE STUDIES	NORTHERN SAMAR COLLEGES	NORTHERN SAMAR COLLEGES PROFESSIONAL EDUCATION		12/16/2022	N/A	2022	N/A	
(Continue on separate sheet if necessary)								
SIGNATURE			DA	DATE January 21, 2024				

SF	PECIAL LAWS PELIGIBILIT	80 (BOARD/ BAR) UNDER S/ CES/ CSEE Y / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION /	PLACE OF EXAMINA	TION / CONFEE	DMENT	LICENSE (if a	pplicable)
BARANGAY	/ ELIGIBILIT	Y / DRIVER'S LICENSE	(If Applicable)		PLACE OF EXAMINA				
LICENSURE EXAM		FOR RECEIONAL		CONFERMENT		TION TOOM E	N / CONFERMENT		Date of Validity
			81.6	/03/19/2023	TACLO	BAN CITY		2056525	02/14/2026
V. WORK EXPER	RIENCE		(Con	tinue on separate sheet	if necessary)				
(Include private em	ployment.	Start from your recent	work) Description (of duties should be i	indicated in the attached	Work Experie			
28. INCLUSIVE D. (mm/dd/yyy	ATES (y)	POSITION TI (Write in full/Do not a			ENCY / OFFICE / COMPANY	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP	STATUS OF APPOINTMENT	GOV'T SERVICE
From	То	(write in full/Do not a	abbi eviate)	(vviite iii iui	IDO NOL ADDIEVIALE)	SALART	(Format "00-0")/ INCREMENT	AFFOINTMENT	(Y/ N)
N/A N/A		N/A			N/A	N/A	N/A	N/A	N/A
				tinuo on	if nonconst				
SIGNATURI	F I		(Con	tinue on separate sheet	DATE		21/01/24		

VI. VOL	UNTARY WORK OR INVOLVEMENT					N/S			
29.	NAME & ADDRESS OF C		INCLUSIVE DATES (mm/dd/yyyy)		WILLIAM OF LIGHT	POSITION / NATURE OF WORK			
(Write in full)			From To		NUMBER OF HOURS	s POSITION / NATURE OF WORK			
SAVE TO SEND PROJECT (NON-GOVERNMENT)			10/20/2016	06/15/2027	N/A	VOLUNTEER			
			tinue on separate		·)				
VII. LEA	ARNING AND DEVELOPMENT (L&D)	INTERVENTIONS/TRAINING PR	ROGRAMS AT	TENDED		ı			
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)			ATTEN	E DATES OF IDANCE Id/yyyy)	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)		
EFFICIEN	NT DATA MANAGEMENT AND ANALYSIS		11/17/2023	11/21/2023	40 HOURS	TECHNICAL	INTERNATIONAL COLLEGE OF ALLIED SCIENCES AND TECHNOLOGY		
COMPUT	TER UPSKILSS TRAINING: ICT INTEGRATION	N IN THE 21ST CENTURY EDUCATION	11/01/2023	11/15/2023	120 HOURS	TECHNICAL			
							EDTECH TEACHER TRAINING CENTER		
VIII. OT	THER INFORMATION	(Con	tinue on separate :	sheet if necessary)				
31.	SPECIAL SKILLS and HOBBIES	NON-ACADEMIC DISTINCTIONS / RECOGNITION 32. Membership in ASSOCIATION/ORGAN 33. Membership in 5 (II) 33. Membership in 5 (II)							
	PAINTING	32. (Write in full)					N/A		
	EDITING					N/A N/A			
	SKETCHING		N/A N/A				N/A		
	WRITING		N/A				N/A		
LEARNING LANGUAGE			N/A			N/A			
	PHOTOGRAPHY	N/A	4			N/A			
	(Continue on separate sheet if necessary)								
			£.u			ATE	21/01/2024		

34.	Are you related by consanguinity or affinity to the appointing chief of bureau or office or to the person who has immediate						
	Bureau or Department where you will be apppointed, a. within the third degree?	□ vec	√ NO				
	b. within the fourth degree (for Local Government Unit - Car	eer Employees\2	☐ YES ☐ YES				
	b. within the fourth degree (for Local Government Onit - Car	If YES, give deta	☑ NO ils:				
		ii 120, give deta					
35.	a. Have you ever been found guilty of any administrative off	ense?	☐ YES	√ NO			
00.	3. J J		If YES, give details:				
	b. Have you been criminally charged before any court?		YES If YES, give deta	✓ NO			
			Date Filed:				
			Status of Case/s:				
36	Have you ever been convicted of any crime or violation of a	ny law, decree, ordinance or regulation					
00.	by any court or tribunal?	.,,,,	☐ YES ☑ NO If YES, give details:				
37	Have you ever been separated from the service in any of the	o following modes: resignation					
57.	retirement, dropped from the rolls, dismissal, termination, er		YES If YES, give deta	☑ NO ils:			
	out (abolition) in the public or private sector?						
38.	a. Have you ever been a candidate in a national or local ele	ction held within the last year (except	YES	√ NO			
	Barangay election)?		If YES, give details:				
	b. Have you resigned from the government service during the	ne three (3)-month period before the last	YES V NO				
	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 permanent	resident of another country?	☐ YES ☑ NO				
			If YES, give details (country):				
				_			
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag						
	7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972),						
a.	Are you a member of any indigenous group?	☐ YES ☑ NO If YES, please specify:					
b.	Are you a person with disability?	YES NO					
	Ale you a person with disability:			If YES, please specify ID No:			
C.	c. Are you a solo parent?			✓ NO			
			If YES, please speci	ify ID No:			
41.	REFERENCES (Person not related by consanguinity or affinity to applicant /	appointee)					
	NAME	ADDRESS	TEL. NO.				
	N/A	N/A	N/A				
	14/1	14/74					
42.	I declare under oath that I have personally accomplished	this Personal Data Sheet which is a tru	ue, correct and				
	complete statement pursuant to the provisions of pertine	ent laws, rules and regulations of the F	Republic of the	POTOT, JESSA A.			
	Philippines. I authorize the agency head/authorized repre- I agree that any misrepresentation made in this docu			PHOTO			
	administrative/criminal case/s against me.	amont and ito attachments shall cauc	o the ming of	111010			
				1950-97			
	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)						
	LEASE INDICATE ID Number and Date of Issuance overnment Issued ID:	- Lute Off					
ID	/License/Passport No.:	Signature (Sign inside the bo	ox)				
Date/Place of Issuance: 21/01/2024 Date Accomplished				Right Thumbmark			
Ë		,					
	SUBSCRIBED AND SWORN to before me this	, affiant exhibiti	ng his/her validly issue	d government ID as indicated above.			
	Г			1			
	<u> </u>	Person Administering Oatl	1	1			