CS Form No. 212 Revised 2017	PERSO	NAL DAT	A SI	HEET		
WARNING: Any misrepresent concerned.	tation made in the Personal Data Sheet and th	e Work Experience Sheet sha	II cause the	filing of administrative/criminal cas	e/s against the person	
READ THE ATTACHED GUIDE	E TO FILLING OUT THE PERSONAL DATA SHE			and the second s	(D) File 5 000	
Print legibly. Lick appropriate box LFERSONAL INFORMATI	tes) and use separate sheet if necessary. Indication	ate N/A if not applicable. DO NO	I ABBREVIA	TE. 1. CS ID No.	(Do not fill up. For CSC use only	
2. SURNAME	PASA					
FIRST NAME	ELIZABETH	900000000000000000000000000000000000000		NAME EXTENSION	ON (JR., SR)	
MIDDLE NAME	DIZON				N/A	
3. DATE OF BIRTH		La arregueur				
(mm/dd/yyyy)	15/01/1994	16. CITIZENSHIP		☑ Filipino ☐ Dual Citizens ☐ Duy birth	by naturalization	
4. PLACE OF BIRTH	BRGY., BIASONG, BAYBAY, LEYTE	If holder of dual citizens			icate country:	
5. SEX	☐ Male	please indicate the deta	ails.		_	
	✓ Single	17. RESIDENTIAL ADDRESS			PUROK 1 SAGKAAN	
6 CIVIL STATUS	☐ Widowed ☐ Separated	TV. NEOIDENTINE ADDITEOU	Hou	ise/Block/Lot No.	Street	
	Other/s:		Su	bdivision/Village	BIASONG Barangay	
7. HEIGHT (m)	1.524 m			BAYBAY ity/Municipality	LEYTE	
8. WEIGHT (kg)	41 kg	ZIP CODE		Province		
9. BLOOD TYPE	N/A	18. PERMANENT ADDRESS	PUROK 1 SAGKAAN			
10. GSIS ID NO.	N/A	1	Ho	ise/Block/Lot No.	Street BAYBAY	
			Sı	bdivision/Village BAYBAY	Barangay LEYTE	
11. PAG-IBIG ID NO.	1211-4771-9918			ity/Municipality	Province	
12. PHILHEALTH NO.	12-051454819-1	ZIP CODE	6521			
13. SSS NO.	0637123787	19. TELEPHONE NO.	N/A			
14. TIN NO.	322-989-480-000	20. MOBILE NO.	09280831200			
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	elyoung231@gmail.com			
II. FAMILY BACKGROUN	D The state of the					
22. SPOUSE'S SURNAME	N/A		23. NAME of C	HILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)	
FIRST NAME	N/A	NAME EXTENSION (JR., SR)		N/A		
MIDDLE NAME	N/A					
OCCUPATION	N/A	Е				
EMPLOYER/BUSINESS NAME	N/A					
BUSINESS ADDRESS	N/A					
TELEPHONE NO.	N/A					
24. FATHER'S SURNAME	PASA					
FIRST NAME	MARCIAL	NAME EXTENSION (JR., SR)				
MIDDLE NAME	CALDERON					
25. MOTHER'S MAIDEN NAME						
SURNAME	DIZON					
FIRST NAME	PERLITA					
MIDDLE NAME	ASEGENTE			(Continue on separate sheet	if necessary)	
III. EDUCATIONAL BACK	CAPANUS .					

MIDDLE NAME	ASEGENTE	(Continue on separate sheet if necessary)					
II. EDUCATIONAL BACK	(GROUN)						
6. 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 GRADUATE D	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From To		(ii not graduated)		KEGEWED
ELEMENTARY	HIPUSNGO ELEMENTARY SCHOOL	PRIMARY EDUCATION	2001	2006	GRADUATED	2006	WITH HONOR
SECONDARY	BAYBAY NATIONAL HIGH SCHOOL	HIGH SCHOOL	20016	2010	GRADUATED	2010	VALEDICTORIAN
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE VISAYAS STATE UNIVERSITY		BACHELOR OF SCIENCE IN AGRIBUSINESS	2011	2015	GRADUATED	2015	NONE
GRADUATE STUDIES N/A		N/A	N/A	N/A	N/A	N/A	N/A
		(Continue on separate sheet if necessary)					
SIGNATURE	· Ark		DATE 01/15		01/19/2023	3	
						CS FORM 212	(Revised 2017), Page 1

IV. CIVIL	SERVICE ELIC	IBILITY .					1,500		
27. CAF	REER SERVICE/ RA	1080 (BOARD/ BAR) UNDER	RATING	DATE OF				LICENSE (if a	applicable)
	BARANGAY ELIGIBII	OF EXAMINATION / CONFERMENT SAY ELIGIBILITY / DRIVER'S LICENSE (If Applicable) EXAMINATION / PLACE OF EXAMINATION / CONFERMENT CONFERMENT				NUMBER	Date Validi		
CAREER	SERVICE PROF	ESSIONAL ELIGIBILITY	84.25	AUGUST 07,2022	LEYTE NATIONAL HIGH SCHOOL, TACLOBAN CITY		racloban .	N/A	N/A
							*	1.72	
					-				
					-				
			(C	ontinue on separate shee	t if necessary)				
	EXPERIENCE vate employme	nt. Start from your recen	work) Description	of duties should	on in the second in the second	1 100 15			
INCL	LUSIVE DATES mm/dd/yyyy)	POSITION TIT				hed Work Expe	SALARY/ JOB/ PAY		
From	То	(Write in full/Do not al		DEPARTMENT / AGE (Write in full/	NCY / OFFICE / COMPANY Do not abbreviate)	MONTHLY SALARY	GRADE (if applicable)& STEP (Format "00-0"V INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVIC (Y/ N)
5/18/2015	12/03/2020	CUSTOMER SERVICE	ASSOCIATE	and the same of th	IES INC., CEBU, PHIL.	16,000.00	NONE	PERMANENT	N
3/10/2021	12/31/2022	ADMINISTRATIV		OFFICE OF THE HEAD OF ACCOUNTING, VISAYAS STATE UNIVERSITY OFFICE OF THE HEAD OF ACCOUNTING,		9,961.20 NONE		JOB ORDER	Υ
1/01/2023	PRESENT	ADMINISTRATIVE	AIDE III		EAD OF ACCOUNTING, ATE UNIVERSITY	13,274.80	NONE	JOB ORDER	Y
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MENUNY THE THE STATE OF THE STA									***************************************
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						N			
					6				
) (Com	linue on separate sheet if	necessary)				
SIGNA	TURE		1 /)	Top state street if	DATE		01/19/20		

VI. VOLUNTARY WORK OR INVOLVEMENT	IN CIVIC / NON-GOVERNMENT	/PEOPLE/\	OLUNTARY	ORGANIZATI	ON/S		
29. NAME & ADDRESS OF OF (Write in full)			VE DATES dd/yyyy) To	NUMBER OF HOURS		POSITION / NATURE OF WORK	
NONE	NONE	NONE	NONE	NONE			
						The state of the s	
		<u></u>	<u> </u>				
VII. LEARNING AND DEVELOPMENT (L&D)		<mark>tinue on separate</mark> ROGRAMS A					
30. TITLE OF LEARNING AND DEVELOPMENT INTE (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)		
PERSONALITY DEVELOPMENTAND BUSINESS ETH	From 09/14/2013	09/14/2013	8 HOURS	N/A	CONVENTION CENTER, VSU, BAYBAY, LEYTE		
KAALAM: CREATIVE FORMS AND NARRATIVES OF		03/09/2022	03/092022	8 HOURS	N/A	INSTITUTE OF HUMAN KINETICS - VSU	
DATA PRIVACY CONTRACT		04/07/2022	04/07/2022	8 HOURS	N/A	Visayas State University, Visca, Baybay, Leyte	
HANDS-ONLY CARDIOPULMONARY RESUSCITATION		07/21/2022	07/22/2022	16 HOURS	N/A	Visayas State University, Visca, Baybay, Leyte	
SO 9001:2005 AWARENESS/RE-AWARENESS SEMII	NAR	08/30/2022	08/31/2022	16 HOURS	N/A	RDE HALL, VSU, Baybay City, Leyte	
							
						2	
					-		
					•	,	
					THE PARTY OF THE P		
	(Conf	tinue on separate	sheet if necessary)			
VIII. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES	32. NON-	-ACADEMIC DISTII (Writ	NCTIONS / RECOG le in full)	INITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
COMMUNICATION SKILLS		IE .			NONE		
COMPUTER SKILLS		IE			NONE		
					was a superior and a		
and a constant of the state of							
		٥					
SIGNATURE	(Con	inue on separate	sheet if necessary	, n	ATE	01/19/2023	
SIGNATURE			DATE			01/19/2023 CS FORM 212 (Revised 2017), Page 3 of 4	

34. Are you related by concentration to a ffinite to						
34. Are you related by consanguinity or affinity to the appoint 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 apppointed,	ate supervision over you in the Office,					
a. within the third degree?						
b. within the fourth degree (for Local Government Unit - C	YES	☑ NO				
and the second coveryment of the - C	areer Employees)?	☐ YES	☑ NO			
		If YES, give de	tails:			
35. a. Have you ever been found guilty of any administrative of	#00002					
direction bearing guilty of any administrative (ollense?	☐ YES	✓ NO			
		If YES, give det	ails:			
b. Have you been criminally charged before any court?		☐ YES	☑ NO			
		If YES, give det				
		Date Filed:				
A. **		Status of Case/	S:			
36. Have you ever been convicted of any crime or violation of	any law, decree, ordinance or regulation by	YES	[] NO			
any court or tribunal?		If YES, give deta	☑ NO ails:			
37. Have you ever been separated from the service in any of t	he following modes: resignation, retirement					
dropped from the rolls, dismissal, termination, end of term.	finished contract or phased out (abolition)	YES If YES, give deta	☑ NO			
in the public or private sector?	,	11 1 LO, give details.				
38. a. Have you ever been a candidate in a national or local el	ection held within the last year (except	☐ YES				
Barangay election)?		☐ YES ☑ NO If YES, give details:				
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 loca	I candidate?	☐ YES ☑ NO If YES, give details:				
39. Have you acquired the status of an immigrant or permanen						
g-sint psintallo		☐ YES ☑ NO				
		If YES, give details (country):				
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma	one Carte for Dicabled Persons (DA 7077)					
and (c) Solo Parents Welfare Act of 2000 (RA 8972), please	e answer the following items:					
a. Are you a member of any indigenous group?	•					
		☐ YES If YES, please speci	√ NO fv:			
Are you a person with disability?		☐ YES ☑ NO				
C. Are you a solo parent?		If YES, please specify ID No:				
Are you a solo parent?		YES	✓ NO			
		If YES, please speci	fy ID No:			
41. REFERENCES (Person not related by consanguinity or affinity to applica	nt /appointee)	7.				
NAME	ADDRESS	TEL. NO.				
APPLE B. MONTALBAN	BRGY. HIPUSNGO, BAYBAY, LEYTE	9357512078				
	SNOT: MI CONCO, BATBAT, LETTE	9337312076	==			
CECILE ORTIZ	CEBU CITY	9229022903	45 1			
JEZIEL ELA O. SAYCON	LABANGON, CEBU CITY	9070517473				
42. I declare under oath that I have personally accomplished	1					
complete statement pursuant to the provisions of perting	ent laws, rules and regulations of the F	enublic of the				
rillippines. I authorize the agency head/authorized represe	ntative to verify/validate the contents state	horoin I				
agree that any misrepresentation made in this docu administrative/criminal case/s against me.	ment and its attachments shall cause	the filing of	PHOTO			
asiminate determination odesors against the.						
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)	A A					
PLEASE INDICATE ID Number and Date of Issuance						
Government Issued ID: PASSPORT						
ID/License/Passport No.: P6126008B		-040				
	:)					
Date/Place of Issuance: 01/19/2021 -DFA TACLOBAN	01/19/2023 Date Accomplished		Right Thumbmark			
CHECODIDED AND CHICAGO						
SUBSCRIBED AND SWORN to before me this	, affiant exhibiting	his/her validly issued g	overnment ID as indicated above.			
		1				
.	Person Administering Oath					
	19.2	I				