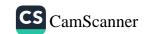
| CS Form No. 212   |  |  |   |                                 |  |  | No.                        |  |  |
|---|--|--|---|---------------------------------|--|--|----------------------------|--|--|
| Revised 2017  |  | NAL DAT  |   |                                 |  |  |                            |  |  |
| WARNING: Any misrepresenta<br>concerned.<br>READ THE ATTACHED GUIDE | tation made in the Personal Data Sheet and the   | Work Experience Sheet sh   | all cause the f                                     | iling of adm                    | inistrative/   | eriminal case/s a                                    | gainst the pe              | rson   |  |
| The appropriate boxes   | E TO FILLING OUT THE PERSONAL DATA SHE<br>as ( ) and use separale sheet if necessary. Indicate t   | N/A if not applicable. DO NOT /  | PLISHING THE<br>ABBREVIATE.                         | PDS FORM                        | 1. CS ID No.   |  | (Do not fill up.           | For CSC use on                                 |  |
| HARROW HINEST AND   | ON STATE OF THE PARTY OF THE PA |  |   |                                 | THOUSE THE PARTY OF THE PARTY O | MIN SAN SITE   | AND PERSONAL PROPERTY.     | AND THE PROPERTY.                              |  |
| 2. SURNAME  | KINTANAR   |  |   | 34 (44.7)                       |  |  |                            |  |  |
| FIRST NAME  | PORTIA LYN NAME EXTENSION (JR., SR) N/A  |  |   |                                 |  |  |                            |  |  |
| MIDDLE NAME   | BALTAZAR   |  |   |                                 | -  |  |                            |  |  |
| 3. DATE OF BIRTH (mm/dd/yyyy)                                       | 01/15/2000   | 16. CITIZENSHIP  |   | ☑ Filipino ☐ Dual Gtizenshi     |  |  |                            |  |  |
| 4. PLACE OF BIRTH   | CEBU CITY  | If holder of dual citize   |   | □ by birth Pls. indicate        |  | ✓ by birth  Pls. indicate of                         | by natural country:        | lization                                       |  |
| 5. SEX  | ☐ Male ☑ Female  | please indicate the d  | etails.   | Philippines                     |  |  |                            | _  |  |
| 6 CIVIL STATUS  | Single Married Separated Other/s:  | 17. RESIDENTIAL ADDRESS  | CAMBATUAN House/Block/Lot No. N/A                   |                                 |  | N/A<br>Street<br>BUNGA                               |                            |  |  |
| 7. HEIGHT (m)   | 5'2  | -  | E   | Subdivision/Village BAYBAY CITY |  |  | Barangay<br>LEYTE          |  |  |
| 8. WEIGHT (kg)  | 55 KG  | ZIP CODE   |   | hty/Municipality                |  | 6521   | Province                   |  |  |
| 9. BLOOD TYPE   | 0+   | 18. PERMANENT ADDRESS  |   | CAMBATUAN                       |  | - NO.  | N/A                        |  |  |
| 10. GSIS ID NO.   | N/A  | -  | Hou   | use/Block/Lot No<br>N/A         | )  |  | Street<br>BUNGA            |  |  |
| 11. PAG-IBIG ID NO.   |  | -  | Sui   | BAYBAY CIT                      |  |  | Barangay<br>LEYTE          |  |  |
|   | N/A  | -  | C   | ity/Municipality                |  | 7-0000   | Province                   |  |  |
| 12. PHILHEALTH NO.  | 13-025559238-7   | ZIP CODE   |   |                                 |  | 6521   |                            |  |  |
| 13. SSS NO.   | N/A  | 19. TELEPHONE NO   |   | N/A                             |  |  |                            |  |  |
| 14, TIN NO.   | N/A  | 20. MOBILE NO.   |   |                                 | 09   | 659869508  |                            |  |  |
| 15. AGENCY EMPLOYEE NO  | N/A  | 21. E-MAIL ADDRESS (if arry)   |   |                                 | portialy   | nk@gmail.con   | 1                          |  |  |
| 4) 15-15-14-7-15-(0)-(c)-(0)1/40)                                   |  | AUTO-CONTINUE OF PRINCIPAL |   | 1,25,240                        | th all facilities  | 1075 2 (des 200)                                     | aliting through            | TEN DA   |  |
| 22. SPOUSE'S SURNAME  | N/A  | N/A  | 23. NAME of CHILDREN (Write full name and list all) |                                 |  |  | DATE OF BIRTH (mm/dd/yyyy) |  |  |
| FIRST NAME  | N/A  | NAME EXTENSION (JR., SR)   | KELSEY SUMMER KINTANAR RAÑOLA                       |                                 |  | R RAÑOLA   | 12/22                      | 2/2020   |  |
| MIDDLE NAME   | N/A  |  |   |                                 |  |  |                            |  |  |
| OCCUPATION  | N/A  |  |   |                                 |  |  |                            |  |  |
| EMPLOYER/BUSINESS NAME  | N/A  |  |   |                                 |  |  |                            |  |  |
| BUSINESS ADDRESS  | N/A  |  |   |                                 |  |  |                            |  |  |
| TELEPHONE NO.   | N/A  |  |   |                                 |  |  |                            |  |  |
| 24. FATHER'S SURNAME  | KINTANAR   | N/A  |   |                                 |  |  |                            |  |  |
| FIRST NAME  | FERDENAND  | NAME EXTENSION (JR., SR)   |   |                                 |  |  |                            |  |  |
| MIDDLE NAME   | AGURA  |  |   |                                 |  |  |                            |  |  |
| 25. MOTHER'S MAIDEN NAME  |  |  |   |                                 |  |  |                            |  |  |
| SURNAME   | BALTAZAR   |  |   |                                 |  |  |                            |  |  |
| FIRST NAME  | VENUS  |  |   |                                 |  |  |                            |  |  |
| MIDDLE NAME   | CALA   |  | 1000  | (Ce                             | ontinue on se  | parate sheet if neces                                | sary)                      |  |  |
| (ii) faleittey/tiffe)Malatar-(e)f(c)                                | ROUND  |  |   |                                 | No.  |  |                            |  |  |
| 26. LEVEL   | NAME OF SCHOOL<br>(Write in ful)   | BASIC EDUCATION/DEGRE<br>(Write in ful)  | EE/COURSE   | PERIOD OF A                     | To   | HIGHEST LEVEL/<br>UNITS EARNED<br>(if not graduated) | YEAR<br>GRADUATED          | SCHOLARSHIP/<br>ACADEMIC<br>HONORS<br>RECEIVED |  |
| ELEMENTARY  | VISCA FOUNDATION ELEMENTARY SCHOOL   | PRIMARY EDUCATION  |   | 2007                            | 2012   | N/A  | 2012                       | N/A  |  |
| SECONDARY   | FRANCISCAN COLLEGE OF THE IMMACULATE CONCEPTION (JUNIOR HIGH)  | SECONDARY EDUCATION  |   | 2012                            | 2016   | N/A  | 2016                       | N/A  |  |
|   | VISAYAS STATE UNIVERSITY INTEGRATED HIGH<br>SCHOOL (SENIOR HIGH)   | SECONDARY EDUCA  | ATION   | 2016                            | 2018   | N/A  | 2018                       | N/A  |  |
| VOCATIONAL /<br>TRADE COURSE  | BAYBAY TECH-VOC  | COMPUTER SYSTEMS SER   | EVICING NCII  | 2024                            | 2024   | N/A  | N/A                        | N/A  |  |
| COLLEGE   | VISAYAS STATE UNIVERSITY   | BSED- MAJOR IN EN  | GLISH   | 2018                            | 2022   | N/A  | 2022                       | SCHOLAR  |  |
| GRADUATE STUDIES  | N/A  | N/A  |   | N/A                             | N/A  | N/A  | N/A                        | N/A  |  |
| CICNATURE   | Gath.  | Continue on separate sheet if nece   | essary)   | D/                              | TE   |  | -1202                      | 1  |  |
| SIGNATURE   | 1  |  |   | DA                              | IE .   |  | 5/202                      |  |  |



|             | ANGE BUGIBII   |   | - A                | DATE OF                                | 417 100 417                                  |   |  | LICENSE (if a                | pplicable)               |
|-------------|--|---|--------------------|--|--|---|--|------------------------------|--------------------------|
|             | R SERVICE/ RA 1080<br>SPECIAL LAWS/<br>ANGAY ELIGIBILITY | ) (BOARD/ BAR) UNDER<br>) CES/ CSEE<br>/ DRIVER'S LICENSE | (If Applicable)    | DATE OF<br>EXAMINATION /<br>CONFERMENT |  | EXAMINATION / CONFERMENT I NATIONAL HIGH SCHOOL FACLOBAN CITY |  | NUMBER                       | Date of<br>Validity      |
|             | SSIONAL TEACH  |   | 82.0               | MARCH 19, 2023                         | SAGKAHAN NATIO                               |   |  | 2059956                      | 01/15/202                |
| ном         | NOR GRADUATE   | ELIGIBILITY   | N/A                | N/A                                    | PALO   | PALO LEYTE  |  | 100108230964                 | N/A                      |
|             |  |   |                    |  |  |   |  |                              |                          |
| Wolk (2     | XPERIENCE  | AND SOUTH THE PERSON                                      |                    | ntinuo on separato shoet II            | T. Halland                                   |   |  |                              | 10000                    |
| durin priva | SIVE DATES   | Strangen were a St.                                       | (5073) Propolita   |  | identification (In objection)                | Work Exec   | SALARY/ JORY PAY   |                              | 40.47                    |
|             | SIVE DATES<br>n/dd/yyyy)                                 | POSITION TO<br>(White in full/Do not a                    | TLE<br>abbreviate) |  | ICY / OFFICE / COMPANY<br>to not abbreviate) | MONTHLY<br>SALARY   | GRADE (#<br>applicable)A STEP<br>(Fornat '00-0')/<br>INCREMENT | STATUS OF<br>APPOINTMENT     | GOVT<br>SERVICE<br>(Y/N) |
| N/A         | N/A  | N/A   |                    |  | N/A  | N/A   | N/A  | N/A                          | N/A                      |
|             |  |   |                    |  |  |   |  |                              |                          |
| SIGNA       | TURE   | Edit  | (Co                | ntinue on separate sheet if            | necessary) DATE                              | 06/   | los po   | 2Y<br>SFORM 212 (Revised 20) | - A-1211/20              |

| NAME & ADDRESS OF                    | ORGANIZATION                   | INCLUSIVE DATES<br>(mm/dd/yyyy) |                   | HARBER OF HOURS | POSITION / NATURE OF WORK  |   |  |
|--------------------------------------|--------------------------------|---------------------------------|-------------------|-----------------|--|---|--|
| (Write in full)                      |                                | From To                         |                   |                 | And the state of t |   |  |
| N/A                                  |                                | N/A                             | N/A               | N/A             |  | N/A   |  |
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|                                      |                                |                                 |                   |                 |  |   |  |
| II. LEARNING AND DEVELOPMENT (L&D    | INTERVENTIONS TRAINING PRO     | dove on separate i              | #Not#o            |                 | And the last of th |   |  |
| TITLE OF LEARNING AND DEVELOPMENT IN | NTERVENTIONS/TRAINING PROGRAMS | INCLUSIVE                       | DATES OF<br>DANCE | MANBER OF HOURS | Type of LD<br>(Managenal/<br>Supervisory/  | CONDUCTED/ SPONSORED BY<br>(Write in Mi)        |  |
| (White in                            | TUI)                           | From                            | То                |                 | Technical/etc)   |   |  |
| NIA                                  |                                | N/A                             | N/A               | N/A             | N/A  | N/A   |  |
|                                      |                                |                                 |                   |                 |  |   |  |
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|                                      |                                | 70.50                           |                   |                 |  |   |  |
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|                                      |                                |                                 |                   |                 |  |   |  |
|                                      |                                |                                 |                   |                 |  |   |  |
| N. OTHER INFORMATION                 | (Cont                          | inue on separate s              | heet if necessar  | (y)             |  |   |  |
| 31 SPECIAL SKILLS and HOBBIES        | 32 NON-                        | ACADEMIC DISTIN                 | CTIONS/RECO       | GNITION         | 1  | MEMBERSHIP IN ASSOCIATION/ORGANIZAT             |  |
| COMPUTER LITERATE (MS WORD, MS       | 32                             | (Write in full)                 |                   |                 |  | (Wate in full)                                  |  |
| POWERPOINT) DANCING                  | N/A<br>N/A                     |                                 |                   |                 |  | N/A   |  |
| DRAWING                              |                                | N/A                             |                   |                 | N/A  |   |  |
| COOKING                              |                                | N/A                             |                   |                 | N/A  |   |  |
| OUNING                               |                                | NA                              |                   |                 |  |   |  |
|                                      |                                | -                               |                   |                 |  |   |  |
|                                      |                                |                                 |                   |                 |  |   |  |
| THE PERSON ASSESSMENT OF A           |                                | nue on separate si              | heet if necessar  | 0.70            | ALC SAND TORSE   |   |  |
| SIGNATURE                            | Excessor .                     |                                 |                   | DAT             | TE   | DQ/D5/2024<br>CS FCHUM 212 (Havised 2017), Page |  |



|              | Are you rolated 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 appointed, a within the third degree?  | I I YES IZI NO  |                                  |                                 |  |  |
|--------------|---|---|----------------------------------|---------------------------------|--|--|
|              | b. within the fourth degree (for Local Government Unit - Care   | If YES, give details.   |                                  |                                 |  |  |
| 35           | a Have you ever been found guilty of any administrative offer   | ☐ YES ☑ NO If YES, give details:  |                                  |                                 |  |  |
|              | b. Have you been criminally charged before any court?   | TYES NO  If YES, give details:  Date Filed:  Status of Case/s:                                      |                                  |                                 |  |  |
| 36.          | Have you ever been convicted of any crime or violation of an by any court or Inbunal?   | ☐ 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, end out (abolition) in the public or private sector?  | YES If YES, give details:   | ☑ NO                             |                                 |  |  |
| 38           | a. Have you ever been a candidate in a national or local electron and a second a secon | ☐ YES If YES, give details: ☐ YES ☑ NO If YES, give details:  |                                  |                                 |  |  |
| 39           | Have you acquired the status of an immigrant or permanent   | ☐ YES ☑ NO If YES, give details (country)   |                                  |                                 |  |  |
| 40<br>a<br>b | Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag 7277), and (c) Solo Parents Welfare Act of 2000 (RA 8972), Are you a member of any indigenous group?  Are you a person with disability?  Are you a solo parent?   | ☐ YES ☑ NO If YES, please specify. ☐ YES ☑ NO If YES, please specify ID No: ☐ YES ☑ NO If YES ☑ POO |                                  |                                 |  |  |
| 41.          | REFERENCES (Person not related by consanguinity or affinity to applicar   | nt /appointee)  |                                  | -                               |  |  |
|              | NAME  | ADDRESS   | TEL NO                           |                                 |  |  |
|              | MARIA JAY-ANN MODINA JAVIER   | MARCOS BAYBAY CITY, LEYTE   | 9198148360                       |                                 |  |  |
| Т            | JOHN LESTER DUMADAG PROTACIO  | MARGATAS BAYBAY CITY, LEYTE   | 9603061328                       | ( 6.)                           |  |  |
|              | MYLEN MALIGRO TRIPOLI   | MAKINHAS BAYBAY CITY, LEYTE   | 9464780510                       |                                 |  |  |
| 42           | I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertine Philippines. I authorize the agency head/authonzed representation made in this doct administrative/criminal case/s against me.  | ent laws, rules and regulations of the<br>esentative to verify/validate the content                 | Republic of the s stated herein. | PORTIA UNI BACAZUR KINTAWAR     |  |  |
| F            | iovernment Issued ID (i.e Passport, GSIS, SSS, PRC, Driver's License, etc.)  **LEASE INDICATE ID Number and Date of Issuance**  overnment Issued ID PRC LICENSE   | Cal this Se   |                                  |                                 |  |  |
| H            | Officense/Passport No.: 2059956  ale/Place of Issuance; June 26, 2023/ Ormoc City   | oox)  | Right Thumbmark                  |                                 |  |  |
|              | SUBSCRIBED AND SWORN to before me this 0 6  | JUN 2024 , affiant exhibiting   | ng his/her validly issued go     | vernment ID as indicated above. |  |  |
|              | JOC, NO.  | Leyt-   |                                  |                                 |  |  |