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 READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM. Print legibly. Tick appropriate boxes () and 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 Saboroso NAME EXTENSION (JR., SR) FIRST NAME **Cherry Grace** MIDDLE NAME Duran 3. DATE OF BIRTH 3/3/1995 16. CITIZENSHIP Filipino Dual Citizenship (mm/dd/yyyy) ___ by birth by naturalization BRGY. IMELDA BAYBAY CITY LEYTE 4. PLACE OF BIRTH If holder of dual citizenship, Pls. indicate country: please indicate the details. Male Female Female 5. SEX Single 17. RESIDENTIAL ADDRESS Centro Married 6 CIVIL STATUS Single House/Block/Lot No Widowed Separated Brgy. Imelda Other/s: Subdivision/Village Barangay Baybay City Leyte 7. HEIGHT (m) 1.51 meters City/Municipality Province ZIP CODE 8. WEIGHT (kg) 147 kg 18. PERMANENT ADDRESS Centro 9. BLOOD TYPE Type O House/Block/Lot No. Street Brgy. Imelda 10. GSIS ID NO. N/A Barangay Subdivision/Village Baybay City Leyte 11. PAG-IBIG ID NO. 1211-7896-6590 City/Municipality Province 02-026769127-5 ZIP CODE 6521 12. PHILHEALTH NO. 06-3841959-7 19. TELEPHONE NO. 13. SSS NO. None 14. TIN NO. 09685693695 330-645-131-000 20. MOBILE NO. 15. AGENCY EMPLOYEE NO. saborosocherrygrace@yahoo.com None 21. E-MAIL ADDRESS (if any) **FAMILY BACKGROUND** 22. SPOUSE'S SURNAME 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) FIRST NAME MIDDLE NAME **OCCUPATION** EMPLOYER/BUSINESS NAME **BUSINESS ADDRESS** TELEPHONE NO. 24. FATHER'S SURNAME Saboroso NAME EXTENSION (JR., SR) FIRST NAME Michael Sr. MIDDLE NAME Eco 25. MOTHER'S MAIDEN NAME SURNAME Duran FIRST NAME Nenita

III. EDUCATIONAL BACKGROUND

MIDDLE NAME

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	YEAR GRADUATED			

Nuñez

ELEMENTARY Imelda Elementary School Primary 6/27/1905 6/30/1905 c/30/1905 2008 valedictoria

(Continue on separate sheet if necessary)

SCHOLARSHIP/ ACADEMIC

HONORS

SECONDARY	Makinhas National High School	Secondary	6/30/1905	7/3/1905		2011	with honor	
VOCATIONAL / TRADE COURSE								
COLLEGE	Visayas State University	BS in Agribusiness	7/4/1905	7/8/1905		2016	none	
GRADUATE STUDIES								
(Continue on separate sheet if necessary)								
SIGNATURE	Q		DA	ITE	No	ovember 4, 2022		

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IV. CIVIL S	ERVICE ELIG	iBILITY							
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE (16 April 1941)				DATE OF				LICENSE (if applicable)	
ВА		WS/ CES/ CSEE ITY / DRIVER'S LICENSE	(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT		RMENT	NUMBER	Date of Validity
	CSE- PROFESSIONAL 82.7		8/7/2022 Tacloba		oan City		waiting		
			(Con	tinue on separate sheet	if necessary)				
	EXPERIENCE rate employme	nt. Start from your recen	t work) Description	n of duties should b	e indicated in the attache	ed Work Fxr	erience sheet		
28. INCLI	USIVE DATES				ENCY / OFFICE / COMPANY		SALARY/ JOB/ PAY GRADE (if		GOV'T
From	nm/dd/yyyy) To	POSITION T (Write in full/Do not			-NCY / OFFICE / COMPANY //Do not abbreviate)	MONTHLY SALARY	applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	SERVICE (Y/ N)
8/15/2016	2/5/2021	Document Co	ntroller	Δταμρο	Corporation	16000.00	N/A	Regular	N/A
9/12/2022	PRESENT	Supervis			Express Services	10000.00	N/A	Casual	N/A
9/12/2022	PRESENT	Supervis		Golden Gate	Express Services	10000.00	N/A	Casuai	N/A

(Continue on separate sheet if necessary)								
SIGNA	TURE	Q		DATE	11/04/2022			

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VI. VOLUNTARY WORK OR INVOLVEMENT	IN CIVIC / NON-GOVERNMENT	/PEOPLE/V	OLUNTARY	ORGANIZATIO	ON/S	
29. NAME & ADDRESS OF O	RGANIZATION	INCLUSIV	/E DATES			
(Write in full		(mm/de	d/yyyy) To	NUMBER OF HOURS		POSITION / NATURE OF WORK
None		FIOIII	10			
Notice						
	(Con	tinue on separate s	shoot if nocessary			
VII. LEARNING AND DEVELOPMENT (L&D) (Start from the most recent L&D/training program and inclu	INTERVENTIONS/TRAINING P	ROGRAMS A	TTENDED		agerial positions)	
30. TITLE OF LEARNING AND DEVELOPMENT INTE (Write in full		INCLUSIVE ATTEN (mm/d	DANCE	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
		From	То		recrimical/etc)	
None						
	(Con	tinue on separate s	sheet if necessary			
VIII. OTHER INFORMATION	Con	ao on soparate s	Joen necessaly,			
			ICTIONS / RECOG	NITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
Singing		None				Adventist Professional
CAD Basics						

Administrative skills			
	(Continue on separate sheet if necessary	7)	
SIGNATURE	G	DATE	11/04/2022

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34. Are you related by consanguinity or affinity to the appointing chief of bureau or office or to the person who has immediat Bureau or Department where you will be apppointed, a. within the third degree? b. within the fourth degree (for Local Government Unit - Ca	YES NO YES NO If YES, give details:		
35. a. 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 details: Date Filed: Status of Case/s:	
36. Have you ever been convicted of any crime or violation of a by any court or tribunal?	ny law, decree, ordinance or regulation	☐ 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, e out (abolition) in the public or private sector?		YES NO If YES, give details:	
38. a. Have you ever been a candidate in a national or local ele Barangay election)?	☐ YES NO If YES, give details:		
 b. Have you resigned from the government service during t election to promote/actively campaign for a national or loca 	YES NO If YES, give details:		
39. Have you acquired the status of an immigrant or permanen	☐ YES NO If YES, give details (country):		
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma	gna Carta for Disabled Persons (RA		
7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972) a. Are you a member of any indigenous group?	, please answer the following items:	YES NO	
b. Are you a person with disability?		If YES, please specify: YES NO	
c. Are you a solo parent?		If YES, please specify ID No: YES NO If YES, please specify ID No:	
41. REFERENCES (Person not related by consanguinity or affinity to applicar	it /appointee)	III 120, please specify in the	
NAME	ADDRESS	TEL. NO.	
Joynalyn Cabalquinto	Anda, Pangasinan	9126039610	
Ruel Requiez	9067742157		
42. I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertin Philippines. I authorize the agency head/authorized reprint I agree that any misrepresentation made in this document administrative/criminal case/s against me.	ent laws, rules and regulations of the esentative to verify/validate the content	Republic of the ts stated herein.	
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 0111-7332097-5 ID/License/Passport No.:	box)		

oto/Dioco of incurance: Bases CCB Complex 2017

Date/Flace Of Issuance. Fasay COF Complex 2017	Date Accomplished	Right Thumbmark
SUBSCRIBED AND SWORN to before me this	, affiant exhibiting his/her validly issued	government ID as indicated above.
	Person Administering Oath	

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