CS Form No. 212 Revised 2017	PERSO	NAL DATA	SH	EE1					
concerned.	ation made in the Personal Data Sheet and the					criminal case/s e	gainst the per	<b>3</b> 011	
Print legibly. Tick appropriate boxe	es ( ) d use separate sheet if necessary. Indicat	te N/A if not applicable. DO NOT ABI	BREVIATE.		1. CS ID No.		(Do not fill up. F	or CSC use only)	
I. PERSONAL INFORMATION								7-DA 12	
2. SURNAME	TALLECER		-			NAME EXTENSION (JR	L. SR)		
FIRST NAME	DARWIN	TOTAL EXILITION (M.							
MIDDLE NAME	CAGANON								
3. DATE OF BIRTH (mm/dd/yyyy)	12/19/1998	16. CITIZENSHIP	☑ Filipin	。	Diby naturalization				
4. PLACE OF BIRTH	MAYORGA, LEYTE	If holder of dual citizenship,		Pls. indicate country:					
5. SEX	☑ Male ☐ Fernale	please indicate the details.							
6 CIVIL STATUS	☑ Single ☐ Married	17. RESIDENTIAL ADDRESS				ZONE 3			
makes and a second seco	☐ Widowed ☐ Separated	And I there is a name of the same	Hou	se/Block/Lot No	0.	Street WILSON			
	Other/s:	and the same of th		division/Village	Color Section	THE RESERVE OF THE PERSON NAMED IN	Barangay LEYTE		
7. HEIGHT (m)	1.59			MAYORGA ly/Munic/pality			Province		
8. WEIGHT (Ng)	60	ZIP CODE			aliya, siyasan	6507			
9. BLOOD TYPE	N/A	18. PERMANENT ADDRESS	Hou	se/Block/Lot No			ZONE 3 Street		
10. GSIS ID NO.	N/A						WILSON		
11. PAG-IBIG ID NO.	121344487749	OPENIEW TAMORIAN	Sub	division/Village			Barangay LEYTE		
TI. PASIBISIDINO.		AKOQUIN - BOHYO	Ći	ity/Municipality			Province		
12. PHILHEALTH NO.	13-253168777-2	ZIP CODE		6507					
13. SSS NO.	N/A	19. TELEPHONE NO.				N/A			
14. TIN NO.	757-964-835	20. MOBILE NO.		09124679182 / 09929901426					
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)		darwintallecer25@gmail.com					
II. FAMILY BACKGROUND					034	W. 5. 4. 7 6.			
22. SPOUSE'S SURNAME	N/A	23.1	NAME of CHI	DREN (Write	full name and i	ist all)	DATE OF BIRT	H (mm/dd/yyyy)	
FIRST NAME	N/A	NAME EXTENSION (JR., SR)	N/A				N/A		
MIDDLE NAME	N/A		1						
OCCUPATION	N/A								
EMPLOYER/BUSINESS NAME	N/A						-		
BUSINESS ADDRESS	N/A							1	
TELEPHONE NO.	N/A		ļ			,			
24. FATHER'S SURNAME	DINO								
FIRST NAME	DIORICO	NAME EXTENSION (JR., SR)							
MIDDLE NAME 25. MOTHER'S MAIDEN NAME	TALLECER							7	
	FOTOGLIA								
SURNAME	ESTRELLA		-						
FIRST NAME	MORENO								
MIDDLE NAME	CAGANON		the state of	(C	ontinue on se	parate sheet if neces	sary)		
III. EDUCATIONAL BACKG	GROUND							SCHOLARSHIPI	
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)		PERIOD OF	To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	ACADEMIC HONORS RECEIVED	
ELEMENTARY	ORMOCAY ELEMENTARY SCHOOL	ELEMENTARY		2004	2011	NA	2011	2ND HON. MENTION	
SECONDARY	THE SISTERS OF MARY SCHOOL- BOYSTOWN CEBU INC.	SECONDARY		2011	2014	NA	2014	N/A	
VOCATIONAL / TRADE COURSE	VILLACONZOILO FARM SCHOOL	RICE MACHINERY OPERATION	ON NC II	2022	2022	N/A	2022	NA	
COLLEGE	VISAYAS STATE UNIVERSITY( MAIN CAMPUS)	BACHELOR OF SCIENC AGRICULTURAL ENGINEE		2015	2020	NA	2020	NA	
GRADUATE STUDIES	N/A	N/A		N/A	N/A	- NA	N/A	NA	
SIGNATURE	- Tark	Continue on separate sheet if necessar	γl	DA	TE	05/1	77/2	04	



	SERVICE ELIGI		THE PARTY NAMED IN		ALD RESIDENCE	No. of Contract of	<b>建筑</b> 建水品		Contract of the second
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE			RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINA	PLACE OF EXAMINATION / CONFERMENT			Date of Validity
	A STATE OF THE STA	SYSTEMS ENGINEER	81.99	SEPTEMBER 15-16 , 2022	CEBU DOCTORS UNIVERSITY			0012223	12/19/202
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					11735 799				
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	EXPERIENCE			ontinue on separate sheet if n				May at 14	
Include private employment. Start from your received.  Inclusive DATES (mm/dd/yyyy)  POSITION (Write in full/Do no		ΓLE	DEPARTMENT / AGENO	MONTHLY SALARY	SALARY/JOB/PAY GRADE (if applicable)& STEP (Format "00-0")	STATUS OF APPOINTMENT	GOVT SERVICE (Y/N)		
From	To		10 L s 11 4 4 1		NATIONAL IRRIGATION ADMINISTRATION		INCREMENT	CONTRACTUAL	N N
10/6/2019  10/16/2022	07/25/2019 5/2/2024	ON-THE-JOB TR JOB ORDE			AL OFFICE NO. VIII YORGA	NA 4000.00	NA NA	CONTRACTUAL	Y
04/15/2024	07/15/2024	TRAINER - RICE MAC		VILLACONZOILO I	25000.00	NA	CONTRACTUAL	Y	
01/15/2024	05/24/2024	PART - TIME INST	RUCTOR	VISAYAS STATE UNIVERSITY -MAIN CAMPUS		15000.00	NA	CONTRACTUAL	Y
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SIGN	NATURE	all	7444		DATE	T PRITTING SAM		7/201 S FORM 212 (Revised 2	4

VOLUNTARY WORK OR INVOLVEMEN	and the second s					ACTION OF THE PROPERTY OF THE PARTY.	
NAME & ADDRESS OF (Write in		INCLUSIVE DATES (mm/dd/yyyy)  From To			POSITION / NATURE OF WORK		
N/A		N/A	N/A	N/A		N/A	
	Takan Bayahar						
The state of the s	1 = L,				THE SHA	encess and present an pure secure of	
S LONING AND DEVELOPMENT A		ntinue on separate			2000		
LEARNING AND DEVELOPMENT (Lit from the most recent L&D training program and inc				Executive Manager	el positions)		
D. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (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)	
OMPREHENSIVE COMMUNITY -BASED DISAS		97/27/2018	To 07/31/2018	32.0	TECHNICAL	DOST REGIONAL OFFICE NO. VIII, LGU BAY VISAYAS STATE UNIVERSITY MAIN CAMP	
(CBDRRIM) TRAINING FOR DOST-SELF BE'S AS ACTIVE PLAYERS IN ENGINEERING		03/13/2024	03/13/2024	16.0	TECHNICAL	PHILIPPINE SOCIETY OF AGRICULTURAL A BIOSYSTEMS ENGINEERS REGION 8	
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OTHER INFORMATION	The state of the s	San Carlotte Co.	THE PARTY OF THE P	Colon Supplied		the state of the same of the same	
SPECIAL SKILLS and HOBBIES	32. NO	N-ACADEMIC DISTI	NCTIONS / RECO le in (full)	GNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZAT (Write in full)	
GUITAR	ŅA				N/A		
PHOTOSHOP	NA				N/A		
	and the second s					A Company of the Comp	
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interesting a treatment of the company of the compa	(CC	onanue on separate	sheet if necessar	#TOTAL PROPERTY STATES			
SIGNATURE	7 444	Y	e specie	<b>D</b>	ATE	05/07/2024	



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? b. within the fourth degree (for Local Government Unit - Care		☑ NO ☑ NO			
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?	☐ YES ☑ NO If YES, give details:  Date Filed:  Status of Case/s:				
36. Have you ever been convicted of any crime or violation of an any court or tribunal?	☐ YES ☑ NO If YES, give details:				
37. Have you ever been separated from the service in any of the dropped from the rolls, dismissal, termination, end of term, fir 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 election Barangay election)?	tion held within the last year (except	YES If YES, give detai	☑ NO ls:		
b. Have you resigned from the government service during the election to promote/actively campaign for a national or local of the service of the service during t	☐ YES If YES, give detai	☑ NO ls:			
39. Have you acquired the status of an immigrant or permanent	YES INO If YES, give details (country):				
40 Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag and (c) Solo Parents Welfare Act of 2000 (RA 8972), please					
a. Are you a member of any indigenous group?	answer the following items.	☐ YES	☑ NO		
Are you a person with disability?	If YES, please specify	:			
The you a porson was disability?		YES If YES, please specify	ID No:		
c. Are you a solo parent?	-	YES If YES, please specify	☑ NO		
41. REFERENCES (Person not related by consanguinity or affinity to applican	t /appointee)				
NAME	ADDRESS	TEL. NO.			
ENGR. MA. GRACE C. SUMARIA	BRGY. PATAG, BAYBAY CITY, LEYTE	9093905057	(a)		
ENGR. LEMUEL C. TROCINO	POB. DISTRICT 6, BURAUEN, LEYTE	9074979240			
JESSICA B. NAVALES	STA. CRUZ, MAYORGA, LEYTE	9630782961			
142 I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I authorize the agency head/authorized representative to verify/validate the contents stated herein.  agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me.					
Government Issued ID (i.e Passport, GSIS, SSS, PRC, Driver's License, etc.)  PLEASE INDICATE ID Number and Date of Issuance  Government Issued ID PRC LICENSE	•				
ID/License/Passport No: 0012223	ox)	The authority of the			
Date/Place of Issuance: 03/23/2023/ PRC TACLOBAN	Date Accomplished	UCY	Right Thumbmark		
SUBSCRIBED AND SWORN to before me this	g his/her validly issued g	overnment ID as indicated above.			
	1 62				
C TANK TONGS	1 2 401 1		CS FORM 212 (Revised 2017), Page 4 of 4		