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 concerned.

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	NAQUIZ
FIRST NAME	KRISTINE JANVY
NAME EXTENSION (JR., SR)	
MIDDLE NAME	LORETO
3. DATE OF BIRTH (mm/dd/yyyy)	11-04-1985
4. PLACE OF BIRTH	BAYBAY CITY, LEYTE
5. SEX	☐ Male ☑ Female
6. CIVIL STATUS	☐ Single ☐ Married ☑ Separated ☐ Widowed ☐ Other/s:
7. HEIGHT (m)	5'
8. WEIGHT (kg)	45 Kgs.
9. BLOOD TYPE	A+
10. GSIS ID NO.	NA
11. PAG-IBIG ID NO.	1210-7459-0214
12. PHILHEALTH NO.	12051184398 2
13. SSS NO.	33-9677182-0
14. TIN NO.	243-329-621-000
15. AGENCY EMPLOYEE NO.	

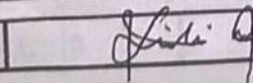
16. CITIZENSHIP	☑ Filipino ☐ Dual Citizenship ☐ by birth ☐ by naturalization
If holder of dual citizenship, please indicate the details.	Pls. indicate country:
17. RESIDENTIAL ADDRESS	House/Block/Lot No.: LAWIS, TAYTAYAN; Street; Subdivision/Village: POBLACION ZONE 22; Barangay: JUAN BARQUERA; City/Municipality: BAYBAY; Province: LEYTE
ZIP CODE	6521
18. PERMANENT ADDRESS	House/Block/Lot No.: LAWIS, TAYTAYAN; Street; Subdivision/Village: POBLACION ZONE 22; Barangay: JUAN BARQUERA; City/Municipality: BAYBAY; Province: LEYTE
ZIP CODE	6521
19. TELEPHONE NO.	NA
20. MOBILE NO.	0912-044-2114
21. E-MAIL ADDRESS (if any)	kristinejan04@gmail.com

22. SPOUSE'S SURNAME	NAQUIZ	23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	DAVID PAUL	NA	11-24-1984
NAME EXTENSION (JR., SR)			
MIDDLE NAME	FLORES		
OCCUPATION	COURIER DELIVERY		
EMPLOYER/BUSINESS NAME	TYRONE COMPANY		
BUSINESS ADDRESS	NIOG I, BACOOR CITY, CAVITE		
TELEPHONE NO.	NA		
24. FATHER'S SURNAME	LORETO		04-29-1965
FIRST NAME	IVY		
NAME EXTENSION (JR., SR)			
MIDDLE NAME	MELTON		
25. MOTHER'S MAIDEN NAME	NOTARTE		01-11-1961
SURNAME	BAGUIO		
FIRST NAME	JANETTE		
MIDDLE NAME	NOTARTE	(Continue on separate sheet if necessary)	

II. EDUCATIONAL BACKGROUND

26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE From	PERIOD OF ATTENDANCE To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
ELEMENTARY	Baybay North Central School	Primary education	1993	1999		1999	
SECONDARY	Bacoor National Highschool	Highschool	2000	2003		2003	
VOCATIONAL / TRADE COURSE	Applied Skills Development	Computer Application	2005	2005		2005	
COLLEGE	University of Cebu	Bachelor Elementary Education	2009	2012		2012	
GRADUATE STUDIES	NA	NA					

(Continue on separate sheet if necessary)

SIGNATURE		DATE	01-25-2023

IV. CIVIL SERVICE ELIGIBILITY

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 EXAMINATION / CONFERMENT	LICENSE (if applicable)	
				NUMBER	Date of Validity
Licensure Examination of Teachers	80.40%	06-26-22	PMI College Quezon, City	21-5170640	11/04/25

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

(Include private employment. Start from your recent work. Description of duties should be indicated in the attached Work Experience sheet.)

28. INCLUSIVE DATES (mm/dd/yyyy)		POSITION TITLE (Write in full/Do not abbreviate)	DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOVT SERVICE (Y/ N)
From	To						
2018	2020	Classroom Teacher Adviser	Andia E. Academy of Carite-Mother Mary helping home	6,000		Contract	N
2016	2017	Teacher assistant	The Palmridge School	9,000		Contract	N
2014	2015	NGO's Teacher	Arcanys Early Learning Foundation Incorporated	7,000		Contract	N
2014	2014	Junior camp ESL Teacher	Cebu Globalization ESL Center Incorporated	8,000		Contract	N
2014	2014	Utility billing clerk	Gaisano Grand Fiesta Mall Chagun Management & Development Corporation	8,000		Contract	N
2013	2013	Check-out clerk	Vicsal Development Corporation	8,000		Contract	N
2012	2012	Part time private tutor	Dr. James A Guardiario	3,000		Part time	N
2004	2006	Part time sales agent	Omniland Estate Realty	Commission Bases		Part time	N

(Continue on separate sheet if necessary)

SIGNATURE		DATE	01-25-2023

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

29. NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy) From	To	NUMBER OF HOURS	POSITION / NATURE OF WORK
Philippine Junior Jaycees, Incorporated - University of Cebu	2009	2011		Former Ways & Means commissioner
				Membership Qualification Development Officer
Innovative Elementary Education	2009	2012		Member

(Continue on separate sheet if necessary)

VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

(Start from the most recent L&D training program and include only the relevant L&D training taken for the last five (5) years for Division Chief, Executive/Managerial positions)

30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy) From	To	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
Whole Brain Literacy 101	2020	2020			Carl E. Balita
Travel School Training	2014	2014			Review Center
Live Diorama	2011	2011			Prolific Responsive
					Organization of English
					Majors
Art of Questioning	2012	2012			College of Teacher
					Education
Alternative Teaching Strategies	2012	2012			College of Teacher
					Education
Applied Skills Development Incorporated - Computer Application	2005	2005			Applied Skills Development Incorporated

(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)

SIGNATURE		DATE	01-25-2023

34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to the chief of bureau or office or to the person who has immediate supervision over you in the Office, Bureau or Department where you will be apppointed, a. within the third degree? b. within the fourth degree (for Local Government Unit - Career Employees)?	☐ YES ☑ NO ☐ YES ☐ NO If YES, give details:
35. a. Have you ever been found guilty of any administrative offense?	☐ 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 any law, decree, ordinance or regulation by any court or tribunal?	☐ YES ☑ NO If YES, give details:
37. Have you ever been separated from the service in any of the following modes: resignation, retirement, dropped from the rolls, dismissal, termination, end of term, finished contract or phased 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 election held within the last year (except 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 local candidate?	☐ YES ☑ NO 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) Magna Carta for Disabled Persons (RA 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), please answer the following items: a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent?	☐ YES ☑ NO If YES, please specify: ☐ YES ☑ NO If YES, please specify ID No: ☐ YES ☑ NO If YES, please specify ID No:

41. REFERENCES (Person not related by consanguinity or affinity to applicant)

NAME	ADDRESS	TEL. NO.
Leovina E. Manzano	Bacoor City, Cavite	09347362136
Marikazu Anne S. Apolinar	Las Piñas, City	09058073048
Philip M. Reyes	Cebu, City	09358335970

WAQUIZ, KRISTINE JANIVY L.

42. 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. I 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
ID/License/Passport No.:	21-5170640
Date/Place of Issuance:	09-21-2022

Signature (Sign inside the box)

01-25-2023
Date Accomplished

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SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.

Person Administering Oath