CS Form No. 212								
Revised 2017	PERSO	NAL DAT	A SH	IEE	Т			
	tation made in the Personal Data Sheet and th	he Work Experience Sheet si	hall cause the	filing of ac	lministrative	e/criminal case/s	against the p	oerson
concerned. READ THE ATTACHED GUID	E TO FILLING OUT THE PERSONAL DATA SH	HEET (PDS) BEFORE ACCOI	MPLISHING TH	HE PDS FO	RM.			
	es) and use separate sheet if necessary. Indicat	e N/A if not applicable. DO NOT	ABBREVIATE.		1. CS ID No.		(Do not fill up. I	or CSC use only
I. PERSONAL INFORMATI 2. SURNAME	MALITAO							
			INAME EXTENSION			NAME EXTENSION (JF	(JR., SR) JR.	
FIRST NAME	GIOVANNI PIERRO					,		
MIDDLE NAME 3. DATE OF BIRTH	CUBILLAS	1						
(mm/dd/yyyy)	8/30/1993	16. CITIZENSHIP	✓Filipino		no	Dual Citizenship		
4. DI AGE GE DIDTU	CEBU CITY	-		by birthby naturalizati			zation	
4. PLACE OF BIRTH			If holder of dual citizenship, please indicate the details.		Pls. indicate country:			
5. SEX	✓ Male Female	,						_
6 CIVIL STATUS	Single	17. RESIDENTIAL ADDRESS		V9 PUROK 8 JU. buse/Block/Lot No.		JUA	JANA OSMEÑA EXT. Street	
	Other/s:						KAMPUTHAW Barangay	
7. HEIGHT (m)	1.70	-	Subdivision/Village CEBU CITY			CEBU		
8. WEIGHT (kg)	120	ZIP CODE	City/Municipality		•	Province		
9. BLOOD TYPE	В	18. PERMANENT ADDRESS	V9 PUROK 8			JUANA OSMEÑA EXT.		T.
	-	_	House/Block/Lot No.		Street KAMPUTHAW			
10. GSIS ID NO.	N/A		Subdivision/Village		Barangay			
11. PAG-IBIG ID NO.	121180822946		CEBU CITY City/Municipality		,	CEBU Province		
12. PHILHEALTH NO.	09-251927176-3	ZIP CODE	6000					
13. SSS NO.	06-3864803-8	19. TELEPHONE NO.	032 266 1904					
14. TIN NO.	330-984-557	20. MOBILE NO.	09260827936 / 09398739708					
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)				oil com		
II. FAMILY BACKGROUN		21. E-MAIL ADDRESS (II ally)		giova	IIIIIpieiic	mantaowym	all.COIII	
22. SPOUSE'S SURNAME	N/A		23. NAME of CH	IILDREN (Writ	e full name and	d list all)	DATE OF BIR	TH (mm/dd/yyyy)
FIRST NAME	N/A	NAME EXTENSION (JR., SR)	N/A				1/A	
MIDDLE NAME	N/A		N/A			N/A		
OCCUPATION	N/A				N/A			1/A
EMPLOYER/BUSINESS NAME	N/A		N/A				I/A	
BUSINESS ADDRESS	N/A		N/A			-	I/A	
TELEPHONE NO.	N/A		N/A				N/A N/A	
24. FATHER'S SURNAME	MALITAO		N/A				N/A N/A	
FIRST NAME	TANIE	NAME EXTENSION (JR., SR) JR.	N/A		N/A N/A			
MIDDLE NAME	DALIMOT		N/A			N/A N/A		
25. MOTHER'S MAIDEN NAME	DALIWOT						 	7/7
SURNAME	CUBILLAS						-	
FIRST NAME MA. DOMINGA		<u> </u>				-		
MIDDLE NAME MIDDLE NAME ESMAS		1	(Continue on separate sheet if necessary)					
III. EDUCATIONAL BACK				(0	onunue on Se	parate sneet ii neces	oodi y)	_
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGRE	EE/COURSE	PERIOD OF	ATTENDANCE	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	
				From	То	(ii nor graduated)		RECEIVED

ELEMENTARY CAMPUTHAW ELEM. SCHOOL PRIMARY EDUCATION 6/11/2000 4/10/2006 2006 N/A SECONDARY UNIVERSITY OF CEBU - MAIN CAMPUS 3/10/2010 SECONDARY EDUCATION 6/10/2006 2010 N/A VOCATIONAL / TRADE COURSE N/A UNIVERSITY OF CEBU - MAIN CAMPUS AB POLITICAL SCIENCE COLLEGE 11/10/2010 3/16/2015 2015 N/A CEBU TECHNOLOGICAL UNIVERSITY - GRADUATE SCHOOL MASTER IN PUBLIC ADMINISTRATION PRESENT 30 UNITS N/A GRADUATE STUDIES 8/10/2018 G. Malitzo DATE

SIGNATURE

. CARE	ER SERVICE/ RA 108	30 (BOARD/ BAR) UNDER	DATING	DATE OF				LICENSE (if a	pplicable)
	SPECIAL LAWS		RATING (If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINAT	TION / CONFE	RMENT	NUMBER	Date o Validity
					of Du	OITY			
LICEN	ISED PROFESSIO	ONAL TEACHER	79.8	3/1/2018	CEBU	CHY		1659171	8/30/20
	EXPERIENCE	t Start from your roco		ntinue on separate sheet	if necessary) be indicated in the attach	ad Wark Fy	vnorioneo sho	nt.	
. INCL	USIVE DATES nm/dd/yyyy)	POSITION 7 (Write in full/Do not	TITLE	DEPARTMENT / AG	ENCY / OFFICE / COMPANY I/Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV" SERVIO
16/2019	12/15/2020	COLLEGE INST	RUCTOR	UNIVERSITY OF C	EBU - LM AND BANILAD	28000.00		Floating	
	12/10/2020	0022202 11101		Simple Control of Control		2000.00		riouting	
				ntinue on separate sheet					

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S							
29. NAME & ADDRESS OF ORGANIZATION (Write in full)			VE DATES ld/yyyy) To	NUMBER OF HOURS	POSITION / NATURE OF WORK		
FOCOLARE MOVEMENT			PRESENT	FLEXIBLE	Member/ECCUMENICAL		
Youth For A United World - Philippines			PRESENT	FLEXIBLE	Secretariat/ Building a United World		
VII. LEARNING AND DEVELOPMENT (L&D)		tinue on separate		()			
		INCLUSIVE	DATES OF		Type of LD		
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)			IDANCE Id/yyyy) To	NUMBER OF HOURS	(Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
N/A		From					
	(Con	tinue on separate	sheet if necessary	')			
VIII. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES	32. NON	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)				33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
MUSIC	N/A					N/A	
PUBLIC SPEAKING							
SIGNATURE)Con	thue on separate	sheet if necessary		ATE	02/11/2021	

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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 immediate Bureau or Department where you will be apppointed,						
	a. within the third degree?	☐ YES ☑ NO					
	b. within the fourth degree (for Local Government Unit - Car						
		If YES, give details:	:				
35.	a. Have you ever been found guilty of any administrative of		√ 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	☐ YES					
	by any court or tribunal?		If YES, give details:				
37.	Have you ever been separated from the service in any of th	e following modes: resignation,	YES NO				
	retirement, dropped from the rolls, dismissal, termination, el	nd of term, finished contract or phased	If YES, give details:				
	out (abolition) in the public or private sector? a. Have you ever been a candidate in a national or local ele	ection hold within the last year (except					
38.	Barangay election)?	ection held within the last year (except	☐ YES If YES, give details	NO			
		as three (2) month period before the last					
	 b. Have you resigned from the government service during the election to promote/actively campaign for a national or local 		YES If YES, give details	✓ NO S:			
39	Have you acquired the status of an immigrant or permanent						
00.	3 · · · p	· · · · · · · · · · · · · · · · · · ·	YES VO If YES, give details (country):				
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma						
_	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?	☐ YES ☑ NO If YES, please specify:					
b.	Are you a person with disability?						
	A		If YES, please specify ID No:				
C.	Are you a solo parent?		☐ YES ☑ NO If YES, please specify ID No:				
41.	REFERENCES (Person not related by consanguinity or affinity to applicant	/appointee)					
	NAME	ADDRESS	TEL. NO.	ID picture taken within			
AURELIO MARIA RODRIGUEZ		SISTEMANG PILIPINO INC	9326672176	the last 6 months 4.5 cm. X 3.5 cm			
	RICARDO JERIC API, III	UNIVERSITY OF CEBU - LM	9562760679	(passport size)			
	<u> </u>			Computer generated or photocopied picture			
40	ROGER GENCIANEO	BOMBO RADYO PHILIPPINES	9988574737	is not acceptable			
42.	I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertine						
	Philippines. I authorize the agency head/authorized repre-	esentative to verify/validate the contents	stated herein.				
	I agree that any misrepresentation made in this doc administrative/criminal case/s against me.	ument and its attachments shall caus	e the filing of	РНОТО			
	administrativo o minital oddoro against me.						
	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)	Λ.					
	LEASE INDICATE ID Number and Date of Issuance						
l ⊩	overnment Issued ID: PRC						
	//License/Passport No.: 1659171	ox)					
D	ate/Place of Issuance: CEBU CITY		Right Thumbmark				
	OLIDOODIDED AND OMODALL L. C						
	SUBSCRIBED AND SWORN to before me this, affiant exhibiting his/her validly issued government ID as indicated above.						
		Person Administering Oat	n				