CS Form No. 212 Revised 2017		NAL DAT					
WARNING: Any misrepresenta concerned.	ation made in the Personal Data Sheet and the	Work Experience Sheet sha	ll cause the fil	ing of administrative/cri	minal case/s ag	ainst the perso	n
	TO FILLING OUT THE PERSONAL DATA SHE Output			PDS FORM. 1. CS ID No.		(Do not fill up. F	or CSC use
PERSONAL INFORMATION		With the capping and the cappi					
2. SURNAME	MARINAY						
FIRST NAME	ALVIE MAE			N	AME EXTENSION (JR	., SR) N/A	
MIDDLE NAME	EVANGELISTA			L		-	
3. DATE OF BIRTH (mm/dd/yyyy)	08/29/1996	16. CITIZENSHIP	✓ Filipino		☐ Dual Citizenship ☐ by birth ☐ by naturalization		
4. PLACE OF BIRTH	PLARIDEL, BAYBAY, LEYTE	If holder of dual citize	nship,		Pls. indicate o		
5. SEX	☐ Male	please indicate the d	etails.				-
	✓ Single	17, RESIDENTIAL ADDRESS	T				
6 CIVIL STATUS	☐ Widowed ☐ Separated		Hou	se/Block/Lot No.		Street GAAS	
	Other/s:			odivision/Village		Barangay	
7. HEIGHT (m)	1.55		575375	YBAY CITY ty/Municipality		Province	
8. WEIGHT (kg)	48 kg	ZIP CODE					
9. BLOOD TYPE	N/A	18. PERMANENT ADDRESS	House/Block/Lot No.		Street		
0. GSIS ID NO.	N/A	1940.04 1979				GAAS Barangay	
11. PAG-IBIG ID NO.	121205959626		Subdivision/Village BAYBAY CITY			LEYTE	
			City/Municipality 6521			Province	
2. PHILHEALTH NO.	13-1050194683-5	ZIP CODE	6521				
3. SSS NO.	06-39737139	19. TELEPHONE NO.	N/A				
4. TIN NO.	701-512-174-000	20. MOBILE NO.	(+63)9382759885				
5. AGENCY EMPLOYEE NO.	VJ001339	21. E-MAIL ADDRESS (if any)	alviemae29@gmail.com				
I. FAMILY BACKGROUNE							
2. SPOUSE'S SURNAME	N/A		23. NAME of Ch	ILDREN (Write full name and	list all)	DATE OF BIRTI	H (mm/dd/yy
FIRST NAME		NAME EXTENSION (JR., SR)	A	RVIE AZIEL M. VITUA	UALLA 1		/2023
MIDDLE NAME							
OCCUPATION							
EMPLOYER/BUSINESS NAME							
BUSINESS ADDRESS							
TELEPHONE NO.							
24. FATHER'S SURNAME	MARINAY						
FIRST NAME	ALBERTO	NAME EXTENSION (JR., SR)		H == T			
MIDDLE NAME	SABUCIDO						
25. MOTHER'S MAIDEN NAME					- 14/2-2-		
SURNAME	EVANGELISTA						
FIRST NAME	MARIA FE						
MIDDLE NAME	BALATE			(Continue on se	parate sheet if nec	ressery)	

LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE		HIGHEST LEVEL/ UNITS EARNED	YEAR GRADUATED	SCHOLARSHIP ACADEMIC HONORS
	(Willo II Tally		From	То	(if not graduated)		RECEIVED
ELEMENTARY	FRANCISCAN COLLEGE OF THE IMMACULATE CONCEPTION, BAYBAY, LEYTE, INC.	ELEMENTARY	June 2, 2003	March 21, 2009		2009	SALUTATO RIAN
SECONDARY	FRANCISCAN COLLEGE OF THE IMMACULATE CONCEPTION, BAYBAY, LEYTE, INC.	HIGH SCHOOL	June 8, 2009	March 16, 2013		2013	SALUTATO RIAN
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A		N/A	N/A
COLLEGE	FRANCISCAN COLLEGE OF THE IMMACULATE CONCEPTION, BAYBAY, LEYTE, INC.	BACHELOR OF SECONDARY EDUCATION (BSEd)	June 10, 2013	March 18, 2017		2017	CUM LAUD
GRADUATE STUDIES	FRANCISCAN COLLEGE OF THE IMMACULATE CONCEPTION, BAYBAY, LEYTE, INC.	MASTER OF ARTS In EDUCATION	Apr-17	May-21	31 units	N/A	N/A

SIGNATURE

March 10, 2025

DATE

7. CARE	R SERVICE/ RA 108	0 (BOARD/ BAR) UNDER		DATE OF				LICENSE (if	applicable)
	SPECIAL LAWS		RATING (If Applicable)	EXAMINATION / CONFERMENT	7 TACLOBAN CITY, LEYTE		NUMBER	Date of Validity	
Licensu	re Examination fo	or Teachers (LET)	81.2	SEPT 24, 2017			1573587	08/29/202	
	PD 907 - Honor I	Eligibility		MARCH 12, 2020					
							11 759		
. WORK E	XPERIENCE		(Co	ntinue on separate sheet if	necessary)				
Include priv	ate employment.	Start from your recen	work) Description	on of duties should be	indicated in the attach	ed Work Exp			
	SIVE DATES n/dd/yyyy) To	POSITION TI (Write in full/Do not a			CY / OFFICE / COMPANY to not abbreviate)	MONTHLY SALARY	SALARY/JOB/PAY GRADE (If applicable)& STEP (Formal "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOVT SERVICE (Y/N)
June 1, 2022	Present	Administrative	Aide III	Visayas St	ate University	12068.00	603.40/day	Job Order	Y
June 1, 2019	May 31, 2022	College Fac	ulty	FCIC, Bayb	ay, Leyte, Inc.	10000.00	N/A	Contractual	N
une 1, 2017	March 31, 2019	Junior High School	ol Faculty	FCIC, Bayb	10000.00	N/A	Contractual	N	
		J							
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1									
*****		, ,	(Cor	ntinue on separate sheet if r					
SIGNA	TURE	Amauray.			DATE	1917	March 10, 202	5	

VI. VOLUNTARY WORK OR INVOLVEMENT	'IN CIVIC / NON-GOVERNMEN			ORGANIZATIO	ON/S		
29. NAME & ADDRESS OF OR (Write in full)	RGANIZATION)	INCLUSIV (mm/d	/E DATES Id/yyyy) To	NUMBER OF HOURS	A 100 June	POSITION / NATURE OF WORK	
N/A				1		FOREST MEN OF SE	
	CT P 201 A						
			-				
		ntinue on separate	AND RESIDENCE PROPERTY.)			
VII. LEARNING AND DEVELOPMENT (L&D,) INTERVENTIONS/TRAINING	1				The state of the s	
30. 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)	
ISO 9001:2015 Awareness & Re-Awareness Seminar		From Sept. 9, 2024	To Sept. 9, 2024	4 hours		Visayas State University	
24th Philippine Civil Service Anniversary Month-Long	g Celebration	Sept. 2, 2024	Sept. 2, 2024	4 hours		Visayas State University	
Shaping Culture: Embracing Values for Optimal Work		May 15, 2024	May 15, 2024	8 hours	W-11 - 11:35	Visayas State University	
•		2024	2024				
						Free F.S. Service	
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		-					
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				-			
	10	ontinue on separate	sheet if necessar	20	11-11-510		
VIII. OTHER INFORMATION					V-Ville		
31. SPECIAL SKILLS and HOBBIES	32. NO	N-ACADEMIC DIST	INCTIONS / RECO	GNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
READING		N/	700			N/A	
		N					
INTERNET BROWSING							
	ic ic	ontinue on separat	e sheet if necessa	(אין			
SIGNATURE	apromiser .				ATE	March 10, 2025 CS FORM 212 (Revised 2017), Page 3 of	
						GG FORM 212 (Newset) 2017), Page 3 of	

1							
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,	and the state of the first and the state of					
	a. within the third degree?	☐ YES ☐	Z NO				
	b. within the fourth degree (for Local Government Unit - Care		NO NO				
	(If YES, give details:				
			ii i Lo, give details.				
35.	a. Have you ever been found guilty of any administrative offe	nse?	☐ YES ☐	√ NO			
			If YES, give details:				
			ii i Eo, give details.				
	b. Have you been criminally charged before any court?		B THE STATE OF THE PARTY OF THE STATE OF THE	☑ NO			
			If YES, give details:				
			Date Filed:				
			Status of Case/s:				
36.	경기 가지 않는 경기 가는 보는 그들은 이 사람들은 사람들이 되었다면 하는 것이 되었다면 하는데 하는데 하는데 되었다면 하는데	y law, decree, ordinance or regulation	☐ YES	✓ NO			
	by any court or tribunal?		If YES, give details:				
37.	Have you ever been separated from the service in any of the	following modes: resignation.	☐ YES	✓ NO			
	retirement, dropped from the rolls, dismissal, termination, en		If YES, give details:	Ŭ NO			
	out (abolition) in the public or private sector?						
38.	a. Have you ever been a candidate in a national or local elec-	tion held within the last year (except	☐ YES ☑ NO				
	Barangay election)?		If YES, give details:				
	b. Have you resigned from the government service during the	three (3)-month period before the last	☐ YES ☑ NO				
	election to promote/actively campaign for a national or local of		☐ YES ☑ NO If YES, give details:				
20	Have you acquired the status of an immigrant or permanent	recident of another country?					
39.	There you adjusted the status of an inningrant or permanent	esident of another country?	YES	☑ NO			
			If YES, give details	(country):			
40	5 / / / / / S 5 / S S S S S S S S S						
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972),						
9		please answer the following items.	42-02				
a.	Are you a member of any indigenous group?		YES If YES, please specify:	☑ NO			
b.	Are you a person with disability?		YES V NO				
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		If YES, please specify				
c.	Are you a solo parent?		✓ YES	□ NO			
			If YES, please specify I				
41.	REFERENCES (Person not related by consanguinity or affinity to applicant /s	annointee)					
9	NAME						
		ADDRESS	TEL. NO.				
	RAYMUND M. IGCASAMA	Visayas State University	0932-773-3751				
	MIRIAM M. DE LA TORRE	Visayas State University	0998-566-3919				
Т							
40							
42.	I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertiner	this Personal Data Sheet which is a tr	ue, correct and				
	Philippines. I authorize the agency head/authorized represent	tative to verify/validate the contents state	d berein				
	agree that any misrepresentation made in this docum	ent and its attachments shall cause	e the filing of	PHOTO			
	administrative/criminal case/s against me.		9				
_							
G	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)						
	LEASE INDICATE ID Number and Date of Issuance	26 1					
G	overnment Issued ID: UMID .						
ID	/License/Passport No.: 0113-0410531-2	ox)					
Da	ate/Place of Issuance: Ormoc City, Leyte						
_		Date Accomplished		Right Thumbmark			
	SUBSCRIBED AND SWORN to before me this	, affiant exhibiti	ng his/her validly issued or	overnment ID as indicated above.			
				THE PARTY OF THE P			
		Person Administering Oatl					