CS Form No. 212 Revised 2017	PERSO	NAL DAT	Δ SI	(EF				
concerned.	tion made in the Personal Data Sheet and th	e Work Experience Sheet s	shall cause the	filing of ac	lministrativ	e/criminal case/s	against the p	erson
Print legibly. Tick appropriate boxes	and use separate sheet if necessary. Indicate	N/A if not applicable. DO NO	T ABBREVIATE		1. CS ID No.		(Do not fill up. I	For CSC use only
F PERSONAL INFORMATIO	N .							
2. SURNAME	CAJEDA	The state of the state of				NAME EXTENSION (JF	R, SR)	
FIRST NAME	CRESILDA MAE					N/A		
MIDDLE NAME	ARIZALA							
DATE OF BIRTH (mm/dd/yyyy)	DECEMBER 7,2002	16, CITIZENSHIP If holder of dual citizenship, please indicate the details.		▼ Filipino □ Dual Citizenship □ by birth □ by naturali: Pls. indicate country:			lization	
4. PLACE OF BIRTH	STA. RITA, SAMAR							
5. SEX	Male X Female							-
6 CML STATUS	X Single Married	17. RESIDENTIAL ADDRESS	-				Street	
	☐ Widowed ☐ Separated			ise/Block/Lot N	The state of the s	В	OUGAINVILL	
	Other/s:			bdivision/Villag			Barangay SAMAR	
7. HEIGHT (m)	1.57 meters			ity/Municipality		100000000000000000000000000000000000000	Province	
8. WEIGHT (kg)	52 kilograms	ZIP CODE				-		
9. BLOOD TYPE	N/A	18. PERMANENT ADDRESS	House/Block		lo.		Street	
10. GSIS ID NO.	N/A		Su	bdivision/Villag	0	- 1	BOUGAINVIL Barangay	LA .
11. PAG-IBIG ID NO.	N/A	ha		SANTA RITA	1		SAMAR Province	
12. PHILHEALTH NO.	N/A	ZIP CODE	6718	ity/Municipality			Tiorno	
13. SSS NO.	N/A	19. TELEPHONE NO.	N/A	N/A				
14. TIN NO.	2000							
	N/A	21. E-MAIL ADDRESS (if any)		09978844898 cresildamaecajeda@gmail.com				
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (II arry)	cresilo	amaeca	ajeda@g	maii.com		
22. SPOUSE'S SURNAME		The state of the s	23. NAME of CH	II DREN (Write	e full name and	list all)	DATE OF BIR	TH (mm/dd/yyyy)
FIRST NAME	N/A	NAME EXTENSION (JR., SR)	N/A	EDITED (IIII)				
MIDDLE NAME			11//	-				
OCCUPATION								
EMPLOYER/BUSINESS NAME								
BUSINESS ADDRESS								
TELEPHONE NO.								
24. FATHER'S SURNAME								
FIRST NAME	CAJEDA	NAME EXTENSION (JR., SR)						
MIDDLE NAME	JERRY OROSA	N/A	-					
25. MOTHER'S MAIDEN NAME	OROSA							
SURNAME	ADIZALA	And the second section of the second						
FIRST NAME	ARIZALA							-1-
MIDDLE NAME	IMELDA LIQUIN			(Continue on separate sheet if necessa			sary)	
III. EDUÇATIONAL BACKG	GROUND					ter or interest		a market state land
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGR (Write in full)	EE/COURSE		ATTENDANCE	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
EL EMENTADY				From	To 2014	N//4	2014	
ELEMENTARY SECONDARY	STA. RITA I CENTRAL SCHOOL	ELEMENTARY EDUCATION HIGH SCHOOL		2007	2014	N/A N/A	2014	WTH
VOCATIONAL /	STA. RITA NATIONAL HIGH SCHOOL							HONORS
TRADE COURSE	N/A	N/A BACHELOR OF SECOND	ARY			N/A		CUM
COLLEGE	EASTERN VISAYAS STATE UNIVERSITY	EDUCATION MAJOR IN S		2021	2025	N/A	2025	LAUDE
GRADUATE STUDIES	N/A	N/A		N/A	N/A	N/A		

(Continue on separate sheet if necessary)

SIGNATURE

August 1,2025

CS FORM 212 (Revised 2017), Page 1 of 4

DATE

ONL SERVICE ELIGIE			48				New Petites I	A DE LOS
CAREER SERVICE/ RA 108 SPECIAL LAWS BARANGAY ELIGIBILITY	S/ CES/ CSEE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMIN	ATION / CONFE	RMENT	LICENSE (if ap	Date of Validity
HONOR GRADUATE (PD 907)	ELIGIBILITY							
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MODE CAREDIENCE		(Co	ntinue on separate sheet if	necessary)				
WORK EXPERIENCE relude private employment	Start from your recen	t work) Description	on of duties should be	Indicated in the attac	hed Work E	perience she	1	
INCLUSIVE DATES (mm/dd/yyyy) POSITION TI (Write in full/Do not		TLE			MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (II applicable) & STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOVT SERVICE (Y/N)
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SIGNATURE	C			DATE	M	U	1 2025 ORM 212 (Revised 20)	

	OR INVOLVEMENT IN CIVIC NON GOVERNMENT NAME & ADDRESS OF ORGANIZATION					
(Write in	full)	(mm/dd/yyyy) From To	NUMBER OF HOURS		POSITION / NATURE OF WORK	
ATTACA CTO		From	-			
N/A						
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				A COMMON TOWNS		
20 Control Warner to the part of an internal part of the control o	Common Auto-Complete State Control Company					
			and the second s			
	(Con	tinue on separate sheet if nece	ssary)			
LEARNING AND DEVELOPMENT (LA	D) INTERVENTIONS TRAINING P	POGRAMS ATTENDED				
). TITLE OF LEARNING AND DEVELOPMENT I	NEED CATALOG TO A WAY OF THE PARTY OF	INCLUSIVE DATES OF ATTENDANCE		Type of LD (Managerial/	CONDUCTED/ SPONSORED BY	
D. TITLE OF LEARNING AND DEVELOPMENT I (Write in	full)	(mm/dd/yyyy)	NUMBER OF HOURS	Supervisory/ Technical/etc)	(Write in full)	
		From To	NOTE THE PERSON NAMED IN COLUMN			
N/A		Vanageria and a second				
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OTHER INFORMATION	(Con	inue on separate sheet if nece	ssary)			
the state of the s	T was	ACADEMIC DISTINATIONS (S	COGNITION		MEMOEDONIO IN ACCOUNT ON ACCOUNT	
11. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)				33. MEMBERSHIP IN ASSOCIATION/ORGANIZATI (Write in full)	
Proficient in Microsoft office (Word ,Excel, PowerPoint)	N/A				N/A	
Good communication skills		-				
Basic knowledge in data						
encoding and documentation Fast learner and						
adaptable to new tasks				and the second second		
					and the second s	
	(Cont	inue on separate sheet if nace	ssary)			
	4.					

_			The second of the second of the	the second control of the second seco				
	Are you related by consanguinity or affinity to the appointin			The second secon				
	chief of bureau or office or to the person who has immedia Bureau or Department where you will be apppointed,	te supervision over you in the Office,						
	a. within the third degree?		YES	[X] NO				
	b. within the fourth degree (for Local Government Unit - Ca	areer Employees\?	YES	X NO				
	b. Willim the load in degree (for 200a) Covernment on it.	area Employees/1	If YES, give deta					
			N/A					
35.	a. Have you ever been found guilty of any administrative o	ffense?	☐ YES	X NO				
			If YES, give details:					
		N/A						
	h Have you been criminally charmed before any court?		YES	™ NO				
	b. Have you been criminally charged before any court?		If YES, give details:					
			Date Filed: N/A					
			Status of Case/s:					
36.	Have you ever been convicted of any crime or violation of	any law, decree, ordinance or regulation	☐ YES	⊠ NO				
	by any court or tribunal?		If YES, give details:					
			N/A					
37.	Have you ever been separated from the service in any of		☐ YES 🕱 NO					
	retirement, dropped from the rolls, dismissal, termination, out (abolition) in the public or private sector?	end of term, finished contract or phased	If YES, give details: N/A					
38	A. Have you ever been a candidate in a national or local elements.	lection held within the last year (except	C] vec	ujh.				
50 .	Barangay election)?	to the first than the fact year (except	☐ YES ※ NO If YES, give details: N/A					
	b. Have you resigned from the government service during	the three (3)-month period before the last						
	 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? 			If YES, give details: N/A				
39.	Have you acquired the status of an immigrant or permaner	nt resident of another country?	YES X NO					
			If YES, give details (country):					
				N/A				
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma	agna Carta for Disabled Persons (RA						
a.	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?			X NO				
7	Ale you a member of any margement group.		If YES, please specify: NO N/A					
b.	Are you a person with disability?	8	☐ YES ☒ NO If YES, please specify ID No: N/A					
C.	Are you a solo parent?		If YES, please specify ID No: N/A NO					
Ü.	Are you a solo parent:	,	If YES, please specif					
41.	REFERENCES (Person not related by consanguinity or affinity to applica	nt /appointee)						
3.0	NAME	ADDRESS	TEL. NO.					
-		ADDIESO						
	MARICHU NICE C. CAÑETE	SANTA RITA ,SAMAR	09606614614	35				
	LENNY A. SALDIVIA	SANTA RITA , SAMAR	09553753503					
	MARY GRACE L CABIAS	SANTA RITA ,SAMAR	09392429795					
42.	MARY GRACE L. CABIAS SANTA RITA ,SAMAR 09392429795 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 pertin		SOURCE PRODUCES SOURCE STATES STATES	9				
	Philippines. I authorize the agency head/authorized repr I agree that any misrepresentation made in this doc			CRESILDA MAE A CAJEDA				
	administrative/criminal case/s against me.	different and its attachments shall caus	e the filling of					
200				Allisto.				
	overnment Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)							
Н	PLEASE INDICATE ID Number and Date of Issuance							
_	overnment Issued ID: NATIONAL LD.	7						
IC	Onlicense/Passport No.: 5743 -5492 - 6825 - 0873	Signature (Sign inside the b	ox)					
D	Date/Place of Issuance: SANTA RITA , SANIAR AUGUST 1, 2015 Date Accomplished			Right Thumbmark				
-								
	SUBSCRIBED AND SWORN to before me this	, affiant exhibit	ing his/her validly issue	ed government ID as indicated above.				
	Г							
Person Administering Oath			h					