CS 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. CSID No. (Donot fill up. For CSC use only)									
I. PERSONAL INFORMATION									
2. SURNAME	BITANTES								
FIRST NAME	JOHN JAMES NAME EXTENSION (JR, SR)								
MIDDLENAME	CA-AYA				-				
3. DATEOFBIRTH (mm/dd/yyyy)	9/20/1997	16. CITIZENSHIP							
4. PLACEOFBIRTH	BURAUEN, LEYTE	If holder of dual citizenship please indicate the details.			Pls. indicate country:				
5. SEX		piease il luicate trie details.							
6 CIVILSTATUS		17. RESIDENTIAL ADDRESS	Но	LA PAZ st, use/Block/Lot No. Street					
7. HEIGHT (m)	5'8		S	Subdivision/Village BURAUEN			Barangay LEYTE		
		710,0005		City/Municipality Province					
8. WEIGHT (kg)	60kgs	ZIP CODE 18. PERMANENT ADDRESS		-	-	0010	6516 LA PAZ st.		
9. BLOOD TYPE	N/A	id. F E un u E u 7 E E u	Но	ouse/Block/Lot N	o.	•	Street		
10. GSIS ID NO.	N/A		S		bdivision/Village Barangay				
11. PAG-IBIGIDNO.	121215445053			BURAUEN City/Municipality			LEYTE Province		
12. PHILHEALTHNO.	0325-1310-5486	ZIP CODE				6516			
13. SSS NO.	06-4061249-2	19. TELEPHONENO.				N/A			
14. TINNO.	733-518-702	518-702 20. MOBILENO. 09394112Z77/09668337612			394112277/09668337612	2			
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)			johnjame	esbitantes@gma	ail.com		
II. FAMILY BACKGROUND									
22. SPOUSES SURNAME	N/A		23. NAME of CHIL	DREN (Write full na	ame and list all)		DATEOFBIR	TH(mm/dd/yyyy)	
FIRST NAME	N/A	N/A NAME EXTENSION (JR, SR)		N/A			N/A		
MIDDLENAME	N/A	N/A							
OCCUPATION	N/A								
EMPLOYER/BUSINESS NAME	N/A								
BUSINESS ADDRESS	N/A								
TELEPHONENO.	N/A								
24. FATHER'S SURNAME	BITANTES VICENTE								
FIRST NAME									
MIDDLETANIE	BILOLO			-	-	-		-	
25. MOTHER'S MAIDEN NAME		-			-				
	BITANTES								
FIRST NAME	HELEN				(0				
MIDDLENAME III. EDUCATIONAL BACKGROUP	CA-AYA (Continue on separate sheet if necessary)								
					TTENDANCE	HIGHEST LEVEL/			
26. LEVEL	NAMEOFSCHOOL (Write in full)	BASIC EDUCATION/DEGREE/C (Write in full)	OURSE	From	To	UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED	
ELEMENTARY	BURABOD ELEMENTARY SCHOOL	ELEMENTARY		2005	2010		2010	N/A	
SECONDARY	BURAUENNATIONALHIGHSCHOOL	нанзаноа.		2010	2014		2014	N/A	
VOCATIONAL/ TRADECOURSE	N/A	N/A		N/A	N/A		N/A	N/A	
COLLEGE	EASTERNVISAYAS STATEUNIVERSITY-BURAUEN, CAMPUS	BACHELOR OF SCIENCE IN ENTREPE	RENEURSHIP	2014	2018		2018	N/A	
GRADUATESTUDIES	N/A	N/A		N/A	N/A		N/A	N/A	
SIGNATURE		(Continue on separate sheet if n	ecessary)	DA	ATE				

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IV. CIVIL S	JERVIOL EL	JOIDIETT						LICENSE (if a	applicable)
27. CAREER SERMCE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE (If Applicable)			DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT			NUMBER	Date of Validity	
NA NA			NA		NA		NA	NA	
V WORK	EVECUEN	25		(Continue on sepa	nrate sheet if necessary)				
	EXPERIEN(ivate employ	CE vment. Start from your	recent work) De	escription of dutie	s should be indicate	ed in the attac	hed Work Experience	e sheet.	
C	/E DATES (mm/ ld/yyyy)	POSITION T (Write in full/Do not		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	GOV'T SERVICE (Y/N)
From 8/6/2018	To 8/9/2019	ADMINISTRATIV	/F STAFF	Eastern Visayas St	ate University Burauen		301.95		
3/1/2020	present	AUDIT STAFF	201741	KND Resource Mana	mpus	6,000.00 12,000	405	auditing	
0, 1, 2020	present				3	. 2,000		udditing	
				(Continue on sepa	nrate sheet if necessary)				
SIGN	ATURE				DATE				
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VI. VOLUNTARY WORK OR INVOLVEMENT I	N CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY OR	GANIZATION/S					
29. NAME & ADDRESS OF ORGANIZAT	TON (Write in full)	INCLL (mm	JSIVE DATES n/dd/yyyy) To	NUMBER OF HOURS	POSITION / NATURE OF WORK		
,		Fidili	10				
	N/A						
,							
	(Cor INTERVENTIONS/TRAINING PROGRAMS ATTENDED to only the relevant LSD/training taken for the last five (3) years for Division Chief/E	ntinue on separate she ixecutive/Managerial j	eet if necessary) positions)				
30. TITLE OF LEARNING AND DEVELOPMENT	T INTERVENTIONS/TRAININGPROGRAMS (Write in full)	INCLUSIVE DAT (mm	ES OF ATTENDANCE n/dd/yyyy) To	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY	(Write in full)
Innovation Attaining Global Competitivene	ess" (EVSU-BC, March 2015)	8:00	5:00	8hrs			
"Strengthening Industry-Academe Partners October 2015)	hip Towards SME Competitiveness" (RTRMF Compound	8:00	5:00	8hrs			
Entrepreneurship: A Path to Sustainable, G March 2016)	Growing and Developing Micro Business' (EVSU-BC,	8:00	5:00	8hrs			
"Youth Empowerment and Leadership throu (EVSU-BC, March 2017)		8:00	5:00	8hrs			
"Preparing Entrepreneurs for Business Success" (EVSU-BC, March 2018)			5:00	8hrs			
"Enhancing the Performance of the Agribus		8:00	5:00	8hrs			
"Re-Orientation Seminar for Teaching and N 2019)	Non-Teaching Personnel of EVSU-BC" (EVSU-BC, April	8:00	5:00	8hrs			
		1					
							-
VIII. OTHER INFORMATION	(Cor	tinue on separate sh	eet if necessary)				
31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in f				ite in full)	33. MEMBERSHIP IN ASS (Wri	SOCIATION/ORGANIZATION ite in full)
COMPUTER (WORD & EXCEL)	N/A					N/A	
,	,			_			
		-					
SIGNATURE	(Cor	ntinue on separate sh	eet if necessary)		DATE	I	
SIGNATURE	,				UNIL	L	CSEORM212/Revised 2017) Page 3 of A

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		Person Administering	ı Oath				
BSCI	RIBED AND SWORN to before me this	, affiant exh	ibiting his/her validly is	sued government ID as indicated abo			
L	ate/Place of Issuanc	ed	Right Thumbmark				
ID/License/Passport \ Signature (Sign inside			the box)				
G	overnment Issued ID:						
Lic	overnment Issued ID (i.e.Passport,GSIS,SSS,PRC,Driver's ense,etc.) PLEASE INDICATE ID Number and ate of Issuance						
	misrepresentation made in this document and its administrative/criminal case/s against me.	s attachments shall cause the	filing of				
	true, correct and complete statement pursuant to regulations of the Republic of the Philippines. I au representative to verify/validate the contents sta	ws, rules and orized y	PHOTO				
	A C. AMANTE I declare under oath that I have personally accom	DISTRICT 7 SAN JUAN ST BURAUEN, LEYTE Iplished this Personal Data She	9352201802 eet which is a	or photocopied picture is not acceptable			
ANI	DREW MARK NIEMES	BRY. 71, NAGA-NAGA TACLOBAN CITY, LEYTE	9062400446	name tag and signature over printed name Computer generated			
REN	NATO NAMIA JR.	BRGY. ARADO BURAUEN, LEYTE	9563023731	3.5 cm. X 4.5 cm (passport size) With full and handwritten			
	NAME	ADDRESS	TEL. NO.	ID picture taken within the last 6 months			
41.	REFERENCES (Person not related by consanguinity or affinity to	to applicant /appointee)					
C.	Are you a solo parent?		If YES, please specif	fy ID No:			
D.	Are you a person with disability?	If YES, please specif	fy ID No:				
а.	8972). please answer the following items: Are you a member of any indigenous group?	If YES, please specit	fy:				
40.	Pursuant to: (a) Indigenous People's Act (RA 837 Disabled Persons (RA 7277); and (c) Solo Parents						
	country?	If YES, give details (country):					
39.	period before the last election to promote/activel local candidate? Have you acquired the status of an immigrant or		If YES, give details:				
	last year (except Barangay election)? b. Have you resigned from the government servic		If YES, give details:				
38.	term, finished contract or phased out (abolition) i a. Have you ever been a candidate in a national or						
37.	Have you ever been separated from the service ir resignation, retirement, dropped from the rolls, di	smissal, termination, end of	If YES, give details:				
36.	Have you ever been convicted of any crime or viol ordinance or regulation by any court or tribunal?	ation of any law, decree,	If YES, give details:				
			Status of Case/s:				
	b. Have you been criminally charged before any co	If YES, give details	3:				
33.		If YES, give details:					
35	a. Have you ever been found guilty of any adminis						
	b. within the fourth degree (for Local Government	If YES, give details:					
	chief of bureau or office or to the person who has Bureau or Department where you will be apppoint a. within the third degree?						

Yes/No Cstat Gender
Yes Single Male
No Married Female
Separated

Separated Widowed