CS Form No. 212									
Revised 2017:	PERSON	IAL DAT	A SHI						
	ion made in the Personal Data Sheet and the V	Work Experience Sheet sha	II cause the filin	ng of adminis	strative/crin	ninal case/s agai	nst the perso	n	
	O FILLING OUT THE PERSONAL DATA SHEET								
READ THE ATTACHED GUIDE T rint legibly. Tick appropriate boxes (and use separate sheet if necessary. Indicate N/A	if not applicable. DO NOT AB	BREVIATE.	1.0	CS ID No	([Do not fill up. For	CSC use only)	
PERSONAL INFORMATION									
2. SURNAME	IGOT				l NA	ME EXTENSION (JR., SI	R)		
FIRST NAME	LEODEL								
MIDDLE NAME	SORIA		-						
DATE OF BIRTH (mm/dd/yyyy)	8/15/1981		✓ Filipino ☐ Dual Citizenship ☐ by birth ☐ by naturalizati						
4. PLACE OF BIRTH	Baybay, Leyte	If holder of dual citize	nship,				Pls. indicate country:		
5. SEX	✓ Male ☐ Female	please indicate the d	etails.						
6 CIVIL STATUS	Single Married	17 RESIDENTIAL ADDRESS		Miack/Lot No.			Street		
O CIVIL STATOS	☐ Widowed ☐ Separated						rgy Marcos		
	Other/s:		Subo	livision/Village Baybay			Barangay Leyte		
7. HEIGHT (m)	1.524 m			Municipality			Province		
8. WEIGHT (kg)	60 kg	ZIP CODE	6521						
9. BLOOD TYPE	0	18. PERMANENT ADDRESS	Hous	a/Block/Lat No.			Street		
10. GSIS ID NO			Subs	division/Village			rgy Marcos Barangay		
11 PAG-IBIG ID NO.				Baybay y/Municipality			Leyte Province		
12. PHILHEALTH NO.	13-000103267-5	ZIP CODE	6521						
13. SSS NO.	NA	19. TELEPHONE NO.							
14. TIN NO.	933-242-063	20, MOBILE NO	09350614852						
15. AGENCY EMPLOYEE NO	V0151	21 E-MAIL ADDRESS (if any)	leodeligot4	76@gma	il.com				
II. FAMILY BACKGROUND	CONTRACTOR OF THE PARTY OF THE			DOEN AND A		et alla	DATE OF BIRTH	-i (mmlddlywy	
22. SPOUSE'S SURNAME	IGOT	NAME EXTENSION (JR., SR)	23. NAME OF CHI	23. NAME of CHILDREN (Write full name and list all) RON JAMES B. IGOT			6/18/		
FIRST NAME	MARIA CHRISTY	To and a second	KEVIN JOSH B. IGOT			2/3/2	CARDON INC.		
MIDDLE NAME	BAGARINAO		1				2012		
OCCUPATION	OFW		4						
EMPLOYER/BUSINESS NAME	NA			ALVANOR TO THE					
BUSINESS ADDRESS	HONGKONG								
TELEPHONE NO	NA								
24 FATHER'S SURNAME	IGOT	Lin							
FIRST NAME	LEOPOLDO	JR							
MIDDLE NAME	POSAS								
25. MOTHER'S MAIDEN NAME	BORELA								
SURNAME	IGOT								
FIRST NAME	DELIA								
MIDDLE NAME	BORELA		(Continue on separate sheet if necessary)						
III. EDUCATIONAL BACK	GROUND	T		T				SCHOLARSH	
26 LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEC (Write in fu	SEENOUNGE		ATTENDANCE To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	ACADEMIC HONORS RECEIVED	
ELEMENTARY	SAN AGUSTIN ELEMENTARY SCHOOL, BAYBAY CITY	NA NA		6/1/1988	3/1/1994	NA	1994	NA	
SECONDARY	BAYBAY NATIONAL HIGH SCHOOL, BAYBAY CITY	y NA		6/1/1994	3/1/1998	NA	1998	NA	

1.	SPECIAL L	A 1080 (BOARD/BAR) UNDER .AWS/CES/CSEE	RATING	DATE OF	A RAIN SE			LICENSE (if applicable)		
BARANGAY ELIGIBILITY / DRIVER'S LICENSE (If Applic			(If Applicable)	EXAMINATION / PLACE OF EXAMINATION / CONFERMENT				NUMBER	Date o	
	1	IA							Validi	
									1	
									-	
. WORK E	XPERIENCE		(Co	entimie on separate sheet i	f necessary)					
nclude priv	ate employme	nt. Start from your recent (vork) Description	of duties should be	indicated in the attaches	100				
 HWJLL 	JSIVE DATES	POSITION TIT					SALARY/ JOB/ PAY	1		
From	То	(Write in full/Do not al	LE obreviale)	DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)		MONTHLY SALARY	OFUCE (If applicable) 6 STEP (Format *00-0") INCREMENT	STATUS OF AFPOINTMENT	GOVT SERVICE (Y/N)	
3/15/2003	8/15/2013	CARPENTE		GENERAL SE	EVICES DIVISION	4400.00	NA	JOB ORDER	YES	
9/1/2013	PRESENT	UTILITY; MESSENGER; CARPENTER; ETCS		VISAYAS STATE U	NIVERSITY HOSPITAL	12,174.80		JOB ORDER	YES	
			· · · · · · · · · · · · · · · · · · ·					ONDER	120	
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		TO THE RESIDENCE OF THE PARTY O								
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SIGNATU	JRE	Z. y	(Contin	ue on saparate sheet if ne	cessary)	7 3	35 125 pt			
Service Salvar Ballin		~ 7	V	1	DATE	(95)	-16	- () -)	-	

W. VO	LUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMEN	T/PEOPLE/\	VOLUNTARY	ORGANIZATIO	on/s		
29	NAME & ADDRESS OF ORGANIZATION (Write in full)	(non/dd/yyyy) From To		MARKER OF HOURS	POSITION / NATURE OF WORK		
	NA	NA	NA	NA		NA	
I	Annual Debut and the state of t					** - ** ** ** ** ** ** ** ** ** ** ** **	
					- 		
					*		
Real Property lies	ARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING F		TTENDED				
	m the most recent L&D training program and include only the relevant L&D training taken fo	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/ Technic alfelo)	CONDUCTED/ SPONSORED BY (Write in full)	
	Fire and Earthquake Drill Via Google Meet (Online)	Oct. 22, 2021	Oct. 22, 2021	8.0	Technical	Bureau of Fire Protection c/o FERNANDO A. MANDIA S/INSP BFP Acting City Fire Marshal	
	Basic Life Support	9/4/2019	9/5/2019	16.0	Technical	DOH Trainors for BLS C/O Dr. July Duarte, et.al.	
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VIII. O	THER INFORMATION	ntinue on separate	sheat if necessary				
31.		LACADEMIC DISTIN	OCTIONS / RECOG	NITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
	Carpentry		AND INC. TO THE OWNER.				
				•			
	SIGNATURE SIGNATURE	dinue en separate :	sheet if necessary	DA	TE	02-16-22	
						CS FORM 212 (Revised 2017), Page 3 of 4	

	a. within the third degree?					
	b. within the fourth degree (for Local Government Unit - Can	☐ YES ☑ NO ☐ YES ☑ NO If YES, give details:				
35.	a. Have you ever been found guilty of any administrative offe	☐ 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 an any court or tribunal?	☐ YES ☑ NO If YES, give details:				
37.	Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, en (abolition) in the public or private sector?	YES V NO If YES, give details:				
	a. Have you ever been a candidate in a national or local elementary election)? b. Have you resigned from the government service during the service during th	☐ YES ☑ NO If YES, give details: ☐ YES ☑ NO				
	election to promote/actively campaign for a national or local Have you acquired the status of an immigrant or permanent	If YES, give details: YES NO If YES, give details (country):				
a. b.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), Are you a member of any indigenous group? Are you a person with disability? 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 consunguinity or affinity to applicant /	appointee)	White the state of			
	NAME	ADDRESS	TEL. NO.			
	JAN ANA B. MASENDO	GUADALUPE, BAYBAY	9171080150			
	MERRY CHRIST'L S. GUINOCOR	VSU, VISCA, BAYBAY	9566530545			
	DR. ELWIN JAY V. YU	VSU, VISCA, BAYBAY	9357882192			
	I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertine Philippines. I authorize the agency head/authorized represe agree that any misrepresentation made in this docu administrative/oriminal case/s against me.	ent laws, rules and regulations of the ntative to verify/validate the contents state	Republic of the ad herein.			
PL Go	EASE INDICATE ID Number and Date of Issuance vernment Issued ID: H03-07002376 License/Passport No.: Drivers License	Signature (Sign in tiple the bu	w)			
Dat	te/Place of Issuance: Baybay City	Right Thumbmark				
	SUBSCRIBED AND SWORN to before me this	, affiant exhibitir	ng his/her validly issued government ID as indicated above.			
		Person Administering Oat	h			