CS Form No. 212 Revised 2017 PERSONAL DATA SHEET									
	PERJUI	NAL DAI	А Эп						
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.									
	TO FILLING OUT THE PERSONAL DATA SHEET () and use separate sheet if necessary. Indicate No.			PDS FORM.	1. CS ID No.		(Do not fill up.	For CSC use only)	
I. PERSONAL INFORMATION		In II Not applicable.	DBILL FL Z.				(50 1101 1111 1111	101 000 222 2 ,,	
2. SURNAME	CUSTODIO								
FIRST NAME	ALBERTO					JR.			
MIDDLE NAME	DOHILING								
3. DATE OF BIRTH (mm/dd/yyyy)	12/02/1999	16. CITIZENSHIP		☑ Filipino ☐ Dual Citizenship					
4. PLACE OF BIRTH	MAYORGA, LEYTE		If holder of dual citizenship,		□by birth □by naturalization Pls. indicate country:			ation	
5. SEX	☑ Male ☐ Female	please indicate the de	tails.	Philippines				•	
6 CIVIL STATUS	☑ Single ☐ Married	17. RESIDENTIAL ADDRESS		N/A		N/A Street			
	☐ Widowed ☐ Separated ☐ Other/s:			House/Block/Lot No. N/A		N/A			
7. HEIGHT (m)	1.72		Sui	bdivision/Village N/A		Barangay N/A			
		710 0005	С	ity/Municipality		N/A	Province		
	63	ZIP CODE 18. PERMANENT ADDRESS		N/A	N/A		PUROK 2		
9. BLOOD TYPE	B+	10. TERMINATION TO BELLEGO	House/Block/Lot No.			Street			
10. GSIS ID NO.	N/A		Sui	N/A bdivision/Village	9	SAN ISIDRO Barangay			
11. PAG-IBIG ID NO.	N/A		C	MAHAPLAG ity/Municipality		LEYTE Province			
12. PHILHEALTH NO.	132506924972	ZIP CODE	6512	.,			, , , , , , , , , , , , , , , , , , , ,		
13. SSS NO.	06-4921563-8	19. TELEPHONE NO.	N/A						
4. TIN NO. 655852530		20. MOBILE NO.	0998350661	6613 / 09465270096					
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	aljuncustodi	o5a@gmail.com					
II. FAMILY BACKGROUND			ı						
22. SPOUSE'S SURNAME	N/A		23. NAME of CHI			ist all)	DATE OF BIRTH (mm/dd/yyyy)		
FIRST NAME	N/A	NAME EXTENSION (JR., SR)			N/A		N/A		
MIDDLE NAME	N/A								
OCCUPATION	N/A								
EMPLOYER/BUSINESS NAME	N/A								
BUSINESS ADDRESS	N/A								
TELEPHONE NO.	N/A								
24. FATHER'S SURNAME	CUSTODIO								
FIRST NAME	ALBERTO	SR.							
MIDDLE NAME	CABANTAC								
25. MOTHER'S MAIDEN NAME	DONAYRE								
SURNAME	CUSTODIO								
FIRST NAME	EDNA						<u> </u>		
MIDDLE NAME	DOHILING			(Continue on separate sheet if necessary)					
III. EDUCATIONAL BACKG	ROUND							SCHOLARSHIP/	
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)		PERIOD OF A	To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	ACADEMIC HONORS RECEIVED	
ELEMENTARY	SAN ISIDRO ELEMENTARY SCHOOL	PRIMARY		06/01/2006	04/01/2012	GRADUATE	2012	SALUTATO RIAN	
SECONDARY	MAHAPLAG NATIONAL HIGH SCHOOL	SECONDARY		06/01/2012	05/01/2018	GRADUATE	2018	WITH HIGH HONORS	
VOCATIONAL / TRADE COURSE	N/A	N/A		N/A	N/A	N/A	N/A	N/A	
COLLEGE	VISAYAS STATE UNIVERSITY - BAYBAY CAMPUS	BACHELOR OF SCIENCE IN STATISTICS		08/01/2018	08/07/2024	GRADUATE	2024	N/A	
GRADUATE STUDIES	N/A	N/A		N/A	N/A	N/A	N/A	N/A	
SIGNATURE	Jet Co	Continue on separate sheet if nece	ssary)	DA	TE		01/09/2025		

	ERVICE ELIG	IBILITY							
	SPECIAL LA	1080 (BOARD/ BAR) UNDER WS/ CES/ CSEE	RATING (If Applicable)	DATE OF EXAMINATION /	PLACE OF EXAMINA	TION / CONFER	RMENT	LICENSE (if ap	oplicable) Date of
		ITY / DRIVER'S LICENSE ITY - PROFESSIONAL		CONFERMENT	П			Validity	
	LEVI		90.20	08/11/2024	TACLOBAN	TACLOBAN CITY, LEYTE		N/A	N/A
	DRIVER'S	LICENSE	N/A	02/20/2023	BAYBAY (BAYBAY CITY, LEYTE		H12-23-000671	02/12/202
			(Co	ntinue on separate sheet	if necessary)				
	EXPERIENCE	nt. Start from your recent	work) Description	of duties should be	indicated in the attached	Work Expor	ionco shoot		
. INCLU	JSIVE DATES						SALARY/ JOB/ PAY GRADE (if		GOV'T
From	m/dd/yyyy) To	POSITION T (Write in full/Do not			ENCY / OFFICE / COMPANY I/Do not abbreviate)	MONTHLY SALARY	applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	SERVICE (Y/N)
2/18/2023	PRESENT	FREELANCE STA	ATISTICIAN	SFI F-	-EMPLOYED	COMMISSIO	COMMISSION	INDEPENDENT	N
0/21/2024	12/31/2024	ADMINISTRATI		PHILIPPINE STA	TISTICS AUTHORITY -	N-BASED SG 1	-BASED SG 1	CONTRACTOR	Y
9/09/2024	09/23/2024	STATISTICAL RES		PHILIPPINE STA	SOUTHERN LEYTE PROVINCIAL OFFICE PHILIPPINE STATISTICS AUTHORITY -		731.00	CONTRACTUAL	Y
7/03/2023	08/04/2023	STUDENT IN		LEYTE PROVINCIAL OFFICE PHILIPPINE STATISTICS AUTHORITY -		BASED N/A	N/A	TEMPORARY	Y
				LEYTE PRO	OVINCIAL OFFICE			EMPLOYEE	
	ATURE	As	(Co	ntinue on separate sheet	if necessary) DATE		04/0	9/2025	

VI. VOLUNTARY WORK OR INVOLVEMENT	IN CIVIC / NON-GOVERNMENT	/ PEOPLE / V	OLUNTARY (DRGANIZATIO	DN/S	
29. NAME & ADDRESS OF OF (Write in full)		INCLUSIVE DATES (mm/dd/yyyy) From To		NUMBER OF HOURS		POSITION / NATURE OF WORK
VISAYAS STATE UNIVERSITY STATISTICAL SOCIETY, VISCA, BAYBAY CITY, LEYTE			2024		TAI	BULATOR / TABULATION SERVICES
VII. I FARNING AND DEVELORMENT // 8 DV		tinue on separate				
VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PR 30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS		INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/	CONDUCTED/ SPONSORED BY
(Write in full)		From To			Supervisory/ Technical/etc)	(Write in full)
FUNDAMENTAL OF STATISTICS WITH		08/05/2024	08/05/2024	6.0	TECHNICAL	DATA ANALYTICS PHILIPPINES
DATA ENTRY FUNDAMENTALS AND REPORTING EXCEL AND GOOGLE S	HEETS	08/03/2024	08/04/2024	8.0	TECHNICAL	XCEL HUB TRAINING SERVICES
BASIC PROGRAMMING: MULTIPLE INCOME CREAT COMMUNICATION TECHNOLO		2016	2016	40.0	TECHNICAL	LEOPOLDO DOMINICO "MIC" PETILLA
	(Con	tinue on separate	sheet if necessary,			
VIII. OTHER INFORMATION	NO.	A CAREANO DIOTIN	UCTIONS (DESCO	NUTION.	_	MEMPERSHIP III ACCOUNTION OF ANIZATION
31. SPECIAL SKILLS and HOBBIES	32.		e in full)			33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
PROFICIENT IN MICROSOFT OFFICE APPLICATIONS	2024) 2023)					
PROFICIENCY IN R PROGRAMMING LANGUAGE AND RSTUDIO	1ST PLACER - CHESS (SK FED	SK COUNCILOR - BRGY. SAN ISIDRO, MAHAPLAG, LEYTE (2018 - 2023)				
CALISTHENICS						P.I.O, VSU - UISB (2022 - 2023)
					P.I.O, VSU STATISTICAL SOCIETY (2022 - 2023)	
						P.I.O, KANLAON-MAHOGANY-SAMPAGUITA FACTION (2022 - 2023)
	(Con	tinue on separate :	sheet if necessary			
SIGNATURE	Sept 1	or soparate s		Di	ATE	01/09/2025
	41					CS FORM 212 (Revised 2017), Page 3 of 4

34.	Are you related by consanguinity or affinity to the appoir chief of bureau or office or to the person who has immed Bureau or Department where you will be apppointed, a. within the third degree? b. within the fourth degree (for Local Government Unit-	☐ YES ☑ NO					
	b. within the fourth degree (for Eocal Government Onic-	If YES, give details:					
35.	a. Have you ever been found guilty of any administrative	☐ 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 any court or tribunal?	☐ YES ☑ NO If YES, give details:					
	Have you ever been separated from the service in any of dropped from the rolls, dismissal, termination, end of ter in the public or private sector?	m, finished contract or phased out (abolition)	☐ YES ☑ If YES, give details:	NO			
38.	a. Have you ever been a candidate in a national or local Barangay election)?	If YES, give details:	☑ NO				
	b. Have you resigned from the government service during election to promote/actively campaign for a national or least to promote actively campaign for a national or least to promote actively campaign for a national or le	If YES, give details:	☑ NO				
39.	Have you acquired the status of an immigrant or perman	☐ YES ☑ NO If YES, give details (country):					
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) 7277); and (c) Solo Parents Welfare Act of 2000 (RA 89						
a.	Are you a member of any indigenous group?		☐ YES ☑ NO If YES, please specify:				
b.	Are you a person with disability?	☐ YES ☑ NO 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 applied	cant /appointee)					
	NAME	ADDRESS	TEL. NO.				
	DEXTER E. JABONILLO		09774077932				
	NIÑO G. JAVINES		09518825132				
	JOVELYN P. SARVIDA		09294882626				
42.	I declare under oath that I have personally accomplicomplete statement pursuant to the provisions of permission of permissions. I authorize the agency head/authorized repagree that any misrepresentation made in this cadministrative/criminal case/s against me.	ertinent laws, rules and regulations of the resentative to verify/validate the contents state	Republic of the ed herein.	РНОТО			
	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) LEASE INDICATE ID Number and Date of Issuance	10-					
	overnment Issued ID: PHILIPPINE NATIONAL ID	3/15					
IC	//License/Passport No.: 3418-5307-4913-6258	ox)					
D	ate/Place of Issuance: 07/14/2022		Right Thumbmark				
	SUBSCRIBED AND SWORN to before me this	, affiant exhibiti	ng his/her validly issued gove	ernment ID as indicated above.			
		h					