CS Form No. 212 Revised 2017	DED6/	DNAL DAT	TA GL	IEET				
	PERSU	DNAL DAT	А ЭГ	IEEI				
WARNING: Any misrepresenta	ation made in the Personal Data Sheet and t	the Work Experience Sheet sh	all cause the fili	ing of administrative/cri	minal case/s agai	nst the perso	n concerned	
	TO FILLING OUT THE PERSONAL DATA S	· ·		PDS FORM.  1. CS ID No.		(Do not fill up	For CSC use on	
I. PERSONAL INFORMATI	es D) and use separate sheet if necessary. India  ON	cate N/A II flot applicable. DO NO	I ADDREVIATE.	1. C3 ID No.		(Bo not nii up.	Tor coc use on	
2. SURNAME	MATA							
FIRST NAME	ANALENE				N/A			
MIDDLE NAME	SUPERABLE							
3. DATE OF BIRTH	19/06/2001	16. CITIZENSHIP						
(mm/dd/yyyy)	10/00/2001	IO. OTTIZENOTIII		✓ Filipino □	Dual Citizenship  by birth	☐by naturaliz	zation	
4. PLACE OF BIRTH	TACLOBAN CITY	If holder of dual citi	zenship,		Pls. indicate	_ :		
5. SEX	☐ Male	please indicate the	details.		·		_	
6 CIVIL STATUS	✓ Single Married	17. RESIDENTIAL ADDRESS		N/A		N/A		
6 CIVIL STATUS	☐ Widowed ☐ Separated	1	Но	use/Block/Lot No.		Street MALOBAGO		
	Other/s:		Sı	N/A ubdivision/Village		Barangay		
7. HEIGHT (m)	1.55			JARO City/Municipality		LEYTE Province		
8. WEIGHT (kg)	47	ZIP CODE		on the state of th	6527	77078100		
9. BLOOD TYPE	A+	18. PERMANENT ADDRESS		N/A		N/A		
10. GSIS ID NO.	N/A		Но	use/Block/Lot No. N/A		Street MALOBAGO		
			Sı	ubdivision/Village  JARO		Barangay LEYTE		
11. PAG-IBIG ID NO.	N/A			City/Municipality		Province		
12. PHILHEALTH NO.	N/A	ZIP CODE		6527				
13. SSS NO.	N/A	19. TELEPHONE NO.			N/A			
14. TIN NO.	N/A	20. MOBILE NO.		09306778147/09948598175				
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)		analenemata021@gmail.com		.com		
II. FAMILY BACKGROUNI		,)		<u>anaiomenta</u>	au 2 i O gillian	<u></u>		
22. SPOUSE'S SURNAME	N/A		23. NAME of CH	IILDREN (Write full name and I	ist all)	DATE OF BIR	TH (mm/dd/yyyy	
FIRST NAME	N/A	N/A		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	MATA							
FIRST NAME	AMANCIO	JR						
MIDDLE NAME	EULDAN							
25. MOTHER'S MAIDEN NAME								
SURNAME	SUPERABI	.E						
FIRST NAME MYRNA								
MIDDLE NAME DACUBA (Continue on separa					eparate sheet if neces	sary)		
III. EDUCATIONAL BACK								
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEG (Write in ful		PERIOD OF ATTENDANCE	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED		
				From To			RECEIVED	

ı							•		
III. EDUCATIONAL BACKGROUND									
	26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE  From To		HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED	
	ELEMENTARY	JARO 1 CENTRAL SCHOOL	ELEMENTARY	06/06/2008	03/24/2014	GRADUATED	2014	4TH HONOR	
	SECONDARY	GRANJA KALINAWAN NATIONAL HIGHSCHOOL	SENIOR HIGH SCHOOL	06/14/2014 06/18/2020		GRADUATED	12018	WITH HONORS	
	VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
	COLLEGE	VISAYAS STATE UNIVERSITY  BACHELOR OF SCIENCE IN BIO ZOOLOGY		08/14/2020	07/17/2024	GRADUATED	2024	N/A	
GRADUATE STUDIES		N/A NA		NA	N/A	N/A	N/A	N/A	
I	(Continue on separate sheet if necessary)								
	SIGNATURE				TE				

IV. CIVIL S	SERVICE ELIG	BILITY							
27. CARE	EER SERVICE/ RA	1080 (BOARD/ BAR) UNDER	RATING	DATE OF	DI AOE OE EVAMBIA	TION / CONFE	DMENT	LICENSE (if a	
SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE  (If Applicable)		EXAMINATION / CONFERMENT	ATION / CONFE	KMENI	NUMBER	Date of Validity			
N/A N/A		N/A	N	N/A		N/A	N/A		
	EXPERIENCE			ntinue on separate sheet					
		nt. Start from your recent	work) Description	of duties should be	indicated in the attached	Work Experie	ence sheet.		
28. INCLUSIVE DATES (mm/dd/yyyy) POSITION TITLE (Write in full/Do not abbre			DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)		MONTHLY SALARY	GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)	
07/04/2023	08/01/2023	LABORATORY ASS	ISTANT (OJT)		MACULATE CONCEPTION IOSPITAL	N/A	N/A	N/A	N
			(Cor	ntinue on separate sheet	t if necessary)				
SIGN	ATURE				DATE				

VI. V	OLUNTARY WORK OR INVOLVEMENT	IN CIVIC / NON-GOVERNMENT	/PEOPLE / V	OLUNTARY O	RGANIZATIO	N/S		
29.	NAME & ADDRESS OF OI (Write in full			/E DATES d/yyyy) To	NUMBER OF HOURS	POSITION / NATURE OF WORK		
N/A			N/A	N/A	N/A	N/A		
VIII	FARMING AND DEVELOPMENT (LOD)		tinue on separate		)			
VII. L	EARNING AND DEVELOPMENT (L&D)	INTERVENTIONS/TRAINING PR		DATES OF		l		
30.	TITLE OF LEARNING AND DEVELOPMENT INTE (Write in full		ATTEN	IDANCE Id/yyyy)	NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
N/A			N/A	N/A	N/A	N/A	N/A	
		(Con	tinue on separate :	sheet if necessary				
VIII.	OTHER INFORMATION							
31.	SPECIAL SKILLS and HOBBIES	32. NON		e in full)	NITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
	COMMUNICATION SAVVY	N/A					N/A	
	TEACHING							
	ADMINISTRATIVE DUTIES							
	MICROSOFT WORD, EXCEL, PPT							
	CHANGE ADAPTATION							
	CHANGE ADAPTATION  PUBLIC WRITING							
	i oblio manno	(Con	tinue on separate	sheet if necessary				
	SIGNATURE				D	ATE		

34.	Are you related by consanguinity or affinity to the appointin chief of bureau or office or to the person who has immedia Bureau or Department where you will be apppointed,						
	a. within the third degree?	☐ YES ☑ NO					
	b. within the fourth degree (for Local Government Unit - Ca	YES	<b>✓</b> NO				
		If YES, give deta	ils:				
35.	a. Have you ever been found guilty of any administrative of	ffense?	☐ YES ☑ NO				
			If YES, give deta	ils:			
	b. Have you been criminally charged before any court?		☐ YES ☑ NO				
			If YES, give deta	ils:			
			Date Filed: Status of Case/s:				
36	Have you ever been convicted of any crime or violation of a	any law decree ordinance or regulation					
50.	by any court or tribunal?	arry law, address, oralliance or regulation	☐ YES ☑ NO If YES, give details:				
			ii 120, givo dota				
37.	Have you ever been separated from the service in any of the	ne following modes: resignation.	□YES	✓ NO			
	retirement, dropped from the rolls, dismissal, termination, e		If YES, give deta				
	out (abolition) in the public or private sector?		-				
38.	a. Have you ever been a candidate in a national or local elements and a parangay election)?	ection held within the last year (except	YES	☑ NO			
	,		If YES, give deta				
	b. Have you resigned from the government service during election to promote/actively campaign for a national or local		YES give deta	☑ NO			
_	<u> </u>		If YES, give details:				
39.	Have you acquired the status of an immigrant or permaner	it resident of another country?	☐ YES ☑ NO If YES, give details (country):				
			ii 1E5, give deta	iis (country):			
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma	agna Carta for Disabled Persons (RA					
	7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972)						
a.	Are you a member of any indigenous group?		YES	. ☑ NO			
b.	Are you a person with disability?		If YES, please specify:  ☐ YES				
	The year a person with aleasting.		If YES, please specify ID No:				
C.	Are you a solo parent?		YES	✓ NO			
			If YES, please speci	fy ID No:			
41.	REFERENCES (Person not related by consanguinity or affinity to applicant	/appointee)					
	NAME	ADDRESS	TEL. NO.	ID picture taken within			
	MATTHEW EMAN ANGELO M. ESTEMBER	BAYBAY CITY	9272919323	the last 6 months 4.5 cm. X 3.5 cm			
	CLE MARVEN BALAGA	ORMOC CITY	9606559310	(passport size)			
	NOL ARTOZA	IADO LEVIE	9773607261	Computer generated or photocopied picture			
12		JARO, LEYTE		is not acceptable			
42.	I declare under oath that I have personally accomplishe complete statement pursuant to the provisions of pertin		·				
	Philippines. I authorize the agency head/authorized repr						
	I agree that any misrepresentation made in this doc administrative/criminal case/s against me.	cument and its attachments shall caus	e the filing of	PHOTO			
	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)						
	LEASE INDICATE ID Number and Date of Issuance						
H	overnment Issued ID: NATIONAL ID						
	//License/Passport No.: 5907-8237-1463-4950	Signature (Sign inside the bo	ox)				
D	Date/Place of Issuance: 07/21/2022 JARO, LEYTE Date Accomplished			Right Thumbmark			
	SUBSCRIPED AND SWORN to before me this	ng his/hor validly issue	d government ID as indicated above				
	SUBSCRIBED AND SWORN to before me this	ng mamer validly issue	d government ID as indicated above.				
	_						
Person Administering Oath							