CS Form No. 212
Revised 2017

PERSONAL DATA SHEET

***WARNING:** Any misinterpretation 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. CS ID No. (Do not fill up. For CSC use only)

I. PERSONAL INFORMATION

2. SURNAME	CORNITES
FIRST NAME	FRIEDELYN
NAME EXTENSION (JR., SR)	
MIDDLE NAME	DONATO
3. DATE OF BIRTH (mm/dd/yyyy)	06-23-1992
4. PLACE OF BIRTH	GUADALUPE, BAYBAY, LEYTE
5. SEX	☐ Male ☑ Female
6. CIVIL STATUS	☑ Single ☐ Married ☐ Widowed ☐ Separated ☐ Other/s:
7. HEIGHT (m)	1.53
8. WEIGHT (kg)	45
9. BLOOD TYPE	B+
10. GSIS ID NO.	
11. PAG-IBIG ID NO.	921245348526
12. PHILHEALTH NO.	13-202388675-1
13. SSS NO.	
14. TIN NO.	
15. AGENCY EMPLOYEE NO.	VSU

16. CITIZENSHIP	☑ Filipino ☐ Dual Citizenship ☐ by birth ☐ by naturalization
If holder of dual citizenship, please indicate the details.	Pls. indicate country:
17. RESIDENTIAL ADDRESS	ZONE 3 (House/Block/Lot No. / Street); GUADALUPE (Subdivision/Village / Barangay); BAYBAY (City/Municipality); LEYTE (Province)
ZIP CODE	6521
18. PERMANENT ADDRESS	ZONE 3 (House/Block/Lot No. / Street); GUADALUPE (Subdivision/Village / Barangay); BAYBAY (City/Municipality); LEYTE (Province)
ZIP CODE	6521
19. TELEPHONE NO.	
20. MOBILE NO.	09380041205
21. E-MAIL ADDRESS (if any)	friedelyn.cornites@vsu.edu.ph

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	NAME EXTENSION (JR., SR)	SABRAINAH MAE PUNA BORNIAS	08-16-2019
MIDDLE NAME			
OCCUPATION			
EMPLOYER/BUSINESS NAME			
BUSINESS ADDRESS			
TELEPHONE NO.			
24. FATHER'S SURNAME	DECEASED		
FIRST NAME	DECEASED		
NAME EXTENSION (JR., SR)			
MIDDLE NAME	DECEASED		
25. MOTHER'S MAIDEN NAME			
SURNAME	CORNITES		
FIRST NAME	ROSALINDA		
MIDDLE NAME	DONATO	(Continue on separate sheet if necessary)	

III. EDUCATIONAL BACKGROUND

26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE From	PERIOD OF ATTENDANCE To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
ELEMENTARY	GUADALUPE ELEM. SCHOOL		2000	2006		2006	
SECONDARY	BUNGA NATIONAL HIGH SCHOOL		2006	2010		2010	
VOCATIONAL / TRADE COURSE							
COLLEGE	VISAYAS STATE UNIVERSITY	BS AGRICULTURE	2012	2018		2018	ESGPA
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

SIGNATURE		DATE	02-15-2022

IV. CIVIL SERVICE ELIGIBILITY

27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
				NUMBER	Date of Validity
NA	NA	NA	NA	NA	

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.

28. INCLUSIVE DATES (mm/dd/yyyy)		POSITION TITLE (Write in full/Do not abbreviate)	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	To						
08-2-2021	03-31-2022	CLERK I	DEPARTMENT OF PEST MGMT.	12,100		J.O	Yes
07-3-2018	09-31-2020	DATA COLLECTOR	DEPARTMENT OF AGRICULTURE	12,300		J.O	Yes

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

29. NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy) From	To	NUMBER OF HOURS	POSITION / NATURE OF WORK
NA	NA	NA	NA	NA

(Continue on separate sheet if necessary)

VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy) From	To	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
NATIONAL RETOOLING FOR CROP HEALTH	03-25-19	03-29-19	8	Technical	DEPARTMENT OF AGRICULTURE
REGIONAL TRAINING ON PRIME	10-9-18	10-4-18	8	Technical	DEPARTMENT OF AGRICULTURE
EVALUATION OF SOIL MICROBIAL FUNCTIONS	09-3-15	09-3-15	4		" " "
NCIII Certification: Harvesting Crop Production	05-29-17	06-7-17	8		ATI

(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
Reading Writing Cooking Gardening	NA	NA

(Continue on separate sheet if necessary)

SIGNATURE		DATE	02-15-2022

34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to the chief of bureau or office or to the person who has immediate supervision over you in the Office, Bureau or Department where you will be apppointed, a. within the third degree? b. within the fourth degree (for Local Government Unit - Career Employees)?	☐ YES ☑ NO ☐ YES ☑ NO If YES, give details:
35. a. Have you ever been found guilty of any administrative offense?	☐ 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 any law, decree, ordinance or regulation by any court or tribunal?	☐ YES ☑ NO If YES, give details:
37. Have you ever been separated from the service in any of the following modes: resignation, retirement, dropped from the rolls, dismissal, termination, end of term, finished contract or phased out (abolition) in the public or private sector?	☑ YES ☐ NO If YES, give details: end of contract
38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?	☐ YES ☑ NO If YES, give details:
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?	☐ YES ☑ NO If YES, give details:
39. Have you acquired the status of an immigrant or permanent resident of another country?	☐ YES ☑ NO If YES, give details (country):
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 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? b. Are you a person with disability? c. 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 consanguinity or affinity to applicant /appointee)

NAME	ADDRESS	TEL. NO.
ELVIRA L. OCLARIT	VSU	09483446086
JUSTINE BENETTE H. MILLADO	VSU	09494360739
JULIUS ABELLA	VSU	09208553990

PHOTO

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 pertinent laws, rules and regulations of the Republic of the Philippines. I authorize the agency head/authorized representative to verify/validate the contents stated herein. I agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me.

Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) *PLEASE INDICATE ID Number and Date of Issuance*
Government Issued ID:
ID/License/Passport No.:
Date/Place of Issuance:

Signature (Sign inside the box)
Date Accomplished

Right Thumbmark

SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.

Person Administering Oath