CS Form No. 212 Revised 2017	PERSONAL	DATA S	HEE	:T					
WARNING: Any misrepresentati	ion made in the Personal Data Sheet and the Work Experience	Sheet shall cause the filing	of adminis	trative/crim	inal case/s	against the pers	on concern	ed.	
	O FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE	•							
Print legibly. Tick appropriate	xes () and use separate sheet if necessary. Indicate N			EVIATE.	1. CS ID No	(Do	not fill up. Fo	or CSC use only	
I. PERSONAL INFORMA									
2. SURNAME	TRIPOLI					Lucia Everyolov	(ID 0D)		
FIRST NAME	MYLEN					NAME EXTENSION	I (JR., SR)	N/A	
MIDDLE NAME	MALIGRO								
3. DATE OF BIRTH (mm/dd/yyyy)	03/14/2000	16. CITIZENSHIP		☑ Filipin	0 🗆	Dual Citizenship ☐ by birth [∐by naturali	zation	
4. PLACE OF BIRTH	BAYBAY, LEYTE	If holder of dual citize	nship,			Pls. indicat	e country:		
5. SEX	☐ Male ☑ Female	please indicate the de	etails.			•			
6 CIVIL STATUS	✓ Single	17. RESIDENTIAL ADDRES	N/A House/Block/Lot N/A Subdivision/Villa		t No.		O PAMOTOSAN Street MAKINHAS Barangay		
7. HEIGHT (m)	1.52			BAYBAY			LEYTE		
8. WEIGHT (kg)	45	ZIP CODE	City/Municipality 65			6521	Province 6521		
9. BLOOD TYPE	0+	18. PERMANENT ADDRES		N/A			O PAMOTOSAN		
10. GSIS ID NO.	N/A			House/Block/Lot No. N/A		Street MAKINHAS			
11. PAG-IBIG ID NO.	1213-0534-1673			bdivision/Villa BAYBAY ty/Municipal	LEYTE				
12. PHILHEALTH NO.	13-202844917-1	ZIP CODE	Ci	6521	ity		Province		
13. SSS NO.	06-4462134-0	19. TELEPHONE NO.							
14. TIN NO.	738-271-392-000	20. MOBILE NO.			09	46-478-0510			
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if ar		<u>m</u> y	<u>/lentripoli</u>	14777@gma	il.com		
II. FAMILY BACKGROU	JND								
22. SPOUSE'S SURNAME	N/A		23. NAME of all)	of CHILDREI	N (Write full	name and list		OF BIRTH /dd/yyyy)	
FIRST NAME	N/A	NAME EXTENSION (JR., SR) N/A			N/A			N/A	
MIDDLE NAME	N/A								
OCCUPATION	N/A								
EMPLOYER/BUSINESS NAM	N/A								
BUSINESS ADDRESS	N/A								
TELEPHONE NO.	N/A								
24. ATHER'S SURNAME	TRIPOLI								
FIRST NAME	MICHAEL	NAME EXTENSION (JR., SR) N/A							
MIDDLE NAME	NUÑEZ								
25. MOTHER'S MAIDEN NAME									
SURNAME	MALIGRO								
FIRST NAME	ARLYN								
MIDDLE NAME	SENTORIAS			(Con	tinue on se	parate sheet if n	ecessary)		
III. EDUCATIONAL BAG	CKGROUND								
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/ (Write in full)	COURSE		DD OF DANCE To	HIGHEST LEVEL/ UNITS EARNED	YEAR GRADUA TED	SCHOLARSI IP/ ACADEMIC HONORS	
ELEMENTARY	MAKINHAS ELEMENTARY SCHOOL	PRIMARY EDUCA	TION	2006	2012	GRADUATED	2012	1ST HONORABLI MENTION	
SECONDARY	MAKINHAS NATIONAL HIGH SCHOOL	JUNIOR HIGH SCI	HOOL	2012	2016	COMPLETED	2016	WITH HONOR	
SECONDARY	VISAYAS STATE UNIVERSITY INTEGRATED HIGH SCHOOL	SENIOR HIGH SCH	HOOL	2016	2018	GRADUATED	2018	WITH HONOR	
VOCATIONAL / TRADE COURSE	TECHNICAL EDUCATION AND SKILLS DEVELOPMENT AUTHORITY	RICE MACHINERY OPE (RMO) NCII	RATIONS	RATIONS 04/25/2023 05		COMPLETED	2022	N/A	
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SECO EDUCATION MAJOR IN		2018	2022	GRADUATED	2022	CUM LAUDI	
GRADUATE STUDIES	GRADUATE STUDIES N/A			N/A	N/A	N/A	N/A	N/A	

DATE

December 6, 2023

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SIGNATURE

IV. CIVIL	SERVICE	ELIGIBILITY							
27. CARE	'. CAREER SERVICE/ RA 1080 (BOARD/ BAR) DATE OF				EDMENT	LICENSE (if a	pplicable)		
			(If Applicable)	CONFERMENT	I LAGE OF EXAMINA	TION / CONF	ETMINE (N. I	NUMBER	Date of Validity
HONOR GRADUATE ELIGIBILITY (PD 907)			N/A	10/02/2022	TACLOE	BAN CITY		100108230238	N/A
DRIVER'S LICENCE N/A			17/05/2019	ВАҮВАҮ С	ITY, LEYT	E	H12-19-001443	14/03/2024	
			(Contir	l nue on separate shee	t if necessary)				
	K EXPERIE	NCE Syment. Start from ye	our roomt work	k) Description of	dutice chauld be indi	icated in th	no attaches	l Work Export	anaa aha
28. INCLU	SIVE DATES						SALARY/ JOB/ PAY GRADE (if		GOV'T
(mn	(mm/dd/yyyy) POSITION TITL (Write in full/Do not ab			DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)		MONTHLY applicable)& STEP (Format "00-0")/		STATUS OF APPOINTMENT	SERVICE (Y/ N)
	From To CUSTOMED SERVI		ERVICE				INCREMENT		
09/06/2022	01/19/2023	REPRESENT		TELEPE	RFORMANCE	16,000.00	N/A	CASUAL	N
rate sheet if n	ecessary)								
SIGNA	ATURE	\backslash	чт		DATE		Decemb	per 6, 2023	
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VI. VOLU	UNTARY WORK OR INVOLV	EMENT IN CIVIC / NON-G	OVERNME	NT / PEOPL	E / VOLUN	ITARY ORG	ANIZATION/S		
29.	NAME & ADDRESS OF C (Write in ful			/E DATES d/yyyy) To	NUMBER OF HOURS		POSITION / NATURE OF WORK		
	Baybay Adventist Youth	Organization	2016	Present	4.0		Secretary		
		(Continu	ue on separate	sheet if necess	eanu)				
	ARNING AND DEVELOPMEN	T (L&D) INTERVENTIONS	/TRAINING	PROGRAM	IS ATTEND				
Start from	the most recent L&D/training program	and include only the relevant L&L		for the last five	e (5) years for l		xecutive/Managerial positions)		
30. TIT	TLE OF LEARNING AND DEVELOPMEN PROGRAMS	NT INTERVENTIONS/TRAINING (Write in full)	ATTEN	DANCE d/yyyy) To	NUMBER OF HOURS				
Rice Mach	ninery Operations (RMO) NCII		04/25/2023	05/29/2023	232	Technical	Technical Education and Skills Development Program		
Customer	Service Representative		09/06/2022	10/06/2022	160	Products and Services	Teleperformance		
School Le	earning Action Cell Session on Giv	ing Constructive Feedback	04/08/2022	04/08/2022	4	Orientation	Baybay National High School		
		(Continu	ue on separate	sheet if necess	sary)		<u> </u>		
/III. OTI	HER INFORMATION						MEMBERSHIP IN		
31.	SPECIAL SKILLS and HOBBIES	32. NON-AC	ADEMIC DISTIN (Write	ICTIONS / REC e in full)	OGNITION		33. ASSOCIATION/ORGANIZATION (Write in full)		
	Computer Literacy	Mi	N/A						
	Community Service		Baybay Adventist Youth Organization						
	Sport (Sepak Takraw)	University Athlete Visayas S					Visayas State University - Institute of Human Kinetics		
	Singing	N/A N/A							
	Hiking		N/A	A		N/A			
	SIGNATURE	(Continu	ue on separate	sneet if necess		4 <i>TE</i>	December 6, 2023		
		X **1				. =	CS FORM 212 (Revised 2017), Page 3 o		

34.	Are you related by consanguinity or affinity to the chief of bureau or office or to the person who has Bureau or Department where you will be apppoint a. within the third degree? b. within the fourth degree (for Local Government)	☐ YES ☑ NO ☐ YES ☑ NO If YES, give details:					
35.	a. Have you ever been found guilty of any adminis	☐ YES ☑ NO If YES, give details:					
	b. Have you been criminally charged before any c	☐ YES ☑ NO If YES, give details: Date Filed: Status of Case/s:					
36	Have you ever been convicted of any crime or vio ordinance or regulation by any court or tribunal?	lation of any law, decree,	☐ YES ☑ NO If YES, give details:				
37.	Have you ever been separated from the service in resignation, retirement, dropped from the rolls, dis finished contract or phased out (abolition) in the p	smissal, termination, end of term,	☐ YES If YES, give de	☑ NO tails:			
38.	a. Have you ever been a candidate in a national of year (except Barangay election)?b. Have you resigned from the government service period before the last election to promote/actively	t ☐ YES ☑ NO If YES, give details: ☐ YES ☑ NO If YES, give details:					
39	Have you acquired the status of an immigrant of country?	YES ☑ NO If YES, give details (country):					
40 a b	Pursuant to: (a) Indigenous People's Act (RA 837 Persons (RA 7277); and (c) Solo Parents Welfare 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 ☑ NO If YES ☑ NO					
41.	. REFERENCES (Person not related by consanguinity or affini	ty to applicant /appointee)		<u> </u>			
	NAME	ADDRESS	TEL. NO.				
	Marilyn N. Manaig	Baybay City	09196866636	ID picture taken within the last 6 months 3.5 cm. X 4.5 cm			
	Bayron S. Barredo	Tacloban City	09515112133	(passport size)			
				With full and handwritten name tag and signature over printed name			
42.	I declare under oath that I have personally accounting true, correct and complete statement pursuant regulations of the Republic of the Philippine representative to verify/validate the content misrepresentation made in this document an	s, rules and ad/authorized e that any	Computer generated or photocopied picture PHOTO				
	Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's icense, etc.) PLEASE INDICATE ID						
	Government Issued ID Driver's License						
I	D/License/Passport N H12-19-001443	box)					
	Date/Place of Issuance 05-17-2019/Baybay City	3	Right Thumbmark				
CR	RIBED AND SWORN to before me this	hibiting his/her validl	y issued government ID as indicated a				