Revised 2017

PERSONAL DATA SHEET

	E TO FILLING OUT THE PERSONAL DATA SEES.) and use separate sheet if necessary. Indica				(Do not fill up.	For CSC use o	
PERSONAL INFORMATI							
SURNAME	CODERA		NAME EXTENSION (JR., SR)				
FIRST NAME	CHRISTINE FAYE		NAME EXTENSION (NAME EXTENSION (JR., SK)			
MIDDLE NAME	PEVIDA						
DATE OF BIRTH (mm/dd/yyyy)	12/24/1997	16. CITIZENSHIP	✓ Filipino [Dual Citizenship			
PLACE OF BIRTH	ORMOC CITY	If holder of dual citizenship,	ual citizenship,		Pls. indicate country:		
SEX	☐ Male ☑ Female	please indicate the details.				•	
CIVIL STATUS	Single Married	17. RESIDENTIAL ADDRESS	House/Block/Lot No.		Street	landar seleniers elektronisch elektronisch von in he	
	Widowed Separated Other/s:		National Road		Poblacion		
HEIGHT (m)	1.55m		Subdivision/Village Tabango		Barangay Leyte		
.,,			City/Municipality	ity/Municipality		Province	
WEIGHT (kg)	56kgs.	ZIP CODE		6536			
BLOOD TYPE	0	18. PERMANENT ADDRESS	House/Block/Lot No.		Street		
GSIS ID NO.	N/A	ecu il consist denderale della reconsista ci piano	National Road Subdivision/Village		Poblacion Barangay		
PAG-IBIG ID NO.	1212-3075-7722		Tabango		Leyte		
PHILHEALTH NO.	1325-0883-0894	ZIP CODE	City/Municipality 6536		Province		
SSS NO.	06-4158643-3	19. TELEPHONE NO.		N/A			
TIN NO.	000-357-101-996	20. MOBILE NO.		09995088424			
AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	cfayepco	odera@gmail.co	era@gmail.com		
FAMILY BACKGROUND							
SPOUSE'S SURNAME	N/A	23. NAME of C	HILDREN (Write full name and	d list all)	DATE OF BIR	TH (mm/dd/yyy	
FIRST NAME		NAME EXTENSION (JR., SR)	N/A				
MIDDLE NAME							
OCCUPATION							
EMPLOYER/BUSINESS NAME							
BUSINESS ADDRESS							
TELEPHONE NO.							
FATHER'S SURNAME	CODERA						
FIRST NAME	VALENTINO	NAME EXTENSION (JR., SR)					
MIDDLE NAME	AGUILAR						
MOTHER'S MAIDEN NAME	<u> </u>						
SURNAME	PEVIDA					November of the State of the St	
FIRST NAME	TEOFILA			 			
MIDDLE NAME				separate sheet if necess	ary)		
	A CONTRACTOR OF THE PROPERTY O						
EDUCATIONAL BACKS	ROUND			THE RESIDENCE OF THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER, THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER, THE OW		SCHOLARSHII ACADEMIC	
EDUCATIONAL BACKS	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	HONORS	
LEVEL	NAME OF SCHOOL (Write in full)		From To	UNITS EARNED	GRADUATED		
LEVEL	NAME OF SCHOOL (Write in full) Tabango Central School		From To 2004 2010	UNITS EARNED	graduated 2010	HONORS RECEIVED 5th Honorable Mention	
LEVEL ELEMENTARY SECONDARY	NAME OF SCHOOL (Write in full)		From To	UNITS EARNED	GRADUATED	HONORS RECEIVED	
LEVEL ELEMENTARY SECONDARY VOCATIONAL /	NAME OF SCHOOL (Write in full) Tabango Central School		From To 2004 2010	UNITS EARNED	graduated 2010	HONORS RECEIVED 5th Honorable Mention	
	NAME OF SCHOOL (Write in full) Tabango Central School Tabango National High School		From To 2004 2010 2010 2014	UNITS EARNED	graduated 2010	HONORS RECEIVED 5th Honorable Mention 1st Honorable	
LEVEL ELEMENTARY SECONDARY VOCATIONAL / TRADE COURSE	NAME OF SCHOOL (Write in full) Tabango Central School Tabango National High School N/A	(Write in full) Bachelor of Science in Business Administratio	From To 2004 2010 2010 2014	UNITS EARNED (if not graduated)	2010 2014	HONORS RECEIVED 5th Honorable Mention	

27. CAREE	R SERVICE/ RA 1080 (BOAF	RD/ BAR) UNDER SPECIAL	RATING	DATE OF				LICENSE (if a	applicable)
LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE		BARANGAY	(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXA	MINATION / CONFERM	ENT	NUMBER	Date of Validity
	Civil Service Career - Professional		84.5	6/19/2022	Now 0	rmoc City High			Validity
		Tolessional	04.5	0/19/2022	New O		************************		-
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-									
V WORKE	XPERIENCE		(Col	ntinue on separate sheet i	f necessary)				
		t from your recent work) Description of d	luties should be indic	ated in the attached Wo	ork Experience she	et.		
8. INCLUSIV	/E DATES (mm/dd/yyyy)	POSITION TI	TLE	DEPARTMENT / AGE	NCY / OFFICE / COMPANY		SALARY/ JOB/ PAY GRADE (if	STATUS OF	GOVT
From	То	(Write in full/Do not a			Do not abbreviate)	MONTHLY SALARY	applicable)& STEP (Format "00-0")/ INCREMENT	APPOINTMENT	SERVICE (Y/ N)
		Municipal Cinara	al Analust	Department of	Social Welfare and	B40.000.00	HOREMENT	000	
15/2021	03/31/2023	Municipal Financi		Development Department of	- KALAHI - CIDSS Social Welfare and	₱10,300.00		cos	
4/01/2023	12/31/2023	Municipal Area Co	oordinator	Development	- KALAHI - CIDSS	P15,000.00		cos	
WARREN TO BE STORE THE STO									
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		PIN	(Con	tinue on separate sheet if	necessary)				
	NATURE	0	_		DATE	01/24/2024			

29.	NAME & ADDRESS OF (Write in		INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK		
			From	То				
	N/A							
			+	+				
				-	-			
				-				
			ntinue on separat		ary)			
II. LEARNING	G AND DEVELOPMENT (L&	D) INTERVENTIONS/TRAINING	PROGRAMS A	ATTENDED				
0. TITLE O	DE LEARNING AND DEVELOPMENT IN	NTERVENTIONS/TRAINING PROGRAMS		VE DATES OF ENDANCE		Type of LD (Managerial/	CONDUCTED/ SPONSORED BY	
- IIILL O	(Write in		(mm/dd/yyyy)		NUMBER OF HOURS	Supervisory/ Technical/etc)	(Write in full)	
			From	То		Toomioarouy		
Disaster Resp	onse and Basic Training with Ra	pelling and Basic High Angle Rescue	1/30/2015	01/02/2015	8.0	Technical	Rescue 177 Training Center	
W	ork Ethics and Professionalism	and Stress Management	11/25/2017	11/25/2017	8.0	Managerial	University of Cebu - College of Business and Accountancy	
	Dream Big: Achieving	Better Life	1/13/2018	1/13/2018	8.0	Managerial	University of Cebu - College of Business and	
				-	-		Accountancy University of Cebu - College of Business and	
	Career Success and	mentoring	1/27/2018	1/27/2018	8.0	Managerial	Accountancy University of Cebu - College of Business and	
	Industry Overview in the C	Corporate World	2/17/2018	2/17/2018	8.0	Managerial	Accountancy	
1	TRAIN LAW (Tax Reform for Acce	eleration and Inclusion)	2/28/2018	2/28/2018	8.0	Managerial	College of Business Executives Council	
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				-				
			+	1				

		(Con	ntinue on separate	sheet if necessa	ny)			
II. OTHER IN	FORMATION						•	
31. SPI	ECIAL SKILLS and HOBBIES	32. NON	-ACADEMIC DISTI	INCTIONS / RECO	GNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
	Dancing	Best Dance Crew - 1st Runner Up (Regional Mid Year Convention 2017)					Junior Philippine Institute of Accountant	
	Reading	5th Place Dance Palabas (Accountancy Week 2017)				Tabango Young Santacruzan		
			Season 8 Semi-Finalist (Dance Category)					
		Leyte idol S		***************************************	oategory)		Tabango Parish Commission on Youth	
			Dancer of the	Batch 2018				
		Best Dance Crew - 1st	Runner Up (R	tegional Mid Yo	ear Convention 2	2016)		
	ALLENA DE LA CONTRACTOR							
							1	
	SIGNATURE	(Con	ntinue on separate	sheet if necessa		ATE	01/24/2024	

34.	Are you related by consanguinity or affinity to the appointing chief of bureau or office or to the person who has immediate Bureau or Department where you will be approinted, a. within the third degree?	□ VEC					
	b. within the fourth degree (for Local Government Unit - Can	YES NO					
		If YES, give details	Name of the last o				
35.	a. Have you ever been found guilty of any administrative offer	☐ 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	ny 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 retirement, dropped from the rolls, dismissal, termination, en		YES	□ NO			
	out (abolition) in the public or private sector?		If YES, give details Resigned du	e to better opportunities			
38.	a. Have you ever been a candidate in a national or local election and election?	☐ YES If YES, give detail	✓ NO ls:				
	b. Have you resigned from the government service during the election to promote/actively campaign for a national or local	☐ YES ☑ NO If YES, give details:					
39.	Have you acquired the status of an immigrant or permanent	YES NO					
			If YES, give details	s (country):			
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972),						
a.	Are you a member of any indigenous group?	picade unlawer the following ficine.	YES	✓ NO			
b.	Are you a person with disability?	If YES, please specify: YES NO					
C.	Are you a solo parent?		If YES, please specify ID No: YES NO				
	OFFERDANCE OF THE PROPERTY OF		If YES, please specify	/ ID No:			
41.	REFERENCES (Person not related by consanguinity or affinity to applicant NAME	/appointee) ADDRESS	TEL. NO.				
	Mary Doreen M. Caballero	Poblacion, Tabango, Leyte	09998891927				
	Athena O. Valeriano	San Miguel, Leyte	09773373236				
	Abegail M. Engao	Burauen, Leyte	09064204513				
42.	I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertine Philippines. I authorize the agency head/authorized repre I agree that any misrepresentation made in this docu administrative/criminal case/s against me.	nt laws, rules and regulations of the I sentative to verify/validate the contents	Republic of the stated herein.	РНОТО			
	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) LEASE INDICATE ID Number and Date of Issuance	₩.					
-	overnment Issued ID: 0113-0037865-1	CK					
ID/	License/Passport No.: P1116870C	Signature (\$ign inside the bo	ox)				
Da	te/Place of Issuance: 09/04/2021/Tabango, Leyte	V 1/24/2024 Date Accomplished		Right Thumbmark			
	SUBSCRIBED AND SWORN to before me this	, affiant exhibitir	ng his/her validly issued g	government ID as indicated above.			
		Person Administering Oatl	1				