CS Form No. 212 Revised 2017	DEDC	ONAL DAT	'Λ <b>ς</b> μ	IEET				
	ation made in the Personal Data Sheet and				minai case/s aga	inst the perso	n concernea.	
	E TO FILLING OUT THE PERSONAL DATA Sets [ ) and use separate sheet if necessary. Indi			1. CS ID No.		(Do not fill up.	For CSC use only	
I. PERSONAL INFORMATI	ON							
2. SURNAME	BALDICANTOS							
FIRST NAME	JURICH ASHLEY		NAME EXTENSION (JR., SR)					
MIDDLE NAME	QUINTANA				•			
<ol><li>DATE OF BIRTH (mm/dd/yyyy)</li></ol>	8/9/2001	16. CITIZENSHIP		☑ Filipino □	Dual Citizenship	□by naturaliz	ration	
4. PLACE OF BIRTH	Abuyog, Leyte	If holder of dual citize	enship,		Pls. indicate	— ·		
5. SEX	☐ Male	please indicate the d	letails.				•	
6 CIVIL STATUS	✓ Single	17. RESIDENTIAL ADDRESS	Ног	N/A House/Block/Lot No. N/A		N/A Street PICAS NORTE		
7 11510117 ( )	Other/s:		Su	bdivision/Village JAVIER		Barangay LEYTE		
7. HEIGHT (m) 8. WEIGHT (kg)	1.676 m 65 kg	ZIP CODE	С	ity/Municipality		Province		
9. BLOOD TYPE	A A	18. PERMANENT ADDRESS		N/A		N/A		
10. GSIS ID NO.	N/A		Нои	House/Block/Lot No. N/A		Street PICAS NORTE		
			Su	bdivision/Village JAVIER		Barangay LEYTE		
11. PAG-IBIG ID NO.	N/A		City/Municipality			Province		
12. PHILHEALTH NO.	N/A	ZIP CODE		6511				
13. SSS NO.	N/A	19. TELEPHONE NO.		N/A				
14. TIN NO.	N/A	20. MOBILE NO.	09814306811					
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	jurichqb@gmail.com					
II. FAMILY BACKGROUNI								
22. SPOUSE'S SURNAME	N/A		23. NAME of CHI	ILDREN (Write full name and I	ist all)	DATE OF BIR	TH (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	BALDICAN'	TOS						
FIRST NAME	ASIS	NAME EXTENSION (JR., SR)						
MIDDLE NAME	DOYOGA	AN .						
25. MOTHER'S MAIDEN NAME								
SURNAME	QUINTAN	NA .						
FIRST NAME	JOSEPHI	NE						
MIDDLE NAME MAICO			(Continue on separate sheet if necessary)					
III. EDUCATIONAL BACK	GROUND							
26			FE (0.0) IF 2 =	PERIOD OF ATTENDANCE	HIGHEST LEVEL/		SCHOLARSHIP/	

MIDDLE NAME	MAICO	MAICO				(Continue on separate sneet if necessary)				
III. EDUCATIONAL BACKGROUND										
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)		PERIOD OF A	ATTENDANCE	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS		
				From	To	(: :::: g:====;		RECEIVED		
ELEMENTARY	BERNARDO V. CLOSA CENTRAL SCHOOL	ELEMENTARY GRADUATE		7/1/1905 3/1/2014		ELEMENTARY	2014	N/A		
SECONDARY	NOTRE DAME OF ABUYOG, INC.	NOTRE DAME OF ABUYOG, INC. SENIOR HIGH SCHOOL GRADUATE		7/1/2014		SENIOR HIGH SCHOOL	2020	N/A		
VOCATIONAL / TRADE COURSE	N/A	N/A N/A		N/A	N/A	N/A	N/A	N/A		
COLLEGE	VISAYAS STATE UNIVERSITY	ATE UNIVERSITY BACHELOR OF SCIENCE IN STATIST		8/1/2020	8/7/2024	COLLEGE	2024	N/A		
GRADUATE STUDIES	N/A N/A			N/A	N/A	N/A	N/A	N/A		
(Continue on separate sheet if necessary)										
SIGNATURE			DA	TE		O8/13/2024				

IV. CIVIL SI	ERVICE ELIG	iBILITY									
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER RATING		DATE OF			DMENIT	LICENSE (if applicable)					
		(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT			NUMBER	Date of Validity			
CAREER SERVICE PROFESSIONAL		85.1	8/20/2023	TACLOBAN CIT			N/A	N/A			
V. WORK E	(Continue on separate sheet if necessary)  V. WORK EXPERIENCE										
		t. Start from your recent	work) Description (	of duties should be i	indicated in the attached l	Nork Experie	ence sheet.				
(mi	SIVE DATES m/dd/yyyy)	POSITION T (Write in full/Do not		DEPARTMENT / AGI (Write in ful	MONTHLY SALARY	GRADE (if applicable)& STEP (Format "00-0")/	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)			
From	To	DESO TECUMICAL OF	IDDODT STAFF	~	OMELEC	0000 00	INCREMENT	bi/A			
3/1/2022	5/2/2022	DESO TECHNICAL SU	DEPUKI STAFF	CC	DMELEC	8000.00	N/A	N/A	N/A		
				tinue on separate sheet	if necessary)						
SIGNA	ATURE		Xtr		DATE	08/13/2024		S FORM 212 (Revised 2	017) Page 2 of 4		

( /

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S							
29. NAME & ADDRESS OF (Write in fi			VE DATES Id/yyyy)	NUMBER OF HOURS		POSITION / NATURE OF WORK	
N/A N			N/A	N/A	N/A		
		ntinue on separate					
VII. LEARNING AND DEVELOPMENT (L&D	) INTERVENTIONS/TRAINING PR	i e	TENDED DATES OF	1			
30. TITLE OF LEARNING AND DEVELOPMENT IN (Write in fi		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	
	(Cor	ntinue on separate	sheet if necessary				
VIII. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES	32. NOI		e in full)	NITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
ATHLETIC	ATHLETE OF THE YEAR					NOTRE DAME OF ABUYOG, INC.	
MICROSOFT APPLICATIONS LITERATE	N/A					N/A	
	-						
	(Con	ntinue on separate	sheet if necessary				
SIGNATURE		+1-			ATE	08/13/2024	

C)	re you related by consanguinity or affinity to the appointing thief of bureau or office or to the person who has immediate tureau or Department where you will be apppointed,	or recommending authority, or to the supervision over you in the Office,					
a	b. within the third degree?	☐ YES	☑ NO				
	within the fourth degree (for Local Government Unit - Care	□ YES	☑ NO				
		a. Linpleyess),	If YES, give det	ails:			
35. 8	a. Have you ever been found guilty of any administrative offe	☐ YES If YES, give deta	☑ NO ails:				
	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 any court or tribunal?	ny law, decree, ordinance or regulation by	☐ YES ☑ NO If YES, give details:				
37.	Have you ever been separated from the service in any of the dropped from the rolls, dismissal, termination, end of term, fi in the public or private sector?	e following modes: resignation, retirement, inished contract or phased out (abolition)	☐ YES If YES, give deta	☑ NO ails:			
38.	A. Have you ever been a candidate in a national or local electron are described by the second s	ction held within the last year (except	☐ YES ☑ NO If YES, give details:				
	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 (country): ————————————————————————————————————					
40. a.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag and (c) Solo Parents Welfare Act of 2000 (RA 8972), please Are you a member of any indigenous group?	gna Carta for Disabled Persons (RA 7277); e answer the following items:	☐ YES	☑ NO ify:			
b. c.	Are you a person with disability?  Are you a solo parent?	☐ YES If YES, please spec ☐ YES	☑ NO				
-	REFERENCES (Person not related by consanguinity or affinity to applican	at /accointee)	If YES, please spec	IIIY IU No.			
4	NAME	ADDRESS	TEL. NO.	1 —			
-	LEONARDO PIGA	ABUYOG, LEYTE	N/A				
	PAULO BATIDOR	BAYBAY CITY	N/A	-	9.5		
4	I declare under oath that I have personally accomplishe complete statement pursuant to the provisions of pertir Philippines. I authorize the agency head/authorized represe agree that any misrepresentation made in this doct administrative/criminal case/s against me.	nent laws, rules and regulations of the entative to verify/validate the contents state	Republic of the ed herein.		PHOTO		
	Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)  PLEASE INDICATE ID Number and Date of Issuance  Government Issued ID: NATIONAL ID						
	ID/License/Passport No.: 6302-4154-8721-8907	ox)	11 "	The state of the s			
	Date/Place of Issuance: 2020/JAVIER, LEYTE			Right Thumbmark			
	SUBSCRIBED AND SWORN to before me this	, affiant exhibit	ing his/her validly issue	ed government ID	as indicated above.		
	,						
	Person Administering Oat			1			
8							