CS Form No. 212 Revised 2017	DEDSOI	NAL DAT	A CH		-				
	PERSUI	NAL DAI	А ЭП						
	tion made in the Personal Data Sheet and th	ne Work Experience Sheet	shall cause th	e filing of a	dministrati	ve/criminal case	s against the	e person	
	TO FILLING OUT THE PERSONAL DATA SH			HE PDS FO					
Print legibly. Tick appropriate boxes ( I. PERSONAL INFORMATION	( ) <b>1</b> use separate sheet if necessary. Indicate I	V/A if not applicable. DO NOT A	ABBREVIATE.		1. CS ID No.		(Do not fill up. F	or CSC use only)	
	PESERAL								
FIRST NAME	ABEGAIL					NAME EXTENSION (JR	., SR)		
	OLIVA								
3. DATE OF BIRTH		40 OLTIZENOLUD							
(mm/dd/yyyy)	5/29/1998	16. CITIZENSHIP				_	Dual Citizenship  by birth by naturalization		
4. PLACE OF BIRTH	BAYBAY CITY, LEYTE	- If holder of dual citizer			Pls. indicate c	<b>—</b> '	ization		
5. SEX	☐ Male ☑ Female	please indicate the de	etails.					•	
6 CIVIL STATUS	✓ Single	17. RESIDENTIAL ADDRESS		N/A			N/A		
	☐ Widowed ☐ Separated ☐ Other/s:			ise/Block/Lot No. N/A		Street IGANG			
7. HEIGHT (m)	1.62			division/Village AYBAY CITY	9		Barangay LEYTE		
	52	7/0 0005	Cit	y/Municipality		CE04	Province		
8. WEIGHT (kg)		ZIP CODE  18. PERMANENT ADDRESS		N/A		0321	6521 N/A		
9. BLOOD TYPE	0	•	Hous	se/Block/Lot No	0.		Street IGANG		
10. GSIS ID NO.	N/A		Sub	N/A ndivision/Village		Barangay			
11. PAG-IBIG ID NO.	121281796928		Cit	BAYBAY CITY by/Municipality	/	LEYTE Province			
12. PHILHEALTH NO.	132025892406 ZIP CODI			6521					
13. SSS NO.	06-4407651-3	19. TELEPHONE NO.		N/A					
14. TIN NO.	777204887	20. MOBILE NO.		09302091638					
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	peseralabegail@gmail.com						
II. FAMILY BACKGROUND									
22. SPOUSE'S SURNAME	N/A		23. NAME of CHI	LDREN (Write	e full name and	list all)	DATE OF BIRT	ΓΗ (mm/dd/yyyy)	
FIRST NAME	NAME EXTENSION (JR., SR)		N/A						
		NAME EXTENSION (JR., SK)		ļ	N/A				
MIDDLE NAME		IVANIL LATENSION (J.C., SIX)			N/A				
MIDDLE NAME  OCCUPATION		INVINE LATENSION (JIV., JV)			N/A				
		INVIVE LATENSION (UN., SIX)			WA				
OCCUPATION		INVIVE LATENSION (UN., SIX)			WA				
OCCUPATION  EMPLOYER/BUSINESS NAME		INVIVE LATENSION (UN., SIX)			WA				
OCCUPATION  EMPLOYER/BUSINESS NAME  BUSINESS ADDRESS	PESERAL	INVIVE LATENSION (U.S., SIS)			WA				
OCCUPATION  EMPLOYER/BUSINESS NAME  BUSINESS ADDRESS  TELEPHONE NO.	PESERAL NATANAEL	NAME EXTENSION (JR., SR)			WA				
OCCUPATION  EMPLOYER/BUSINESS NAME  BUSINESS ADDRESS  TELEPHONE NO.  24. FATHER'S SURNAME  FIRST NAME	-				WA				
OCCUPATION  EMPLOYER/BUSINESS NAME  BUSINESS ADDRESS  TELEPHONE NO.  24. FATHER'S SURNAME  FIRST NAME	NATANAEL				WA				
OCCUPATION  EMPLOYER/BUSINESS NAME  BUSINESS ADDRESS  TELEPHONE NO.  24. FATHER'S SURNAME  FIRST NAME  MIDDLE NAME  25. MOTHER'S MAIDEN NAME	NATANAEL				WA				
OCCUPATION  EMPLOYER/BUSINESS NAME  BUSINESS ADDRESS  TELEPHONE NO.  24. FATHER'S SURNAME  FIRST NAME  MIDDLE NAME  25. MOTHER'S MAIDEN NAME  SURNAME	NATANAEL MARZON				WA				
OCCUPATION  EMPLOYER/BUSINESS NAME  BUSINESS ADDRESS  TELEPHONE NO.  24. FATHER'S SURNAME  FIRST NAME  MIDDLE NAME  25. MOTHER'S MAIDEN NAME  SURNAME  FIRST NAME  MIDDLE NAME	NATANAEL MARZON  OLIVA SONIA CABALTERA					parate sheet if neces	issary)		
OCCUPATION  EMPLOYER/BUSINESS NAME  BUSINESS ADDRESS  TELEPHONE NO.  24. FATHER'S SURNAME  FIRST NAME  MIDDLE NAME  25. MOTHER'S MAIDEN NAME  SURNAME  FIRST NAME	NATANAEL MARZON  OLIVA SONIA CABALTERA					narate sheet if neces	issary)		
OCCUPATION  EMPLOYER/BUSINESS NAME  BUSINESS ADDRESS  TELEPHONE NO.  24. FATHER'S SURNAME  FIRST NAME  MIDDLE NAME  25. MOTHER'S MAIDEN NAME  SURNAME  FIRST NAME  MIDDLE NAME	NATANAEL MARZON  OLIVA SONIA CABALTERA		EE/COURSE	(Cc		HIGHEST LEVEL/ UNITS EARNED (if not graduated)	sary)  YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED	
OCCUPATION  EMPLOYER/BUSINESS NAME  BUSINESS ADDRESS  TELEPHONE NO.  24. FATHER'S SURNAME  FIRST NAME  MIDDLE NAME  25. MOTHER'S MAIDEN NAME  SURNAME  FIRST NAME  MIDDLE NAME  III. EDUCATIONAL BACKGE  26.	NATANAEL  MARZON  OLIVA  SONIA  CABALTERA  ROUND	NAME EXTENSION (JR., SR)  BASIC EDUCATION/DEGRE		(Cc	ontinue on sep	HIGHEST LEVEL/ UNITS EARNED	YEAR	ACADEMIC HONORS	
OCCUPATION  EMPLOYER/BUSINESS NAME  BUSINESS ADDRESS  TELEPHONE NO.  24. FATHER'S SURNAME  FIRST NAME  MIDDLE NAME  25. MOTHER'S MAIDEN NAME  SURNAME  FIRST NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  III. EDUCATIONAL BACKGE  26. LEVEL	NATANAEL  MARZON  OLIVA  SONIA  CABALTERA  ROUND  NAME OF SCHOOL (Write in full)	NAME EXTENSION (JR., SR)  BASIC EDUCATION/DEGRE (Write in full)		PERIOD OF A	ontinue on separation of the s	HIGHEST LEVEL/ UNITS EARNED	YEAR GRADUATED	ACADEMIC HONORS RECEIVED SECOND HONORABLE	
OCCUPATION  EMPLOYER/BUSINESS NAME  BUSINESS ADDRESS  TELEPHONE NO.  24. FATHER'S SURNAME FIRST NAME MIDDLE NAME  25. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME  III. EDUCATIONAL BACKGE  26. LEVEL  ELEMENTARY	NATANAEL  MARZON  OLIVA  SONIA  CABALTERA  ROUND  NAME OF SCHOOL (Write in full)  IGANG ELEMENTARY SCHOOL	BASIC EDUCATION/DEGRE (Write in full)  PRIMARY EDUCAT		PERIOD OF A From 2004	ontinue on separation of the s	HIGHEST LEVEL/ UNITS EARNED	YEAR GRADUATED 2010	ACADEMIC HONORS RECEIVED SECOND HONORABLE MENTION	
OCCUPATION  EMPLOYER/BUSINESS NAME  BUSINESS ADDRESS  TELEPHONE NO.  24. FATHER'S SURNAME  FIRST NAME  MIDDLE NAME  25. MOTHER'S MAIDEN NAME  SURNAME  FIRST NAME  MIDDLE NAME  III. EDUCATIONAL BACKGE  26. LEVEL  ELEMENTARY  SECONDARY  VOCATIONAL /	NATANAEL  MARZON  OLIVA  SONIA  CABALTERA  ROUND  NAME OF SCHOOL (Write in full)  IGANG ELEMENTARY SCHOOL  BAYBAY NATIONAL HIGH SCHOOL	BASIC EDUCATION/DEGRE (Write in full)  PRIMARY EDUCAT HIGH SCHOOL	ION	PERIOD OF A From 2004 2010	ontinue on separation of the s	HIGHEST LEVEL/ UNITS EARNED	YEAR GRADUATED 2010 2014	ACADEMIC HONORS RECEIVED SECOND HONORABLE MENTION N/A	
OCCUPATION  EMPLOYER/BUSINESS NAME  BUSINESS ADDRESS  TELEPHONE NO.  24. FATHER'S SURNAME  FIRST NAME  MIDDLE NAME  25. MOTHER'S MAIDEN NAME  SURNAME  FIRST NAME  MIDDLE NAME  III. EDUCATIONAL BACKGE  26. LEVEL  ELEMENTARY  SECONDARY  VOCATIONAL /  TRADE COURSE	NATANAEL  MARZON  OLIVA  SONIA  CABALTERA  ROUND  NAME OF SCHOOL (Write in full)  IGANG ELEMENTARY SCHOOL  BAYBAY NATIONAL HIGH SCHOOL  N/A	BASIC EDUCATION/DEGRE (Write in full)  PRIMARY EDUCAT HIGH SCHOOL	ION	(Cc PERIOD OF A From 2004 2010 N/A	To 2010 2014 N/A	HIGHEST LEVEL/ UNITS EARNED	YEAR GRADUATED  2010  2014  N/A	ACADEMIC HONORS RECEIVED SECOND HONORABLE MENTION N/A  N/A  LOCAL GOVERNMENT	
OCCUPATION  EMPLOYER/BUSINESS NAME  BUSINESS ADDRESS  TELEPHONE NO.  24. FATHER'S SURNAME  FIRST NAME  MIDDLE NAME  25. MOTHER'S MAIDEN NAME  SURNAME  FIRST NAME  MIDDLE NAME  III. EDUCATIONAL BACKGE  26. LEVEL  ELEMENTARY  SECONDARY  VOCATIONAL /  TRADE COURSE  COLLEGE	NATANAEL  MARZON  OLIVA  SONIA  CABALTERA  ROUND  NAME OF SCHOOL (Write in full)  IGANG ELEMENTARY SCHOOL  BAYBAY NATIONAL HIGH SCHOOL  N/A  VISAYAS STATE UNIVERSITY  CEBU INSTITUTE OF TECHNOLOGY UNIVERSITY	BASIC EDUCATION/DEGRE (Write in full)  PRIMARY EDUCAT  HIGH SCHOOL  N/A  BS COMPUTER SCIE	ION ENCE PUTER SCIENCE	PERIOD OF A From 2004 2010 N/A 2015	To 2010 2014 N/A 2020 present	HIGHEST LEVEL/ UNITS EARNED	YEAR GRADUATED  2010  2014  N/A  2020	ACADEMIC HONORS RECEIVED SECOND HONORABLE MENTION N/A  N/A  LOCAL GOVERNMENT UNIT SCHOLAR	

## CONTROL SERVICE EL COURTY    CONTROL OF THE PROPERTY OF THE PROPERTY										
### ORDINARY STATE   COMPANIES   COMPANIES					0.22.02				LICENCE (#	nnlicable)
DRIVER'S LICENSE NIA 0,300,2002  AND TRANSPORTATION OFFICE, BAYBAY H12-29-401568 0592-201  Continue on aquate shared if measurage;  V. WORK EXPERIENCE  Transport representation of the processory  Post Intelligence of the processory of the processor of t	SPECIAL LAWS/ CES/ CSEE RATING (If Applicable)		EXAMINATION /	EXAMINATION / PLACE OF EXAMINATION / (		RMENT		Date of		
V. WORK ExpectableCE	Ditiv			N/A				H12-20-001569	05/29/2024	
V. WORK EXPERIENCE         Controlled private among months and controlled private among months and private processing.         Secretary and private										
V. WORK EXPERIENCE         Controlled private among months and controlled private among months and private processing.         Secretary and private										
V. WORK EXPERIENCE         Controlled private among months and controlled private among months and private processing.         Secretary and private										
V. WORK EXPERIENCE         Controlled private among months and controlled private among months and private processing.         Secretary and private										
V. WORK EXPERIENCE         Controlled private among months and controlled private among months and private processing.         Secretary and private										
V. WORK EXPERIENCE         Controlled private among months and controlled private among months and private processing.         Secretary and private										
V. WORK EXPERIENCE         Controlled private among months and controlled private among months and private processing.         Secretary and private										
thocked solvate employment. Start from your recent work) Description of divines should be indicated in the attached Work Exceptions and Start from your recent work) Description of divines should be indicated in the attached Work Exceptions and Start from Your Property of the Attached secretary of the At	V WORK F	VBEDIENOE		(Con	ntinue on separate sheet	if necessary)				
POSITION TILE			nt. Start from your recent	work) Description	n of duties should be	e indicated in the attached	d Work Expe	rience sheet.		
From   To   (Wite in full Conce abservate)   (Wite in full Conce			POSITION T	ITLE	DEPARTMENT / AGI	ENCY / OFFICE / COMPANY	MONTHLY	GRADE (if	STATUS OF	
Saybay   Control   Contr			(Write in full/Do not	abbreviate)				(Format "00-0")/	APPOINTMENT	
04/01/2021 06/30/2022 Part-time Instructor Visayas State University 15,000-20,000 N/A PART-TIME Y	09/29/2020	04/01/2021	Staff				8,000.00	N/A	CONTRACTUAL	Y
	04/01/2021	06/30/2022	Part-time Ins	tructor			15,000-20,000	N/A	PART-TIME	Y
SIGNATURE DATE August 1, 2022				(Cor	ntinue on separate sheet	if necessary)				
CS FORM 212 (Revised 2017), Page 2 o	SIGNA	TURE	- durant			DATE	Augus			

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S							
29. NAME & ADDRESS OF O (Write in ful		INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS		POSITION / NATURE OF WORK	
(Wite iii lai		From To					
N/A							
		ntinue on separate :		)			
VII. LEARNING AND DEVELOPMENT (L&D)	INTERVENTIONS/TRAINING PA	ROGRAMS AT	TENDED				
30. TITLE OF LEARNING AND DEVELOPMENT INTI (Write in ful		ATTEN	DATES OF IDANCE d/yyyy) To	NUMBER OF HOURS	Type of LD ( Managerial/     Supervisory/     Technical/etc)  Type of LD CONDUCTED/ SPONSORED BY (Write in full)		
Teaching History in the 21st Century		7/2/2022	7/2/2022	2.0		Kaagapay Teacher Support	
Google Workspace for Education   Fundament	als Training Program	6/28/2022	6/30/2022	9.0		Kaagapay Teacher Support	
						Visayas State University, College of	
Typhoon Awareness and Calamity Readiness  Application of Virtual Reality to Agriculture, La	and Use and Transportation	6/29/2022	6/29/2022	2.0		Engineering	
Plans	and ooc and Transportation	6/22/2022	6/22/2022	3.0		Visayas State University	
2nd SEAMEO-New Zealand Master Class on Di	gital Revolution for Education	5/24/2022	5/24/2022	2.0		SEAMEO	
Basic Graphic Editing Using Canva		3/3/2022	3/4/2022	8.0		Department of Information and Communications Technology - MIMAROPA	
Anti-Cyber Bullying and Cyber Libel Webinar		10/29/2021	10/29/2021	3.0		University of Cebu	
Choosing the Right Journal for Your Research	Articles Webinar	10/5/2021	10/5/2021	2.0		Elsevier	
Self-Care Practices During Distance Learning	Webinar	9/30/2021	9/30/2021	4.0		Franciscan College of the Immaculate	
SEAMEO-New Zealand Master Class on Educa	tion Technology and Digital	9/30/2021	9/30/2021	2.0		Conception SEAMEO	
Security  Adapting Effective Study Habits in the New No	rmal Wahinar	8/27/2021	8/27/2021	4.0		Franciscan College of the Immaculate	
						Conception	
Seminar/Lecture on Intellectual Property Right	s (IPR)	8/26/2021	8/26/2021	4.0		Visayas State University	
	(Cor	ntinue on separate :	sheet if necessary	)			
VIII. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES	32. NO	N-ACADEMIC DISTIN (Write	NCTIONS / RECOG e in full)	NITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
BASIC PROGRAMMING		N/A	1			N/A	
TEACHING							
READING							
PLAYING GUITAR							
EDITING VIDEOS AND PHOTOS							
PHOTOGRAPHY							
SIGNATURE	(Cor	ntinue on separate s	sheet if necessary		ATE	August 1, 2022	
SIGNATURE	oder Burk.			DA	1/E	August 1, 2022  CS FORM 212 (Revised 2017). Page 3 of 4	

<ul> <li>Are you related by consanguinity or affinity to the appointir chief of bureau or office or to the person who has immedia Bureau or Department where you will be apppointed,</li> <li>a. within the third degree?</li> <li>b. within the fourth degree (for Local Government Unit - Canal Content of the cont</li></ul>	☐ YES ☑ NO ☐ YES ☑ NO If YES, give details:					
35. a. Have you ever been found guilty of any administrative o	YES [	☑ NO :				
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 by any court or tribunal?	☐ YES ☑ NO If YES, give details:					
37. Have you ever been separated from the service in any of t retirement, dropped from the rolls, dismissal, termination, out (abolition) in the public or private sector?		☐ YES ☑ NO If YES, give details:				
38. a. Have you ever been a candidate in a national or local el Barangay election)?	ection held within the last year (except	☐ YES ☑ NO If YES, give details:				
b. Have you resigned from the government service during 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 permanen	☐ YES ☑ NO If YES, give details (country):					
<ul> <li>40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972)</li> <li>a. Are you a member of any indigenous group?</li> <li>b. Are you a person with disability?</li> <li>c. Are you a solo parent?</li> </ul>	☐ YES If YES, please specify ☐ YES If YES, please specify ☐ YES If YES, please specify	ID No:				
41. REFERENCES (Person not related by consanguinity or affinity to applican	t /appointee)					
NAME	ADDRESS	TEL. NO.				
NOEL N. SOSMEÑA	BRGY. MAKINHAS, BAYBAY CITY, LEYTE	9757707051				
MARGIE J. LIBOT	BRGY. HIGULOAN, BAYBAY CITY, LEYTE	9514644895				
JHOEMIEL M. CALIXTRO	BRGY. LIBHO, MERIDA, LEYTE	9678309154				
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: DRIVER'S LICENSE  ID/License/Passport No.: H12-20-001569	The street in th					
Date/Place of Issuance: 03/03/2020		Right Thumbmark				
	Date Accomplished					
SUBSCRIBED AND SWORN to before me this	, affiant exhibit Person Administering Oat		government ID as indicated above.			