CS	Form	No.	212
Rev	ised 20	17	

PERSONAL DATA SHEET

WARNING: Any misrepresentation made in the Personal Data Sheet and the Work Experience Sheet shall cause the filing of administrative/criminal case/s against the person READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM. 1 CS ID No. Print legibly. Tick appropriate boxes [] and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. (Do not fill up. For CSC use only 2. SURNAME Lajara NAME EXTENSION (JR., SR) FIRST NAME Eisyn Von Federico MIDDLE NAME 3. DATE OF BIRTH 04/04/1992 16. CITIZENSHIP (mm/dd/yyyy) 4 PLACE OF BIRTH Tacloban City, Leyte If holder of dual citizenship Pls. indicate country: please indicate the details 5. SEX Male 17. RESIDENTIAL ADDRESS Block 11 Lot 10 6 CIVIL STATUS Single ise/Block/Lot No **NHA Baras** Subdivision/Village Barangay Palo Levte 7. HEIGHT (m) 1.73 City/Municipalit Province 8. WEIGHT (kg) 70 ZIP CODE 6501 18. PERMANENT ADDRESS No. 27 Zamora Street 9. BLOOD TYPE A-House/Block/Lot No Street Poblacion Zone 1 10. GSIS ID NO. N/A Subdivision/Village Barangay Javier Leyte 11. PAG-IBIG ID NO 1211-4130-8444 City/Municipality 12. PHILHEALTH NO 07-025732086-1 ZIP CODE 13. SSS NO. 34-5058205-2 19. TELEPHONE NO. N/A 14. TIN NO 453-703-729 20. MOBILE NO 09053144609 15. AGENCY EMPLOYEE NO. N/A 21. E-MAIL ADDRESS (if any) eisynvonlajara@gmail.com 22. SPOUSE'S SURNAME N/A 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) N/A FIRST NAME N/A N/A N/A MIDDLE NAME N/A N/A N/A OCCUPATION N/A N/A N/A EMPLOYER/BUSINESS NAME N/A N/A N/A BUSINESS ADDRESS N/A N/A N/A TELEPHONE NO. N/A N/A N/A 24. FATHER'S SURNAME Lajara N/A NAME EXTENSION (JR., SR) N/A FIRST NAME Ervon Daniel N/A N/A MIDDLE NAME Bangoy N/A N/A 25. MOTHER'S MAIDEN NAME Marieta Tan Cua N/A N/A SURNAME Lajara N/A N/A FIRST NAME Marieta N/A MIDDLE NAME Cua (Continue on separate sheet if necessary) SCHOLARSHIP/ ACADEMIC HIGHEST LEVEL UNITS EARNED PERIOD OF ATTENDANCE NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE LEVEL (Write in full) (Write in full) GRADUATED HONORS RECEIVED From To ELEMENTARY Sacred Heart College Elementary 1999 2005 Graduated 2005 N/A Sacred Heart College SECONDARY High School N/A 2005 2009 Graduated 2009 N/A N/A N/A N/A NIA NIA N/A TRADE COURSE Bachelor of Arts in Mass Far Eastern University COLLEGE 2012 2015 Graduated 2015 N/A Communication NIA GRADUATE STUDIES N/A N/A N/A NIA N/A N/A rate sheet if necessary) SIGNATURE DATE

' CAREE		080 (BOARD/ BAR) UNDER	RATING	DATE OF				LICENSE (if ap	oplicable)
SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE		(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CON		RMENT	NUMBER	Date o Validity	
C	ivil Service - P	rofessional	81.48	08/07/2022	Leyte Nation	al High Scho	ol	N/A	N/A
	N/A	1680 (N/A	N/A	N/A			N/A	N/A
	N/A		N/A	N/A	N/A			N/A	N/A
	N/A		N/A	N/A	N/A		N/A	N/A	
	N/A		N/A	N/A	N	ΙΑ		N/A	N/A
	N/A		N/A	N/A				N/A	N/A
	N/A		N/A	N/A				N/A	N/A
				ntinue on separate sheet i					
	XPERIENCE ate employmen	it. Start from your rece	nt work) Descripti	on of duties should l	pe indicated in the attac	hed Work E	xperience she	eet	
INCLU	SIVE DATES n/dd/yyyy)	POSITION 1			NCY / OFFICE / COMPANY	MONTHLY	SALARY/ JOB/ PAY GRADE (if	STATUS OF	GOVT
From	To	(Write in full/Do not	abbreviate)	(Write in full/	Do not abbreviate)	SALARY	applicable)& STEP (Format *00-0*)/ INCREMENT	APPOINTMENT	SERVIC (Y/ N)
3/4/2024	PRESENT	Tourism Operation	ons Officer I	Department of To	urism Regional Office VIII	P27,000.00	N/A	Job Order	Υ
9/18/2023	2/29/2024	Administrative .	Assistant I	DSWD - Crisis I	ntervention Section	P18,620.00	N/A	Contract of Service	Υ
7/22/2022	12/16/2022	Senior Title Relea	se Specialist	/ Megawor	ce and Services Group ld Corporation	P24,000.00	N/A	Probationary	N
2/16/2019	02/06/2022	Communication	Supervisor	Front Office Department / Greevener		AED 2,500.00	N/A	Regular	N
11/05/2017	01/26/2019	Telephone O	perator	Front Office Departs Hotel - Dubai, U	AED 1,400.00	N/A	Regular	N	
08/17/2015	08/30/2017	Customer Service F	Representative	Customer Suppo Properties	P15,000.00	N/A	Regular	N	
N/A	N/A	N/A		N/A		N/A	N/A	N/A	N/A
N/A	N/A	N/A		N/A		N/A	N/A	N/A	N/A
N/A	N/A	N/A		N/A		N/A	N/A	N/A	N/A
N/A	N/A	N/A		N/A		N/A	N/A	N/A	N/A
N/A	N/A	N/A		N/A		N/A	N/A	N/A	N/A
N/A	N/A	N/A		N/A		N/A	N/A	N/A	N/A
N/A	N/A	N/A		N/A		N/A	N/A	N/A	N/A
N/A	N/A	N/A		N/A		N/A	N/A	N/A	N/A
N/A	N/A	N/A			N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A			N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A		N/A		N/A	N/A	N/A	N/A
N/A	N/A	N/A		N/A		N/A	N/A	N/A	N/A
N/A	N/A	N/A		N/A		N/A	N/A	N/A	N/A
N/A	N/A	N/A		N/A		N/A	N/A	N/A	N/A
N/A	N/A	N/A		N/A		N/A	N/A	N/A	N/A
N/A	N/A	N/A		N/A		N/A	N/A	N/A	N/A
N/A	N/A	N/A	W	N/A		N/A	N/A	N/A	N/A
N/A	N/A	N/A	im I	N/A		N/A	N/A	N/A	N/A
N/A	N/A	N/A		N/A		N/A	N/A	N/A	N/A
N/A	N/A	N/A		N/A		N/A	N/A	N/A	N/A
N/A	N/A	N/A		N/A		N/A	N/A	N/A	N/A
N/A	N/A	N/A	/00	ntinue on separate sheet i	N/A fnecessary)	N/A	N/A	N/A	N/A
SIGNA	TURE		-	and on ouper die anett i	DATE		12	Joi	

9. NAME & ADDRESS OF		INCLUSIVE DATES						
29. NAME & ADDRESS OF ORGANIZATION (Write in full)		(mm/dd/yyyy) From To		NUMBER OF HOURS		POSITION / NATURE OF WORK		
N/A		N/A	N/A	N/A		N/A		
N/A	N/A	N/A	N/A		N/A			
N/A	N/A	N/A	N/A		N/A			
N/A	454 14, 56 1	N/A	N/A	N/A	N/A			
N/A	N/A	N/A	N/A	N/A				
N/A				N/A N/A N/A				
N/A		N/A	N/A	N/A	N/A			
N/A	(Ce	ontinue on separate				N/A		
I. LEARNING AND DEVELOPMENT (L&)) INTERVENTIONS/TRAINING PR	News International Actions	NAME OF TAXABLE PARTY.					
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)			DATES OF DANCE d/yyyy)	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)		
GENDER SENSITIVIT	Y TRAINING	03/25/2024	03/26/2024	16	Professional	Department of Tourism Regional Office V		
RESPONSIBLE DOCUMENT HANDLING A		11/30/24	11/30/24	8	Technical	(Gender and Development) PRIMAEXCELLENCE Review and Traning		
POLICY TO PRACTICE: STREAMLINING A	DMINISTRATIVE SUPPORT AND	11/30/24	11/30/24	3	Technical	Center Knowledge Horizon PH		
IMPLEMENTA Admin Assistance: Office Etiquette Esse		1/12/2024	1/12/2024	N/A	N/A	Virtual Mentors		
N/A		N/A	N/A	N/A	N/A	N/A		
N/A		N/A	N/A	N/A	N/A	N/A		
N/A		N/A	N/A	N/A	N/A	N/A		
N/A		N/A	N/A	N/A	N/A	N/A		
N/A		N/A	N/A	N/A	N/A	N/A		
N/A		N/A	N/A	N/A	N/A	N/A		
N/A		N/A	N/A	N/A	N/A	N/A		
N/A		N/A	N/A	N/A	N/A	N/A		
N/A		N/A	N/A	N/A	N/A	N/A		
N/A		N/A	N/A	N/A	N/A	N/A		
N/A		N/A	N/A	N/A	N/A	N/A		
N/A		N/A	N/A	N/A	N/A	N/A		
N/A		N/A	N/A	N/A	N/A	N/A		
N/A		N/A	N/A	N/A	N/A	N/A		
N/A		N/A	N/A	N/A	N/A	N/A		
N/A		N/A	N/A	N/A	N/A	N/A		
N/A		N/A	N/A	N/A	N/A	N/A		
III. OTHER INFORMATION	(Co	ontinue on separate	sheet if necessary	()				
31. SPECIAL SKILLS and HOBBIES	32. NO	N-ACADEMIC DISTII	NCTIONS / RECOG	SNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATIO		
N/A		N/A				N/A		
N/A		N/A N/A				N/A		
N/A	N/A N/A					N/A		
N/A		N/A			N/A			
N/A	N/A			N/A				
N/A		N/A				N/A		
N/A		N/A				N/A		
	(Cc	ontinue on separate	sheet if necessar					
SIGNATURE	Zurie		Di	ATE	1/2 to 1/24 CS FORM 212 (Revised 2017), Page 3			

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 apppointed,							
	a. within the third degree? b. within the fourth degree (for Local Government Unit - Care	V25-276	☑ NO ☑ NO s:					
35	a. Have you ever been found guilty of any administrative offe							
55.	a. Hato you over book loans gailly of any administrative one	☐ 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 ar any court or tribunal?	☐ YES ☑ NO If YES, give details:						
	Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, en (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 election)?	☐ 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 (∞untry):						
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?		YES V NO					
b.	Are you a person with disability?			If YES, please specify: ☐ YES				
C.	Are you a solo parent?	☐ YES ☑ NO If YES, please specify ID No:						
41.	REFERENCES (Person not related by consanguinity or affinity to applicant In	appointee)						
	NAME	ADDRESS	TEL. NO.					
	Mary Anne Reyes	Caloocan City	0917-6700589					
Veronica Sotelo		Pasig City	0917-8252528					
	Donna Sarcia	Valenzuela City	0920-8099932					
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. agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me.								
	overnment Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) EASE INDICATE ID Number and Date of Issuance							
Go	vernment Issued ID: UMID ID							
ID/License/Passport No.: 0111-5082064-7 Signature (Sign-inside the bo			ox)					
Da	te/Place of Issuance: SSS Ayala, Makati City		Right Thumbmark					
SUBSCRIPED AND SWORN to before me this								
SUBSCRIBED AND SWORN to before me this, affial t exhibiting his/her validly issued government ID as indicated above.								
		S. UY						
		31, 2025						
	ALL SECTION OF THE PROPERTY OF THE PARTY OF	2024-01-65 Tacloban City	595 1 11					
		PTR No. 8/5/166, Jan. 2, 2	024. Tacloban Cit	Y				