CS Form No. 212 Revised 2017

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 FOR<u>M.</u> Print legibly. Tick appropriate boxes () d use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE 1. CS ID No. (Do not fill up. For CSC use only) PERSONAL INFORMATION 2. SURNAME GOYO NAME EXTENSION (JR., SR) FIRST NAME JOHN LLOYD MIDDLE NAME BARBAS 3. DATE OF BIRTH 3/26/2002 16. CITIZENSHIP Dual Citizenship (mm/dd/yyyy) by birth by naturalization 4. PLACE OF BIRTH If holder of dual citizenship, Pls. indicate country: please indicate the details. 5. SEX ✓ Male Female 17. RESIDENTIAL ADDRESS √ Single Married 6 CIVIL STATUS House/Block/Lot No. Street Widowed Separated Other/s: Subdivision/Village Barangay 1.61 7. HEIGHT (m) City/Municipality **Province** 8. WEIGHT (kg) 63 ZIP CODE **ANISLAGON** MONTE ALEGRE 18. PERMANENT ADDRESS 9. BLOOD TYPE House/Block/Lot No. Street 10. GSIS ID NO. Subdivision/Village Barangay **MATALOM LEYTE** 11. PAG-IBIG ID NO. 121366623417 City/Municipality Province 12. PHILHEALTH NO. 13-250679611-7 ZIP CODE 13. SSS NO. 19. TELEPHONE NO. N/A 14. TIN NO. 668-380-539-00000 20. MOBILE NO. 09363795709 15. AGENCY EMPLOYEE NO. 21. E-MAIL ADDRESS (if any jl.goyo.@vsu.edu.ph I. FAMILY BACKGROUND DATE OF BIRTH 22. SPOUSE'S SURNAME 23. NAME of CHILDREN (Write full name and list all) (mm/dd/yyyy) NAME EXTENSION (JR., FIRST NAME MIDDLE NAME OCCUPATION **EMPLOYER/BUSINESS NAME BUSINESS ADDRESS** TELEPHONE NO. GOYO 24. FATHER'S SURNAME JR. FIRST NAME **MACARIO GULA** MIDDLE NAME 25. MOTHER'S MAIDEN NAME **BARBAS** SURNAME FIRST NAME **ROWENA** MIDDLE NAME **GATO** (Continue on separate sheet if necessary) II. EDUCATIONAL BACKGROUND SCHOLARSHI PERIOD OF LEVEL/ YEAR 26. NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE P/ ACADEMIC ATTENDANCE LEVEL **UNITS GRADUAT** (Write in full) (Write in full) **HONORS**

EARNED

From

To

ED

RECEIVED

ELEMENTARY	MONTE ALEGRE ELEMENTARY SCHOOL	ELEMENTARY	2008	2014		2014	
SECONDARY	MATALOM NATIONAL HIGH SCHOOL	HIGH SCHOOL	2014	2018		2018	
VOCATIONAL / TRADE COURSE	SAINT JOSEPH COLLEGE	SENIOR HIGH- TVL	2018	2020		2020	
COLLEGE	SAINT JOSEPH COLLEGE	BACHELOR OF ARTS IN PHILOSOPHY	2020	2024		2024	
GRADUATE STUDIES	UNIVERSITY OF SAN JOSE RECOLETOS	MASTERS OF ARTS IN PHILOSOPHY	2025	PRESENT	ON- GOING		
(Continue on separate sheet if necessary)							
SIGNATURE			DATE July 12, 2025		7) Dogg 1 of 4		

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IV CIVII S	ERVICE ELIG	AIRII ITV							
								LICENSE (if ap	anliachla)
	SPECIAL LA	1080 (BOARD/BAR) UNDER WS/ CES/ CSEE ITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINA	TION / CONFER	RMENT	NUMBER	Date of Validity
	N/A	4							
			(Cor	stinus on congrete cheet	if necessary)				
V WORK	XPERIENCE		(Cor	ntinue on separate sheet	n necessary)				
		ent. Start from your recen	nt work) Description	on of duties should	be indicated in the attacl	hed Work Ex		et.	
	JSIVE DATES m/dd/yyyy) To	POSITION T (Write in full/Do not			ENCY / OFFICE / COMPANY /Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/N)
		N/A							
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	(Continue on separate sheet if necessary)						
SIGNA	TUDE			DATE		UU V 40 0005	
SIGNA	IUKE			DATE		JULY 12, 2025	
SIGNA	TURE			DATE		JULY 12, 2025	

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VI. VOLUNTARY WORK OR	RINVOLVEMENT	N CIVIC / NON-GOVERNMENT	/ PEOPLE / V	OLUNTARY (DRGANIZATIC	N/S	
29. NA	NAME & ADDRESS OF OR	GANIZATION	INCLUSIVE DATES				
29	(Write in full)		(mm/de	d/yyyy) To	NUMBER OF HOURS		POSITION / NATURE OF WORK
N/A			Hom	10			
		(Con	ntinue on separate s	heet if necessary			
		INTERVENTIONS/TRAINING P	ROGRAMS AT	TENDED		agarial positions	
(Start from the most recent L&D/train	ing program and includ	e only the relevant L&D/training taken fo			niet/Executive/ivan	ageriai positions)	
30. TITLE OF LEARNING AND	D DEVELOPMENT INTE (Write in full)	RVENTIONS/TRAINING PROGRAMS	INCLUSIVE ATTEN (mm/de	DANCE	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/	CONDUCTED/ SPONSORED BY (Write in full)
			From	То	-	Technical/etc)	
N/A							
		(Con	ntinue on separate s	heet if necessary)		
VIII. OTHER INFORMATION	V						
31. SPECIAL SKILLS an	d HOBBIES	32. NON	I-ACADEMIC DISTIN (Write	CTIONS / RECOG	INITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)

	(Continue on separate sheet if necessary))	
SIGNATURE		DATE	JULY 12, 2025
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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	e supervision over you in the Office,		☑ NO ☑ NO :	
35.	a. Have you ever been found guilty of any administrative offe	☐ YES ☑ NO If YES, give details:			
	b. Have you been criminally charged before any court?	TYES If YES, give details: Date Filed: Status of Case/s:	☑ NO :		
36.	Have you ever been convicted of any crime or violation of arby any court or tribunal?	☐ YES If YES, give details:	▼ NO		
37.	Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, en out (abolition) in the public or private sector?	YES If YES, give details:	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 (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?		YES If YES, please specify:	✓ NO	
b.	Are you a person with disability?		YES If YES, please specify	✓ NO	
C.	Are you a solo parent?		TYES If YES, please specify	✓ NO	
41.	REFERENCES (Person not related by consanguinity or affinity to applicant	nt /appointee)			
	NAME	ADDRESS	TEL. NO.	ID picture taken within	
				the last 6 months 4.5 cm. X 3.5 cm (passport size)	
				Computer generated or photocopied picture	
42.	I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertine	ent laws, rules and regulations of the	Republic of the	is not acceptable	
	Philippines. I authorize the agency head/authorized representation made in this doctadministrative/criminal case/s against me.	· · · · · · · · · · · · · · · · · · ·		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:				
	(I) (D) (A)				

ID/License/Passport No.:	Signature (Sign inside the box)	
Date/Place of Issuance:	Date Accomplished	Right Thumbmark
SUBSCRIBED AND SWORN to before me this	, affiant exhibiting his/her validly issue	d government ID as indicated above.
	Person Administering Oath	

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