

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 concerned.

READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM.

Print legibly. Tick appropriate boxes (☐) and 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)

I. PERSONAL INFORMATION

2. SURNAME	MORALES		
FIRST NAME	RESYL BEI	NAME EXTENSION (JR., SR) N/A	
MIDDLE NAME	SIMPRON		
3. DATE OF BIRTH (mm/dd/yyyy)	10/02/1999	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:
4. PLACE OF BIRTH	BAYBAY CITY LEYTE	If holder of dual citizenship, please indicate the details.	Philippines ▼
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		
6 CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	<div>N/A R.MAGSAYSAY AVENUE</div> <div>House/Block/Lot No. Street</div> <div>N/A POBLACION ZONE 21</div> <div>Subdivision/Village Barangay</div> <div>BAYBAY LEYTE</div> <div>City/Municipality Province</div> <div>6521</div>
7. HEIGHT (m)	1.52	ZIP CODE	18. PERMANENT ADDRESS
8. WEIGHT (kg)	58		<div>N/A R.MAGSAYSAY AVENUE</div> <div>House/Block/Lot No. Street</div> <div>N/A POBLACION ZONE 21</div> <div>Subdivision/Village Barangay</div> <div>BAYBAY LEYTE</div> <div>City/Municipality Province</div> <div>6521</div>
9. BLOOD TYPE	N/A		
10. GSIS ID NO.	N/A		
11. PAG-IBIG ID NO.	N/A		
12. PHILHEALTH NO.	N/A	ZIP CODE	
13. SSS NO.	06-4886383-2	19. TELEPHONE NO.	N/A
14. TIN NO.	652104159	20. MOBILE NO.	09513984416
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	resylbei@gmail.com

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	N/A	23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
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FIRST NAME	N/A	NAME EXTENSION (JR., SR) N/A	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	MORALES						
FIRST NAME	JOEL	NAME EXTENSION (JR., SR) N/A					
MIDDLE NAME	CRUZ						
25. MOTHER'S MAIDEN NAME	CLARITA SERATO SIMPRON						
SURNAME	MORALES						
FIRST NAME	CLARITA						
MIDDLE NAME	SIMPRON		(Continue on separate sheet if necessary)				
III. EDUCATIONAL BACKGROUND							
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE		HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUA TED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	CARLOS P GARCIA ELEM. SCHOOL	ELEMENTARY	2006	2012	GRADUATED	2012	SALUTATORIAN
SECONDARY	BAYBAY NATIONAL & BAYBAY CITY SENIOR HIGH SCHOOL	JUNIOR & SENIOR HIGH SCHOOL	2012	2018	GRADUATED	2018	WITH HONORS
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SECONDARY EDUCATION MAJOR IN MATHEMATICS	2018	2023	GRADUATED	2023	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		DATE			CS FORM 212 (Revised 2017), Page 1 of 4		

IV. CIVIL SERVICE ELIGIBILITY

27.	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
					NUMBER	Date of Validity
	LET (LICENSURE EXAMINATION FOR TEACHERS)	87.20%	03/17/2024	TACLOBAN CITY	2198393	10/02/2027

NOTHING FOLLOWS

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.

28.	INCLUSIVE DATES (mm/dd/yyyy)		POSITION TITLE (Write in full/Do not abbreviate)	DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)
	From	To						
	N/A	N/A						

NOTHING FOLLOWS

[illegible]

<i>(Continue on separate sheet if necessary)</i>							
SIGNATURE			DATE		CS FORM 212 (Revised 2017), Page 2 of 4		

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S[illegible]

(Continue on separate sheet if necessary)

VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

[illegible]

<i>(Continue on separate sheet if necessary)</i>					
VIII. OTHER INFORMATION					
31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)			33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
N/A	N/A			N/A	
<i>(Continue on separate sheet if necessary)</i>					
SIGNATURE		DATE		CS FORM 212 (Revised 2017), Page 3 of 4	

<p>34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to the chief of bureau or office or to the person who has immediate supervision over you in the Office, Bureau or Department where you will be appointed,</p> <p>a. within the third degree?</p> <p>b. within the fourth degree (for Local Government Unit - Career Employees)?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>
<p>35. a. Have you ever been found guilty of any administrative offense?</p> <p>b. Have you been criminally charged before any court?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>
	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p> Date Filed: _____</p> <p> Status of Case/s: _____</p>
<p>36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>
<p>37. Have you ever been separated from the service in any of the following modes: resignation, retirement, dropped from the rolls, dismissal, termination, end of term, finished contract or phased out (abolition) in the public or private sector?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>
<p>38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?</p> <p>b. Have you resigned from the government service during the three (3)-month period before the last election to promote/actively campaign for a national or local candidate?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p> If YES, give details: _____</p>
	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p> If YES, give details: _____</p>
<p>39. Have you acquired the status of an immigrant or permanent resident of another country?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details (country): _____</p>
<p>40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), please answer the following items:</p> <p>a. Are you a member of any indigenous group?</p> <p>b. Are you a person with disability?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p>

c. Are you a solo parent?	If YES, please specify ID No: _____ <input type="checkbox"/> YES
If YES, please specify ID No: _____	

41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)		
NAME	ADDRESS	TEL. NO.
SHERAMIE CENO	BRGY. PICAS SUR ABUYOG LEYTE	9660212272
ESTEVIN QUILLA	SOGOD SOUTHERN LEYTE	9367650688

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.

ID picture taken within the last 6 months
3.5 cm. X 4.5 cm
(passport size)

With full and handwritten name tag and signature over printed name

Computer generated or photocopied picture is not acceptable

PHOTO

Right Thumbmark

Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) <i>PLEASE INDICATE ID Number and Date of Issuance</i>	
Government Issued ID: PROFESSIONAL IDENTIFICATION CARD	
ID/License/Passport No.: 2198393	
Date/Place of Issuance: ORMOC CITY/06/20/24	

SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.	
Person Administering Oath	