CS Form No. 212					
Revised 2017 PERS	ONAL DATA SHE	ET			
	ation made in the Personal Data Sheet and the W		ause the filing of administrative/	criminal case/s ag	gainst the person concerned.
BEAD THE ATTACHED CHIDS	TO FILLING OUT THE PERSONAL DATA SHEET	T (BDS) BEEODE ACCOMBU	CUINO THE DOS FORM		
READ THE ATTACHED GOIDE	TO FILLING OUT THE PERSONAL DATA SHEET	(FDS) BEFORE ACCOMPLIS	SHING THE PDS FORM.		
	boxes () and use separate sheet if necessary	ary. Indicate N/A if not applic	cable. DO NOT 1. CS ID No.	(D	o not fill up. For CSC use only)
ABBREVIATE.			140.		
I. PERSONAL INFORM					
2. SURNAME FIRST	CATACUTAN				
NAME	IRISH			NAME EXTENSIO	N (JR., SR)
MIDDLE NAME	NECIO				
DATE OF BIRTH (mm/dd/yyyy)	01/19/1998	16. CITIZENSHIP	☑ Filipino □	Dual Citizenship	
(,,,,,,,				□ by birth	□ by naturalization
4. PLACE OF BIRTH	ORMOC CITY, LEYTE	If holder of dual citizen	nship,	Pls. indicat	e country:
	,	please indicate the de	ntaile		,
5. SEX	☑ Male ☐ Female	picase indicate the de	5.0		•
6 CIVIL STATUS	☑ Single ☐ Married	17. RESIDENTIAL ADDRESS	N/A		ZONE 5
	☐ Widowed ☐ Separated	, J.DINEGO	House/Block/Lot No.	1	Street
	□ Other/s:		N/A Subdivision/Village		COGON
	1.65m	1	BAYBAY CITY		Barangay LEYTE
7. HEIGHT (m)			City/Municipality		Province
8. WEIGHT (kg)	71kg	ZIP CODE		6521	
	- ··· ·				
9. BLOOD TYPE	0	18. PERMANENT	N/A		ZONE 5
		ADDRESS	1471		
	N/A		House/Block/Lot No.		Street
10. GSIS ID NO.	N/A		N/A		COGON
		<u> </u>	Subdivision/Village		Barangay
11. PAG-IBIG ID NO.	121270291749		BAYBAY CITY		LEYTE Province
			City/Municipality		Province
12. PHILHEALTH NO.	N/A			6521	
		ZIP CODE			
13. SSS NO.	N/A	19. TELEPHONE NO.		N/A	
14. TIN NO.	723-427551	20. MOBILE NO.		09187375442	
 AGENCY EMPLOYEE NO. 	N/A	21. E-MAIL ADDRESS (if any)	irishcatad	cutan98@gma	ail.com
II. FAMILY BACKGRO	OUND				
22. SPOUSE'S SURNAME	N/A		 NAME of CHILDREN (Write for all) 	ull name and list	DATE OF BIRTH (mm/dd/yyyy)
		luur 5.e			
FIRST NAME	N/A	NAME EXTENSION (JR., SR)	N/A		N/A
MIDDLE NAME	N/A		N/A		N/A
OCCUPATION	N/A		N/A	-	N/A
	<u> </u>				
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	CATACUTAN		N/A		N/A
FIRST NAME					
	BERNIE	N/A	N/A		N/A
•	l				

MIDDLE NAME	TORRES			N/A			N/A		
25. MOTHER'S MAIDEN NAME	ME				N/A	N/A			
SURNAME FIRST NAME	NECIO			N/A				N/A	
	ANGELINA			WA				N/A	
MIDDLE NAME	OMEGA			(Continue on separate sheet if			necessary)		
III. EDUCATIONAL BA	ACKGROUND								
26. LEVEL	NAME OF SCHOOL (Write in full)	EDUCATION/DEGREE/CO		ATTEN	DD OF DANCE	HIGHEST LEVEL/ UNITS EARNED	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED	
ELEMENTARY	BAYBAY I CENTRAL SCHOOL	PRIMARY EDUCATION		2004	To 2010	(if not graduated)	2010	N/A	
SECONDARY	BAYBAY NATIONAL HIGH SCHOOL	HIGH SCHOOL		2010	2014	N/A	2014	N/A	
VOCATIONAL / TRADE COURSE	PALERMO HOTEL INSTITUTE OF TOURISM AND HOSPITALITY, INC.	FOOD AND BEVERAGE S	ERVICES	2019	2019	N/A	2019	N/A	
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SECON EDUCATION MAJOR IN MAPE	2014	2018	N/A	2018	N/A		
GRADUATE STUDIES	N/A	N/A		N/A	N/A	N/A	N/A	N/A	
	(Continu	ue on separate sheet if nece	essary)						
SIGNATURE	Profolm/		DATE s		Se	September 7, 2022			

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	SERVICE E	LIGIBILITI							
27. CAREER	SERVICE/ RA 10	80 (BOARD/ BAR) UNDER		DATE OF				LICENSE (if a	pplicable)
	SPECIAL ARANGAY ELI CENSE	LAWS/ CES/ CSEE GIBILITY / DRIVER'S		EXAMINATION / CONFERMENT	PLACE OF EXAMINA	TION / CONF	ERMENT	NUMBER	Date of Validity
LICEN	NSURE EXAN TEACHI	IINATION FOR ERS	83.4	SEP. 30, 2018	TACLOE	BAN CITY		1706069	1/4/2022
	N/A N/A N/A			N/A					
	N/A		N/A	N/A	N/A			N/A	
	N/A		N/A	N/A	N	N/A		N/A	
	N/A		N/A	N/A	N	/A		N/A	
	N/A		N/A	N/A	N	N/A		N/A	
	N/A				N/A		N/A		
	K EXPERIEN	CE	N/A	N/A N/A (k) Description of			the attach		erience
(Include p sheet. 28. INCLU	X EXPERIEN rivate emplo	CE		N/A	N f duties should be in		SALARY/ JOB/		erience
(Include p sheet. 28. INCLU	K EXPERIEN	CE	our recent wor	N/A	f duties should be in		SALARY/ JOB/ PAY GRADE (if applicable)& STEP		GOV'T SERVICE (Y/N)
(Include p sheet. 28. INCLU	X EXPERIEN rivate emplo	CE yment. Start from y POSITION TIT	Our recent wor TLE abbreviate)	N/A rk) Description of DEPARTMENT / AG (Write in ful)	f duties should be in	dicated in	SALARY/ JOB/ PAY GRADE (if applicable)&	ed Work Exp	GOV'T SERVICE
(Include p sheet. 28. INCLU (mr From	C EXPERIEN rivate emplo	CE yment. Start from y POSITION TIT (Write in full/Do not	Our recent wor	N/A k) Description of DEPARTMENT / AG (Write in full INSTITUTE O	f duties should be in ENCY / OFFICE / COMPANY //Do not abbreviate)	dicated in	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)
(Include p sheet. 28. INCLU (mr 8/1/2019 1/20/2020	C EXPERIEN rivate emplo SIVE DATES n/dd/yyyy) To 12/13/2019 5/22/2020	CE yment. Start from y POSITION TIT (Write in full/Do not	TLE abbreviate) TRUCTOR	DEPARTMENT / AG (Write in full INSTITUTE O	f duties should be in ENCY / OFFICE / COMPANY //Do not abbreviate) F HUMAN KINETICS	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT N/A	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)
(Include p sheet. 28. INCLU (mr From 8/1/2019 1/20/2020 08/13/2020	C EXPERIEN rivate emplo SIVE DATES n/dd/yyyy) To 12/13/2019 5/22/2020	CE yment. Start from y POSITION TII (Write in full/Do not PART-TIME INS	TLE abbreviate) TRUCTOR TRUCTOR TRUCTOR	DEPARTMENT / AG (Write in ful INSTITUTE O	f duties should be in ENCY / OFFICE / COMPANY //Do not abbreviate) F HUMAN KINETICS F HUMAN KINETICS	MONTHLY SALARY N/A	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format '00-0')/ INCREMENT N/A	STATUS OF APPOINTMENT SEMESTRAL SEMESTRAL	GOV'T SERVICE (Y/ N) N/A
(Include p sheet. 28. INCLU (mr	(EXPERIEN rivate emplo) SIVE DATES m/dd/yyyy)	POSITION TIT (Write in full/Do not PART-TIME INS	TLE abbreviate) TRUCTOR TRUCTOR TRUCTOR	DEPARTMENT / AG (Write in ful INSTITUTE O	F HUMAN KINETICS	MONTHLY SALARY N/A N/A	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format '00-0')/ INCREMENT N/A N/A	STATUS OF APPOINTMENT SEMESTRAL SEMESTRAL	GOV'T SERVICE (Y/ N) N/A N/A

SIG	GNATURE	(Conti	DATE nue on separate sheet Revised 2017), Page 2 of 4		September 7, 2	2022	
/A	N/A	N/A	N/A if necessary)	N/A	N/A	N/A	N/A
I/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
I/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S							
29. NAME & ADDRESS OF ORGANIZATION (Write in full)		E DATES ld/yyyy)		POSITION / NATURE OF WORK			
	From	То	NUMBER OF HOURS				
MAPEH CLUB	4/6/2015	7/6/2016	N/A	AUDITOR			
MAPEH CLUB	7/6/2016	10/6/2017	N/A	SECRETARY			
BAYBAY YOUTH LEADERS COUNCI	L 7/6/2017	9/6/2018	N/A	P.I.O.			
SK FEDERATION- BAYBAY CITY CHAP	TER 1/6/2018	PRESENT	N/A	SECRETARY			

INSTITUTE OF HUMAN	I KINETICS	8/5/2019	05/22/2020	N/A		SECRETARY
N/A		N/A	N/A	N/A		N/A
N/A	(Continue o	N/A n separate sheet if	N/A necessary)	N/A	N/A	
VII. LEARNING AND DEVELOPMEN (Start from the most recent L&D/training program a	NT (L&D) INTERVENTION	S/TRAINING	G PROGRA			e/Managerial positions)
,	,		DATES OF			
^{30.} TITLE OF LEARNING AND DEVELOPMENT INTE (Write in ful	RVENTIONS/TRAINING PROGRAMS I)	ATTENI (mm/c	DANCE ld/yyyy)	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
OUTCOMES-BASED TEACHING AND		From 1/31/2020	To 1/31/2020	8 HRS	TECHNICAL	INSTITUTE OF HUMAN KINETICS
WORKSHOP WORKSHOP ON CRAFTING THE SYLL		10/8/2020	10/8/2020	8 HRS	TECHNICAL	VISAYAS STATE UNIVERSITY
COURSES N/A		N/A	N/A	N/A	N/A	N/A
N/A		N/A	N/A	N/A	N/A	N/A
N/A		N/A	N/A	N/A	N/A	N/A
N/A		N/A	N/A	N/A	N/A	N/A
N/A		N/A	N/A	N/A	N/A	
N/A		N/A	N/A	N/A	N/A	N/A
N/A		N/A	N/A	N/A	N/A	N/A N/A
N/A		N/A	N/A	N/A	N/A	N/A
N/A		N/A	N/A	N/A	N/A	N/A
N/A		N/A	N/A	N/A	N/A	N/A
N/A		N/A	N/A	N/A	N/A	N/A
N/A		N/A	N/A	N/A	N/A	N/A
N/A		N/A	N/A	N/A	N/A	N/A
N/A		N/A	N/A	N/A	N/A	N/A
N/A		N/A	N/A	N/A	N/A	N/A
N/A		N/A	N/A	N/A	N/A	N/A
N/A		N/A	N/A	N/A	N/A	N/A
N/A		N/A	N/A	N/A	N/A	N/A
N/A		N/A	N/A	N/A	N/A	N/A
	(Continue on	separate sheet	if necessary)			
VIII. OTHER INFORMATION	NON AGAIN	EMIC DISTINCT	IONS / RECOGNI	TION		MEMBERSHIP IN
31. SPECIAL SKILLS and HOBBIES	NON-ACADI		e in full)	HON		ASSOCIATION/ORGANIZATION (Write in full)
SWIMMING MEN ASST. COACH		N/A	4			N/A
DESIGNING		N/A	A			N/A
LETTERING		N/A	A			N/A
DANCING		N/A	A			N/A
COMPUTER LITERATE		N/A	4			N/A
N/A		N/A	4			N/A
N/A	(Continue	N/A e on separate sh	A leet if necessary)		N/A
SIGNATURE	(Prof.	ofm/			A <i>TE</i>	September 7, 2022

34. Are you related by consanguinity or affinity to		□ YES ☑ NO	
recommending authority, or to the chief of but person who has immediate supervision over		□ YES ☑ NO	
Department where you will be apppointed, a	•	If YES, give details:	
b. within the fourth degree (for Local Govern			
	deniniatrativa affanaa?		
35. a. Have you ever been found guilty of any ac	aministrative offense?	□ 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 of	or violation of any law, decree,	☐ YES ☑ NO)
ordinance or regulation by any court or tribu	nal?	If YES, give details:	,
37. Have you ever been separated from the serv	rice in any of the following	□ YES ☑ NO	
modes: resignation, retirement, dropped from		If YES, give details:	
termination, end of term, finished contract or public or private sector?	r phased out (abolition) in the		
38. a. Have you ever been a candidate in a nation	onal or local election held within	□ YES ☑ NO)
the last year (except Barangay election)?		If YES, give details:	
b. Have you resigned from the government s		□ YES ☑ No	0
month period before the last election to pron national or local candidate?	note/actively campaign for a	If YES, give details:	
39. Have you acquired the status of an immigran	nt or permanent resident of	□ YES ☑ NO)
another country?		If YES, give details (c	
40. Pursuant to: (a) Indigenous People's Act (RA	· · · · · -	□ YES ☑ N	0
Disabled Persons (RA 7277); and (c) Solo Parer		If YES, please specify:	
8972), please answer the following items: a. Al indigenous group?	re you a member of any	☐ YES ☑ No. If YES, please specify ID.	-
inagenous group:		□ YES ☑ N	
b. Are you a person with disability?		If YES, please specify ID	No:
Are you a cale parent?			
c. Are you a solo parent?			
41.REFERENCES (Person not related by consanguinity or aff	finity to applicant /appointee)		The second second
NAME	ADDRESS	TEL. NO.	
PROF. MARY JEAN SAPAN	VSU, BAYBAY, CITY LEYTE	9423679323	
HON. MARK MICHAEL UNLU-CAY	BAYBAY CITY, LEYTE	9355146106	
42. I declare under oath that I have personally ac	complished this Personal Data S	Sheet which is a true	
correct and complete statement pursuant to	the provisions of pertinent laws, r	ules and regulations	
of the Republic of the Philippines. I author verify/validate the contents stated herein.	0 ,		
document and its attachments shall cause the			
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Drive	er's	/	
License, etc.) PLEASE INDICATE ID Number and Date of Issuance		t alm/	
Government Issued ID: PRC		1]	B:
ID/License/Passport No.: 1706069	 		Right Thumbmark
<u> </u>	J		
1			

	Signature (Sign inside the box)	
	September 7, 2022	
Date/Place of Issuance:TACLOBAN CITY,JANUARY 2019		
	Date Accomplished	
SUBSCRIBED AND SWORN to before me this	<u></u>	, affiant exhibiting his/her validly
	issued government ID as indicated above.	
	Person Administering Oath	
	1 013011 Administering Odul	

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