						
CS Form No. 212 Revised 2017					*	
NEVEL BOAY	PERSO	NAL DATA	SH	EET		
READ THE ATTACHED GUIDE	E TO FILLING OUT THE PERSONAL DATA SH	IEET (PDS) BEFORE ACCOMPLIS	SHING TH	E PDS FORM.		
Print legibly. Tick appropriate boxe	s []) and use separate sheet if necessary. Indicate			1. CS ID No.	(Do not fill up. For CSC use only	
I PERSONAL INFORMATIO						
2. SURNAME	ARCILLAS			NAME SYTEM	NSION (JR., SR)	
FIRST NAME	DEXTER			NAME EXTEN	ISION (JR., SR)	
MIDDLE NAME	VILLAMOR	-				
3. DATE OF BIRTH (mm/dd/yyyy)	May 3, 1999	16. CITIZENSHIP		✓ Filipino □ Dual Citi	izenship	
				✓ by birth by naturalization		
4. PLACE OF BIRTH	MATERNITY ORMOC CITY	If holder of dual citizenship,		Pls. ind	dicate country:	
5. SEX	✓ Male Female	please indicate the details.			-	
6 CIVIL STATUS	✓ Single Married	17. RESIDENTIAL ADDRESS		PUROK 4	HAUBON	
	Widowed Separated		Hous	e/Block/Lol No. N/A	Street LINAO	
	Other/s:	=	Sub	divisionVillaga	Barangay	
7. HEIGHT (m)	1.53		Cit	ORMOC y/Municipality	LEYTE Province	
B. WEIGHT (kg)	63	ZIP CODE		8541		
9. BLOOD TYPE	N/A	18. PERMANENT ADDRESS		PUROK 4 e/Block/Lot No.	HAUBON Street	
10. GSIS ID NO.	N/A	1		N/A	LINAO	
11. PAG-IBIG ID NO.	N/A	1	Subdivision/Village ORMOC		Barangay LEYTÉ	
12. PHILHEALTH NO.	N/A	ZIP CODE	City/Municipality 6541		Province	
I3. SSS NO.	34-9364823-8	19. TELEPHONE NO.		N/A		
4. TIN NO.	769-352-515-000	20. MOBILE NO.			+63 927 286 1743	
5. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	dex.arcillas.08@gmail.com			
I. FAMILY BACKGROUND		les v		DOST AND A STATE	DATE OF DIGITIAL AND	
2. SPOUSE'S SURNAME	N/A	NAME EXTENSION (JR., SR)	VAME OF CHIL	DREN (Write full name and list all) N/A	DATE OF BIRTH (mm/dd/yyyy)	
FIRST NAME	N/A	Part District (art on)		IVA	N/A	
MIDDLE NAME	N/A					
OCCUPATION	N/A					
EMPLOYER/BUSINESS NAME	N/A			·		
BUSINESS ADDRESS	N/A					
TELEPHONE NO.	N/A					
4. FATHER'S SURNAME	ARCILLAS					
FIRST NAME	DICKMAR	NAME EXTENSION (JR., SR)				
MIDDLE NAME	PANTA					
5. MOTHER'S MAIDEN NAME						
SURNAME	VILLAMOR					
FIRST NAME	EMMA					

(Continue on separate sheet if necessary) LUMACAD MIDDLE NAME III. EDUGATIONAL BAGKGROUND SCHOLARSHIP/ ACADEMIC HONORS RECEIVED HIGHEST LEVEL/ UNITS EARNED PERIOD OF ATTENDANCE YEAR GRADUATED BASIC EDUCATION/DEGREE/COURSE NAME OF SCHOOL LEVEL (Write in full) (Write in full) (if not graduated) To From ACADEMIC EXCELLENCE GRADUATE 2006 2011 N/A 2011 ELEMENTARY LINAO ELEMENTARY SCHOOL ACADEMIC EXCELLENCE 2015 NIA 2015 SECONDARY LINAO NATIONAL HIGH SCHOOL GRADUATE 2011 VOCATIONAL! GRADUATE AUG. 2019 SEPT. 2019 N/A 2019 WESTERN LEYTE COLLEGE / TESDA NC II COMPUTER SYSTEM SERVICING NC II TRADE COURSE GRADWATE 2019 N/A EASTERN VISAYAS STATE UNIVERSITY BSED - BIOLOGICAL SCIENCES 2015 2019 COLLEGE N/A N/A GRADUATE STUDIES NA N/A N/A N/A N/A (Contique on separate sheet if necessary) G. 2021 SIGNATURE Bucion DATE MAY

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IV. CIVIL SERVICE ELIGIBILITY									
27 CARFER SERVICE/ RA 1080 (BOARD/ BAR) UNDER PATING DATE OF						LICENSE (if a			
SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE		(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT			NUMBER	Date of Validity	
	DRIVER'S LICENSE		N/A	N/A	LAND TRANSPORTATION	ON OFFICE (ORMOC CITY	H03-18-001823	3/5/2023
	PRC LIC	ENSE	N/A	SEPT. 2019	KAPANGIAN ELEMENTARY SCHOOL		CHOOL	1821971	3/5/2022
V W	Veldeller		(Con	finue on separate sheet	if necessary)		a service		
	XPERIENCE ate employme		(work) Description	n of duties simulalit	ie indicated in the attache	d Work Exp			
28. INCLU (mr	JSIVE DATES m/dd/yyyy)	POSITION TI (Write in full/Do not :	ITLE	DEPARTMENT / AGE	ENCY / OFFICE / COMPANY IVDo not abbreviate)	MONTHLY SALARY	SALARY/ JOS/ PAY GRADE (I' applicable)& STEP (Format '00-0")/	STATUS OF APPOINTMENT	GOVT SERVICE (Y/N)
From	To				-		INCREMENT		
6/2/2014	03/27/2014	VOLUNTE STUDENT ASS			DE -CARE	FREE FOOD	N/A	VOLUNTEER	NO
04/04/2016	01/31/2019	STUDENT ASS SPECIAL PROGRA	AM OF THE		OC CITY CAMPUS	25/HR	N/A	CONTRACTUAL	YES
08/23/2016 11/21/2019	05/31/2018	EMPLOYMENT OF OFFICE ST	STUDENTS		OC CITY CAMPUS	328/DAY	N/A	CONTRACTUAL	YES
08/17/2020	07/24/2020			CENSUS OF POPU	NGINEERING SERVICES JLATION AND HOUSING (300/DAY	N/A	CONTRACTUAL	NO YES
	08/17/2020 09/30/2020 CENSUS ENUME		LIVATUR		ATISTICS AUTHORITY	535/DAY	N/A	CONTRACTUAL	TES
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				ntinue on separate sheet	if necessary)				
SIGN	ATURE		ricillet		DATE			, 2021	
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31. SPECIAL SKILLS and HOBBIES 32. NON-ACADEMIC DISTINCTIONS / RECOGNITION COMPUTER LITERATE N/A EVSU OCC - STUDENT TEACHERS ASSOCIATION PERSUASIVE ORAL COMMUNICATION YOUNG SCIENTISTS GUILD HARDWORKING THE GOOD SAMARITAN WORK UNDER LESS SUPERVISION TRUSTWORTHY ACTIVE IN COOPERATING ACTIVITIES SCANNING AND SKIMMING FOR MONITORING [Commune on separate sheef if necessary]	VI. VO	LUNTARY WORK OR INVOLVEMENT		THE RESERVE OF THE PARTY OF THE	Tables - April 18 of the	Y ORGANIZATI	ON/S	
CODE_CARS_I RESCY_COOK_DRINGC CITY	29.			(mm/d	(dd/yyyy)	HUMBER OF HOURS		POSITION / NATURE OF WORK
Combine on appearation of constant THE OF LEARNING AND DESIGNORS FOR THE CHARGE TO STREET THE CONTROL OF THE C	LCDE-CARE / BRGY. COGON, ORMOC CITY				200 HRS	INTERN		
THE CONSTRUCTION DISTRICT AND D					SELIEVIT	200 1110	Herena	
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10 TITLE OF LEARNING AND DEVELOPMENT INTERPOLITIONS PROCESSAGE BY (PRINT SHEET) (PRINT			D) INTERVENTIONS/TRAINING (PROGRAMS AT	GEGNERAL			
**************************************	stratie in	the most recent L4D training program and inclu	de only the relevant L&D/training taken fo			illel/€rocullyc/Mbm	gerial positions)	
COMPUTER SYSTEMS SERVICING NO1 115/2019 D02/2019 300 TECHNICAL D1/2010/ACCEPTED ATTROPRY 2020 CPH 4TH LEVEL TRAINING 04/17/2020 04/17/2020 40 ENUMERATION PHILIPPINE STATISTICS AUTHORITY			ATTEN (mm/d	ATTENDANCE (mm/dd/yyyy)		(Managerial/ Supervisory/		
2020 CPH 4TH LEVEL TRAINING 00/17/2020 40 CHUMERATION PHILIPPINE STATISTICS AUTHORITY		COMPUTER SYSTEMS SER	MCING NC - II			300	TECHNICAL	
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SCANNING AND SKIMMING FOR MONITORING (Comminue on separate sheet if necessary)	ACTI		1 1					
(Comtinue on separate sheet if necessary)	_							
SIGNATURE JOURNAL DATE MAY Co., 2021	March .	= -	100	intljiue on separate s	hoof if necessar	N)		
		SIGNATURE	Murille	<u>{</u>		DA	ATE	MAY Q 2021 CSFORM 212 (Revised 2017), Page 3 of 4

	Are you related by consanguinity or affinity to the chief of bureau or office or to the person who has immedia Bureau or Department where you will be apppointed, a. within the third degree? b. within the fourth degree (for Local Government Unit - Co.)	☐ YES ☑ NO ☐ YES ☑ NO If YES, give details:					
35.	a. Have you ever been found gully of any administrative o	YES If YES, give detail	☑ NO ils:				
2	b. Have you been criminally charged before any court?	☐ YES					
	Have you ever been convicted of any crime or violation of by any court or tribunal?		☐ YES				
	Have you ever been separated from the service in any of retirement, dropped from the rolls, dismissal, termination, out (abolition) in the public or private sector?	end of term, finished contract or phased	✓ YES □ NO If YES, give details: RESIGNATION				
38.	a. Have you ever been a candidate in a national or local el Barangay election)?		☐ YES ☑ NO If YES, give details:				
	b. Have you resigned from the government service during election to promote/actively campaign for a national or loc	al candidate?	☐ YES If YES, give deta	✓ NO			
39.	Have you acquired the status of an immigrant or permane	YES NO If YES, give details (country):					
40. a. b.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) M 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972 Are you a member of any indigenous group? Are you a person with disability? Are you a solo parent?	☐ YES ☑ NO If YES, please specify: ☐ YES ☑ NO If YES, please specify ID No: ☐ YES ☑ NO If YES, please specify ID No:					
41.	REFERENCES (Person not related by consangumity or affinity to applica	nt /appointee)	II 120, piedes speci				
	NAME	ADDRESS	TEL NO.				
	DR. JOEL S. SEMILLANO	BRGY. DOLORES, ORMOC CWY	9088675390				
	MRS. EMMA P. SIOS-E, MA.E.D.	EVSU - OCC	9338690857				
	MR. REYNOLDS L. LINGGAS	LINAO NATIONAL HIGH SCHOOL	9155465437				
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.							
G	overnment Issued ID (i.e. Paesport, GSIS, SSS, PRC, Oriver's License, etc.) LEASE INDICATE ID Number and Date of Issuance overnment Issued ID: PRC						
-	Date/Place of Issuance: 12/26/2019 - ORC ORMOC BRANCH Date Accomplished			Right Thumbmark			
	SUBSCRIBED AND SWORN to before me this, affiant exhibiting his/her validly Issued government ID as Indicated above.						
		ATTY. JOSEPH KIRRY L. CALIPATAN Public Attorney III Pursuant to RA 9406		2-1,000			
		Person Administering Oat	h				