CS Form No. 212

Revised 2017

PERSONAL DATA SHEET

concerned.	ion made in the Personal Data Sheet and the						'iminal case/s ag	ainst the per	son
	(and use separate sheet if necessary. Indicate					1. CS ID No.		(Do not fill up. I	For CSC use only
I. PERSONAL INFORMATION	N								
2. SURNAME	LARRAZABAL								
FIRST NAME	ALAINA						NAME EXTENSION (JF	R., SR) NA	
MIDDLE NAME	GABISAY								
3. DATE OF BIRTH (mm/dd/yyyy)	9/22/1998	16. CITIZENSH	IIP				FILIPINO		
4. PLACE OF BIRTH	KANANGA COMMUNITY HOSPITAL	lf ho	older of dual citizer	iship,	Pls. indicate country:				
5. SEX	FEMALE	ple	ease indicate the de	tails.			PHILIPPINES	1	
6 CIVIL STATUS	SINGLE	17. RESIDENT	IAL ADDRESS	Но	ouse/Block/Lot N	o.	F. A LA	RRAZABAL STR Street	REET
				0	ubdivision/Villag			POBLACION	
7. HEIGHT (m)	1.57				KANANGA			Barangay LEYTE	
8. WEIGHT (kg)	50	ZIP	CODE	City/Municipality		6531	Province		
9. BLOOD TYPE	N/A	18. PERMANE	NT ADDRESS				F. A LAI	RRAZABAL STR	EET
10. GSIS ID NO.	N/A				ouse/Block/Lot N			Street POBLACION	
11. PAG-IBIG ID NO.	N/A				ubdivision/Villag KANANG			Barangay LEYTE	
12. PHILHEALTH NO.	N/A	ZIP	CODE		City/Municipality 6531			Province	
	N/A	19. TELEPHON	NE NO.				N/A		
14. TIN NO.	N/A	20. MOBILE NO).			095	62367878		
15. AGENCY EMPLOYEE NO.	N/A 21. E-MAIL ADDRESS (if any)				<u>a</u> l	laina.larraza	abal@vsu.edu.	<u>ph</u>	
II. FAMILY BACKGROUND									
22. SPOUSE'S SURNAME	N/A			23. NAME of CH	ILDREN (Write t	full name and list	all)	DATE OF BIR	TH (mm/dd/yyyy)
FIRST NAME	N/A	NAME EXTENSION	ON (JR., SR)		,	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	LARRAZABAL								
FIRST NAME	ALAN MATHIAS	SR.							
MIDDLE NAME	ABALLE								
25. MOTHER'S MAIDEN NAME									
SURNAME	GABISAY								
FIRST NAME	JOAN								
MIDDLE NAME	SULLA			(Continue on separate sheet if necessary)					
III. EDUCATIONAL BACKGE					•	_			
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC ED	OUCATION/DEGRE (Write in full)	E/COURSE	PERIOD OF	ATTENDANCE	HIGHEST LEVEL/ UNITS EARNED	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS
	(11110 111 1011)		(**************************************		From	То	(if not graduated)		RECEIVED 4th
ELEMENTARY	KANANGA CENTRAL SCHOOL				6/1/2005	3/30/2011	GRADUATE	2011	HONORABL
SECONDARY	KANANGA NATIONAL HIGH SCHOOL				6/1/2011	3/26/2015	GRADUATE	2015	FIRST ACHIEVER
VOCATIONAL / TRADE COURSE	N/A				N/A	N/A	N/A	N/A	N/A
COLLEGE	LEYTE NORMAL UNIVERSITY	BACHELOR OF SECONDARY MAJOR IN SOCIAL ST			6/6/2017	7/27/2021	GRADUATE	2021	CHED TD Grantee/Co
GRADUATE STUDIES	N/A	N/A			N/A N/A				
		Continue on se	parate sheet if ne	cessary)					
SIGNATURE			DATE				CS FORM 212	2 (Revised 2017)	, Page 1 of 4

IV. CIVIL SERVICE ELIGIBILITY										
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE		RATING	DATE OF EXAMINATION /	DI VOE DE EAVVIIVIY	TION / CONFERMENT		LICENSE (if applicable)			
	BAR	ANGAY ELIGIBILI	ITY / DRIVER'S LICENSE	(If Applicable)	CONFERMENT			NUMBER	Date of Validity	
NONE			N/A	N/A	N/A			N/A	N/A	
HONE										
				(Con	tinue on separate sheet	if necessary)				
V. I	NORK E	XPERIENCE		4		: : : - : - : - : - : - :	a al 18/a ala (5.0		4	
(Inc. 28.		SIVE DATES	nt. Start from your recen				ea Work Exp	SALARY/ JOB/ PAY		621.77
	(mm	n/dd/yyyy)	POSITION T (Write in full/Do not	TLE abbreviate)	DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)		MONTHLY SALARY GR applical (Form	GRADE (if applicable)& STEP (Format "00-0")/	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)
	From	То						INCREMENT		
			NONE			N/A	N/A	N/A	N/A	N/A
				(Con	tinue on separate sheet	if necessary)				
	SIGNA	TURE	ogland	b	DATE			CS FORM 2	12 (Revised 2017), F	Page 2 of 4
						<u> </u>				

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S							
29. NAME & ADDRESS OF O (Write in full		INCLUSIV (mm/d	/E DATES d/yyyy) To	NUMBER OF HOURS	POSITION / NATURE OF WORK		
N/A			N/A	N/A	N/A		
VII. LEARNING AND DEVELOPMENT (L&D)		inue on separate s					
(Start from the most recent L&D/training program and inclu				hief/Executive/Ma	nagerial positions)		
30. TITLE OF LEARNING AND DEVELOPMENT INTE (Write in full		INCLUSIVE ATTEN (mm/d		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc) Type of LD (Managerial/ CONDUCTED/ SPONSORED BY Symmetry) (Write in full)		
N/A		N/A		N/A	N/A	N/A	
VIII. OTHER INFORMATION	(Cont	inue on separate s	heet if necessary)				
31. SPECIAL SKILLS and HOBBIES	32. NON-	ACADEMIC DISTIN (Write	ICTIONS / RECOG	SNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
COMPUTER SKILLS		N/A					
BAKING							
	(Continue on separate sheet if necessary)						
SIGNATURE	ogland !		DATE		10/05/21	CS FORM 212 (Revised 2017), Page 3 of 4	

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?	NO					
	b. within the fourth degree (for Local Government Unit - Car NO	If YES, give details:					
35.	a. Have you ever been found guilty of any administrative off	NO					
			If YES, give details:				
	b. Have you been criminally charged before any court?		NO				
			If YES, give details:	ate Filed:			
				f Case/s:			
36.	Have you ever been convicted of any crime or violation of a by any court or tribunal?	ny law, decree, ordinance or regulation	NO If YES, give details:				
27	Have you ever been separated from the service in any of th	a fallouing madae: rapignation	NO				
37.	retirement, dropped from the rolls, dismissal, termination, er out (abolition) in the public or private sector?		If YES, give details:				
38.	a. Have you ever been a candidate in a national or local ele Barangay election)?	ction held within the last year (except	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	candidate?	NO If YES, give details:				
39.	Have you acquired the status of an immigrant or permanent	NO If YES, give details (country):					
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mar 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972).	NO					
a.	Are you a member of any indigenous group?		If YES, please specify:				
b.	Are you a person with disability?						
^	Annuary a sala saurata		If YES, please specify ID No:				
C.	Are you a solo parent?		If YES, please specify ID 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			
	RYAN G. DESTURA	TACLOBAN CITY		3.5 cm. X 4.5 cm (passport size)			
				With full and handwritten			
				name tag and signature over printed name			
42.	I declare under oath that I have personally accomplished	ed this Personal Data Sheet which is a	true, correct and	Computer generated			
	complete statement pursuant to the provisions of pertine Philippines. I authorize the agency head / authorized representations of pertine provisions of pe	,		or photocopied picture			
	agree that any misrepresentation made in this doc			PHOTO			
	administrative/criminal case/s against me.						
	Sovernment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)	0 0					
F	PLEASE INDICATE ID Number and Date of Issuance	stamps					
F	D/License/Passport No.:						
ŀ)X)					
Ľ	ate/Place of Issuance:		Right Thumbmark				
	SUBSCRIBED AND SWORN to before me this		ng his/her validly issued gov	ernment ID as indicated above.			
	_						
		Person Administering Oath					
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