

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 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	MATA							
FIRST NAME	NIÑO JAN					NAME EXTENSION (JR., SR)		N/A
MIDDLE NAME	MATIGA							
3. DATE OF BIRTH (mm/dd/yyyy)	1/15/2000		16. CITIZENSHIP If holder of dual citizenship, please indicate the details.		<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship			
4. PLACE OF BIRTH	DANAO CITY, CEBU				<input type="checkbox"/> by birth <input type="checkbox"/> by naturalization			
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female				Pls. indicate country:			
					Philippines			▼
6 CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Married		17. RESIDENTIAL ADDRESS		N/A			N/A
	<input type="checkbox"/> Widowed <input type="checkbox"/> Separated				House/Block/Lot No.			Street
	<input type="checkbox"/> Other/s:				PUROK 2			MASABA
7. HEIGHT (m)	1.69		ZIP CODE		Subdivision/Village			Barangay
8. WEIGHT (kg)	75				DANAO CITY			CEBU
9. BLOOD TYPE	N/A				City/Municipality			Province
10. GSIS ID NO.	N/A		18. PERMANENT ADDRESS		N/A			N/A
11. PAG-IBIG ID NO.	N/A				House/Block/Lot No.			Street
12. PHILHEALTH NO.	N/A				PUROK 2			MASABA
13. SSS NO.	N/A		19. TELEPHONE NO.		Subdivision/Village			Barangay
14. TIN NO.	638-198-720				DANAO CITY			CEBU
15. AGENCY EMPLOYEE NO.	N/A				City/Municipality			Province
			20. MOBILE NO.		+639293668947			
			21. E-MAIL ADDRESS (if any)		ninojan995@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)		
	FIRST NAME	N/A			NAME EXTENSION (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	MATA					
	FIRST NAME	RAMON	NAME EXTENSION (JR., SR)	N/A		
	MIDDLE NAME	BARBERO				
25. MOTHER'S MAIDEN NAME						
	SURNAME	MATIGA				
	FIRST NAME	EVA				
	MIDDLE NAME	CANE		(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 GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	LEONA D. ZAMORA ELEMENTARY SCHOOL	N/A	2006	2012	N/A	2012	FIRST HONORABLE MENTION
SECONDARY	RAMON M. DURANO SR. FOUNDATION - SCIENCE AND TECHNOLOGY EDUCATIONAL CENTER	N/A	2012	2018	N/A	2010	WITH HONORS
VOCATIONAL / TRADE COURSE	NA	N/A	NA	NA	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN AGRICULTURAL AND BIOSYSTEMS ENGINEERING	2018	2023	N/A	2019	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			

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

NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
	From	To		
HINGYAP PH, EASTERN VISAYAS	5/1/2020	PRESENT	–	MEMBER
PHILIPPINE SOCIETY OF AGRICULTURAL AND BIOSYSTEMS ENGINEERING - PRE-PROFESSIONAL GROUP, VSU	8/1/2018	8/3/2023	–	MEMBER
EMPOWER 7.0 YOUTH LEADERSHIP AND HEALTH ADVOCACY CAMP 2022	4/14/2022	4/16/2022	16 HRS	FACILITATOR

(Continue on separate sheet if necessary)

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

(Start from the most recent L&D/training program and include only the relevant L&D/training taken for the last five (5) years for Division Chief/Executive/Managerial positions)


TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
	From	To			
UNDERWRITING & CLAIMS PROCEDURE RETOOLING	5/6/2024	6/17/2024	56 HRS	TECHNICAL	PCIC RO7
PRINCIPLES AND SYSTEMS OF CORN HARVESTING & SHELLING	8/09/2024	8/09/2024	4 HRS	WEBINAR	PHILMECH
FLUIDIZED BED DRYER	7/28/2024	7/28/2024	4 HRS	WEBINAR	PHILMECH
GREENHOUSE SOLAR DRYER FOR DRYING AGRICULTURAL PRODUCTS	7/28/2024	7/28/2024	3 HRS	WEBINAR	PHILMECH
FORUM ON ACCELERATING TRANSITIONS TO A SUSTAINABLE FUTURE	7/27/2023	7/27/2023	4 HRS	TECHNICAL	FACULTY OF MNGT & ECONOMICS, VSU & AANCOP
THE LOCAL YOUTH ASSEMBLY - CENTRAL & EASTERN VISAYAS CLUSTER	5/31/2023	6/2/2023	24 HRS	TEAM TRAINING	YOUTHLED, USAID, THE ASIA FOUNDATION, & RAFI
TYPHOON AWARENESS & CALAMITY READINESS	6/29/2022	6/29/2022	8 HRS	WEBINAR	DEPARTMENT OF METEOROLOGY, VSU
3RD PHILIPPINE SOCIETY OF AGRICULTURAL AND BIOSYSTEMS ENGINEERING - PRE-PROFESSIONAL GROUP, VISAYAS-WIDE CONFERENCE	11/28/2018	12/1/2018	24 HRS	TEAM TRAINING	PSABE-PPG
1ST PHILIPPINE SOCIETY OF AGRICULTURAL AND BIOSYSTEMS ENGINEERING - PRE-PROFESSIONAL GROUP, VISAYAS-WIDE CONFERENCE	2/8/2019	2/10/2019	24 HRS	TEAM TRAINING	PSABE-PPG

(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
BASIC AUTOCAD	N/A	MEMBER, PHILIPPINE SOCIETY OF AGRICULTURAL AND BIOSYSTEMS ENGINEERING - PRE-PROFESSIONAL
DANCING		MEMBER, HINGYAP PH
WRITING		
FARMING		
VLOGGING		

(Continue on separate sheet if necessary)

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, a. within the third degree? b. within the fourth degree (for Local Government Unit - Career Employees)?	<div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details:<div></div></div></div>												
35. a. Have you ever been found guilty of any administrative offense? b. Have you been criminally charged before any court?	<div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details:<div></div></div></div> <div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details:<div>Date Filed: <div></div>Status of Case/s: <div></div></div></div></div>												
36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?	<div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details:<div></div></div></div>												
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?	<div><div><input checked="" type="checkbox"/> YES<input type="checkbox"/> NO</div><div>If YES, give details:<div>FINISHED CONTRACT</div></div></div>												
38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)? 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?	<div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details: <div></div></div></div> <div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details: <div></div></div></div>												
39. Have you acquired the status of an immigrant or permanent resident of another country?	<div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details (country): <div></div></div></div>												
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: a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent?	<div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, please specify: <div></div></div></div> <div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, please specify ID No: <div></div></div></div> <div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, please specify ID No: <div></div></div></div>												
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)													
<table><tr><td>NAME</td><td>ADDRESS</td><td>TEL. NO.</td></tr><tr><td>IRENE A. GUNGOB</td><td>DANA O CITY, CEBU</td><td>9478647523</td></tr><tr><td>RENE E. ARDEÑA</td><td>SAN CARLOS CITY, NEGROS OCCIDENTAL</td><td>9121145370</td></tr><tr><td>DANIEL LESLIE S. TAN</td><td>BAYBAY CITY, LEYTE</td><td>9328685396</td></tr></table>		NAME	ADDRESS	TEL. NO.	IRENE A. GUNGOB	DANA O CITY, CEBU	9478647523	RENE E. ARDEÑA	SAN CARLOS CITY, NEGROS OCCIDENTAL	9121145370	DANIEL LESLIE S. TAN	BAYBAY CITY, LEYTE	9328685396
NAME	ADDRESS	TEL. NO.											
IRENE A. GUNGOB	DANA O CITY, CEBU	9478647523											
RENE E. ARDEÑA	SAN CARLOS CITY, NEGROS OCCIDENTAL	9121145370											
DANIEL LESLIE S. TAN	BAYBAY CITY, LEYTE	9328685396											
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.													
<table><tr><td>Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</td><td rowspan="4"><div></div><div>Signature (Sign inside the box)</div><div></div><div>Date Accomplished</div></td></tr><tr><td>Government Issued ID: G05-21-200439</td></tr><tr><td>ID/License/Passport No.:</td></tr><tr><td>Date/Place of Issuance:</td></tr></table>	Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance	<div></div> <div>Signature (Sign inside the box)</div> <div></div> <div>Date Accomplished</div>	Government Issued ID: G05-21-200439	ID/License/Passport No.:	Date/Place of Issuance:	<div><div></div><div>PHOTO</div><div><div></div><div>Right Thumbmark</div></div></div>							
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance	<div></div> <div>Signature (Sign inside the box)</div> <div></div> <div>Date Accomplished</div>												
Government Issued ID: G05-21-200439													
ID/License/Passport No.:													
Date/Place of Issuance:													
SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above. <div><div></div><div>Person Administering Oath</div></div>													
CS FORM 212 (Revised 2017). Page 4 of 4													