

PERSONAL DATA SHEET

WARNING: Any misinterpretation 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	CASAS		
FIRST NAME	FAITH ANTONETTE	NAME EXTENSION (JR., SR) N/A	
MIDDLE NAME	ORIT		
3. DATE OF BIRTH (mm/dd/yyyy)	06/05/1999	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:
4. PLACE OF BIRTH	MAASIN CITY	If holder of dual citizenship, please indicate the details.	
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:		
7. HEIGHT (m)	1.52	17. RESIDENTIAL ADDRESS	0143 R. KANGLEON STREET House/Block/Lot No. Street PUROK SEASIDE IBARRA Subdivision/Village Barangay MAASIN CITY SOUTHERN LEYTE City/Municipality Province 6600
8. WEIGHT (kg)	43	ZIP CODE	
9. BLOOD TYPE	O+	18. PERMANENT ADDRESS	0143 R. KANGLEON STREET House/Block/Lot No. Street PUROK SEASIDE IBARRA Subdivision/Village Barangay MAASIN CITY SOUTHERN LEYTE City/Municipality Province 6600
10. GSIS ID NO.	NONE	ZIP CODE	
11. PAG-IBIG ID NO.	NONE		
12. PHILHEALTH NO.	1302-5560-5209		
13. SSS NO.	NONE	19. TELEPHONE NO.	NONE
14. TIN NO.	770-997-872	20. MOBILE NO.	0908-146-5179
15. AGENCY EMPLOYEE NO.	NONE	21. E-MAIL ADDRESS (if any)	<u>casasfaithantonette@gmail.com</u>


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	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	CASAS			
FIRST NAME	NOLI	NAME EXTENSION (JR., SR) N/A		
MIDDLE NAME	GONZALES			
25. MOTHER'S MAIDEN NAME				
SURNAME	ORIT			
FIRST NAME	DONNA JUNE			
MIDDLE NAME	RUFIN		(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	IBARRA ELEMENTARY SCHOOL	ELEMENTARY	2005	2011	GRADUATED	2011	WITH HONOR
SECONDARY	MAASIN CHRISTIAN ACADEMY	HIGH SCHOOL	2011	2015	GRADUATED	2015	WITH HONOR
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	COLLEGE OF MAASIN	BACHELOR OF SCIENCE IN ACCOUNTANCY	2015	2020	GRADUATED	2020	NONE
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)


SIGNATURE		DATE	Sept. 15, 2023	CS FORM 212 (Revised 2017), Page 1 of 4
-----------	---	------	----------------	---

[illegible]

V. WORK EXPERIENCE

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

[illegible]

SIGNATURE		DATE	Sept. 15, 2023
-----------	---	------	----------------

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]

(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
MICROSOFT SKILLS	Certified Bookkeeper (NIAT)	NATIONAL INSTITUTE OF ACCOUNTING TECNICIAN (NIAT)
BOOKKEEPING SKILLS		

(Continue on separate sheet if necessary)

SIGNATURE		DATE	Sept. 15, 2023	CS FORM 212 (Revised 2017), Page 3 of 4
------------------	---	-------------	----------------	---

January 23, 2023

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)?

If YES, give details:

35. a. Have you ever been found guilty of any administrative offense?

b. Have you been criminally charged before any court?

If YES, give details:

If YES, give details:

Date Filed:

Status of Case/s:

36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?

If YES, give details:

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?

If YES, give details:

FINISHED CONTRACT

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?

If YES, give details:

If YES, give details:

39. Have you acquired the status of an immigrant or permanent resident of another country?

If YES, give details (country):

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?

If YES, please specify:

If YES, please specify ID No:

If YES, please specify ID No:

41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)

NAME	ADDRESS	TEL. NO.
Donn Justin O. Buloz	STI Administrator	9202538554
Joje Marie Carbonilla	Asuncion, Maasin City	9157438112
Dr. Willy Labastida, LPT	Sorosoro, Maasin City	9202854954

42.

Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)

PLEASE INDICATE ID Number and Date of Issuance

Government Issued ID: PHILHEALTH

ID/License/Passport No.: 1302-5560-5209

Date/Place of Issuance: 7/8/2021- MAASIN CITY

Signature (Sign inside the box)

Sept. 15, 2023

Date Accomplished

Right Thumbmark

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

Person Administering Oath

FAITH ANTONETTE O. CASAS

PHOTO

CS FORM 212 (Revised 2017), Page 4 of 4

WORK EXPERIENCE SHEET

- Duration: December 2021 - May 2023
- Position: Admin. Aide I (Job Order)
- Name of Office/Unit: City Accountant's Office
- Office Head: Cecelle Resos-Binongo
- Name of Agency/Organization and Location: Maasin City Hall
- Summary of Actual Duties
 - Responsible in performing technical tasks e.g., reflecting entries from *Journal Entry Voucher* to *Disbursement Journal Book* and *Cash Receipt Journal Book*; updating the *Ledger Card* and depreciation of *Property, Plant, and Equipment*; Reconciling *Depreciation Expense Record* with the *General Trial Balance* amounts; carding of telephone bills and processing concerns related to telephone and internet; filing the Expanded Withholding Tax for Innove (Globe) Account and other related tasks.

- Duration: February 2021 - February 2022
- Position: Part-time Senior High School Teacher
- Name of Office/Unit:
- School Administrator- Donn Justin O. Buloz
- Name of Agency/Organization and Location: Systems Technology Institute (STI) – Maasin
- Summary of Actual Duties
 - Teaching students with ABM subjects eg., Marketing, Entrepreneurship, Business Mathematics and Basic Accounting.
 - Responsible for exam preparation and marking, making lesson plans, data tracking, and the involvement in many event management and extracurricular activities.



FAITH ANTONETTE O. CASAS
(Signature over Printed Name
of Employee/Applicant)

Date: December 11, 2023

