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 box( ) 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	PRIETO
FIRST NAME	ABEGAIL
NAME EXTENSION (JR., SR)	N/A
MIDDLE NAME	MANAGBANAG
3. DATE OF BIRTH (mm/dd/yyyy)	04/28/2001
4. PLACE OF BIRTH	BAYBAY CITY, LEYTE
5. SEX	☐ Male ☑ Female
6 CIVIL STATUS	☑ Single ☐ Married ☐ Widowed ☐ Separated ☐ Other/s:
7. HEIGHT (m)	1.58
8. WEIGHT (kg)	45
9. BLOOD TYPE	O
10. GSIS ID NO.	N/A
11. PAG-IBIG ID NO.	N/A
12. PHILHEALTH NO.	N/A
13. SSS NO.	N/A
14. TIN NO.	653-980-675
15. AGENCY EMPLOYEE NO.	N/A
16. CITIZENSHIP	☑ Filipino ☐ Dual Citizenship ☑ by birth ☐ by naturalization
If holder of dual citizenship, please indicate the details.	Pls. indicate country:
17. RESIDENTIAL ADDRESS	N/A (House/Block/Lot No.) CENTRO (Street); N/A (Subdivision/Village) KABALASAN (Barangay); BAYBAY (City/Municipality) LEYTE (Province); ZIP CODE 6521
18. PERMANENT ADDRESS	N/A (House/Block/Lot No.) CENTRO (Street); N/A (Subdivision/Village) KABALASAN (Barangay); BAYBAY (City/Municipality) LEYTE (Province); ZIP CODE 6521
19. TELEPHONE NO.	N/A
20. MOBILE NO.	09854322201
21. E-MAIL ADDRESS (if any)	prietoabegail97@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	NAME EXTENSION (JR., SR)	N/A	
MIDDLE NAME			
OCCUPATION			
EMPLOYER/BUSINESS NAME			
BUSINESS ADDRESS			
TELEPHONE NO.			
24. FATHER'S SURNAME	PRIETO		
FIRST NAME	ROMULO (NAME EXTENSION (JR., SR))		
MIDDLE NAME	ZAMORA		
25. MOTHER'S MAIDEN NAME			
SURNAME	MANAGBANAG		
FIRST NAME	ELVIRA MARIA		
MIDDLE NAME	LOREN	(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 From	To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
ELEMENTARY	CABALASAN ELEMENTARY SCHOOL	ELEMENTARY	2007	2013	GRADUATED	2013	Salutaturian
SECONDARY	BAYBAY NATIONAL HIGH SCHOOL	JUNIOR HIGH SCHOOL	2013	2017	GRADUATED	2017	N/A
	BAYBAY CITY SENIOR HIGH SCHOOL	SENIOR HIGH SCHOOL	2017	2019	GRADUATED	2019	With Honors
VOCATIONAL / TRADE COURSE	N/A						
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF CULTURE AND ARTS EDUCATION	2019	2023	GRADUATED	2023	Cum laude
GRADUATE STUDIES	N/A						

(Continue on separate sheet if necessary)

SIGNATURE		DATE	July 29, 2024

IV. CIVIL SERVICE ELIGIBILITY

27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
				NUMBER	Date of Validity
N/A					

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

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

28. INCLUSIVE DATES (mm/dd/yyyy)		POSITION TITLE (Write in full/Do not abbreviate)	DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOVT SERVICE (Y/ N)
From	To						
		N/A					

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

29. NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
	From	To		
RESERVE OFFICER TRAINING CORPS.	2019	2020	360 hrs	Reserve

(Continue on separate sheet if necessary)

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

30. 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			
N/A					

(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)
COMPUTER LITERATE	N/A	N/A
MUSIC		
VISUAL ART		

(Continue on separate sheet if necessary)

SIGNATURE		DATE	July 29, 2024

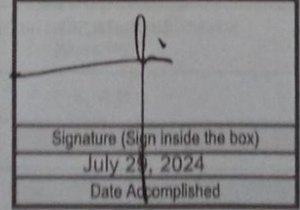
34. Are you related by consanguinity or affinity to the chief of bureau or office or to the person who has Bureau or Department where you will be apppointed, a. within the third degree? b. within the fourth degree (for Local Government Unit -	☐ YES ☑ NO ☐ YES ☑ NO If YES, give details:
35. a. Have you ever been found guilty of any administrative 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 or violation of any law, decree, ordinance or regulation by any court or tribunal?	☐ YES ☑ NO If
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	☐ YES ☑ NO If YES, give details:
38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay	☐ YES ☑ NO If YES, give details:
b. Have you resigned from the government service during the three (3)-month period before the last election to	☐ YES ☑ NO If YES, give details:
39. Have you acquired the status of an immigrant or permanent resident of another country?	☐ YES ☑ NO 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 a. Are you a member of any indigenous group? b. Are you a person with disability? c. 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 consanguinity or affinity to applicant /appointee)

NAME	ADDRESS	TEL. NO.
FRANCIS C. IBASITAS	BAYBAY CITY	9653342324
PHEOBE JOY P. VITUALLA	BAYBAY CITY	9500054797
ABEGAIL P. CALIXTRO	BAYBAY CITY	9302091638

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

Government Issued ID (e.g. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance	
Government Philippine Identification Card	
ID/License/ 4218-9684-6270-1481	
Date/Place November 09, 2022	



Signature (Sign inside the box)
July 29, 2024
Date Accomplished

Right Thumbmark

SUBSCRIBED AND SWORN to before me this 29 JUL 2024, affiant exhibiting his/her validly issued government ID as indica

Doc. No.: 282
Page No.: 57
Book No.: II
Series of 2024

ATTY. DECYROSE P. PAPA
Public Attorney II
(Pursuant to R.A. 9406)