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 filling 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.

) and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABB

Print legibly. Tick appropriate boxes (

1. CS ID No. (Do not fill up. For CSC use only PERSONAL INFORMATION JUBASAN 2. SURNAME NAME EXTENSION (JR., SR) **FIDELA** FIRST NAME **PAREDES** MIDDLE NAME 3.DATE OF BIRTH Filipino Dual Citizenship 16. CITIZENSHIP SEPTEMBER 12, 1990 (mm/dd/yyyy) CATARMAN N. SAMAR 4.PLACE OF BIRTH Pls. indicate country: If holder of dual citizenship. please indicate the details 5.SEX ☐ Male ☐ Female BRGY. CAVITE WEST, PALO LEYTE Single
Widowe
Other/s: Married 17 RESIDENTIAL ADDRESS **6CIVIL STATUS** ☐ Separate House/BlockflotyNeAVITE WEST, PALO LETY TO Subdivision/Village PALO, LEYTE Barangay 7.HEIGHT (m) City/Municipality Province 51 8.WEIGHT (kg) ZIP CODE BRGY. CAVITE WEST, PALO LEYTE A+ 9.BLOOD TYPE 18. PERMANENT ADDRESS House/Block/Lot No. Street
BRGY. CAVITE WEST, PALO LEYTE 10.GSIS ID NO N/A Subdivision/Village PALO, LEYTE 11.PAG-IBIG ID NO. N/A City/Municipality Province 6500 12.PHILHEALTH NO. N/A ZIP CODE N/A N/A 13.SSS NO. 09624587729 14. TIN NO. 20. MOBILE NO. N/A fidelajubasan19@gmail.com 21. E-MAIL ADDRESS (if any) N/A 15. AGENCY EMPLOYEE NO I. FAMILY BACKGROUND DATE OF BIRTH N/A 22.SPOUSE'S SURNAME 23. NAME of CHILDREN (Write full name and list all) (mm/dd/yyyy) N/A NAME EXTENSION (JR., SR) N/A N/A FIRST NAME N/A MIDDLE NAME N/A OCCUPATION N/A EMPLOYER/BUSINESS NAME N/A BUSINESS ADDRESS N/A TELEPHONE NO. **EDUARDO** 24.FATHER'S SURNAME JUBASAN NAME EXTENSION (IR., SR) LORESTO FIRST NAME MIDDLE NAME 25.MOTHER'S MAIDEN NAME PAREDES SURNAME MYRNA FIRST NAME LIBANAN MIDDLE NAME (Continue on separate sheet if necessary) III EDUCATIONAL BACKGROUND SCHOLARAHIP NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE 26 PERIOD OF ATTENDANCE YEAR GRADUATED LEVEL HONORS RECEIVED EARNED (if not graduated) (W rite in full) (Write in full) From Tο 7/05//2007 3/1/2008 UEP-LABORATORY ELEMENTARY SCHOOL PRIMARY N/A 2008 N/A ELEMENTARY 7/12/2008 4/1/2012 **SECONDARY** CAWAYAN NATIONAL HIGHSCHOOL SECONDARY N/A 2012 N/A BASCHELOR SCIENCE SECONDARY EDUCATION MAJOR IN HOME ECONOMICS N/A 7/30/2012 4/6/2017 UNIVERSITY OF EASTERN PHILIPPINES 2017 N/A COLLEGE NATIONAL 3/1/2018 4/21/2018 ST. ANTHONY FARM AND INSTITUTE N/A HOUSEKEEPING-NC2 2018 CERTIFICATE VOCATIONAL/TRADE CPOURSE N/A N/A N/A N/A PRIMARY PRIMARY N/A **GRADUATE STUDIES** MARCH 26, 2025 **SIGNATURE** DATE

V CIVILLE	EDVICE E	LIGIBILITY							
7. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER DATE OF LICENSE (if applicable)									
SPECIAL LA	WS/ CES/ CSEE		RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINAT	TION / CONFE	RMENT	NUMBER	Date of
BOARD L	ICENSURE EXA	MNITAION FOR							Validity
PR	ROFESSIONAL T	EACHER	76.6	3/25/2018	UE	:۲		1798007	9/12/2025
									+-1
									\vdash
			(Continu	ie on separate she	et if necessary)				
V. WORK E			n vour recent	work) Descript	tion of duties shou	ld be ind	icated in t	he attached	Work Ex
28. INCLUS	IVE DATES dd/yyyy)	POSITION TIT	'LE	DEPARTMENT / AGEN	CY / OFFICE / COMPANY	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	1	SERVICE
From	То	(Write in full/Do not	appreviate)	(Write in fu	III/Do not abbreviate)		INCREMENT "		
1/21/2025	Present	BILLER		D	DDPO FPO	8 400	N/A	CONTRACTUAL	N/A
4/15/2024	7/29/24	PHARMACY ASSISTA	NT/CASHIER	TGP PHARMACY		7 500	N/A	CONTRACTUAL	N/A
01/16/2023	04/14/2024	PHARMACY ASSISTA	NT/CASHIER	MD PHARMACY		10 500	N/A	CONTRACTUAL	N/A
5/26/2022	12/30/2022	PHARMACY ASSISTANT/CASHIER		DR. ALICO DRUGMART		4 900	N/A	CONTRACTUAL	N/A
6/1/2018	03/2020	TEACHER		UEP-ADFC		9 000	N/A	CONTRACTUAL	N/A
									\Box
									\vdash
									+
									\vdash
									\vdash
									\perp
									\vdash
									\vdash
									\vdash
									+
									\vdash
									\vdash
									\vdash
			DO:	ie on separate she			MARCH	26, 2025	
SIGNATURE		()	Jedela Jelkeson		DATE			26, 2025 RM 212 (Revised	2017) Page 2
							CS FOR	NY ZIZ (KEVISED	∠∪1/), Page 2

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S						
29. NAME & ADDRESS OF ORGANIZATION (Wri	te in full)		VE DATES	NUMBER OF HOURS		POSITION / NATURE OF WORK
VOLUNTEER - JUNIOR HIGH TEACHER		From JULY 2017	To NOV. 2017			TEACHING
VOLONTEEN JOHNON HONT TEACHEN		,	NOV. 2017			
VII. LEARNING AND DEVELOPMEN		ie on separate			NDFD	
		INCLUSIVE		LIIJ ATTE		
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)		ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
		From	То			
FREIGHT BILLING TRAINING	PROGRAM	N/A	N/A	N/A	N/A	DDC DATA PROCESSING OPC
			abact 's			
/III. OTHER INFORMATION	(Continu	ie on separate	sneet If nece	ssary)		
31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS /	RECOGNITION				MEMBERSHIP IN ASSOCIATION/ORGANIZATION 33.
BASIC IN MICROSOFT WORD, EXCEL,				ite in full)		(Write in full)
POWERPOINT AND CANVA APP EDITOR	N/A NATIONAL CERTIFICATE					N/A
HOUSKEEPING NC2	NATIONAL CERTIFICATE					N/A
HOBBY-make digital templates on Canva App		N/A				
	(Continu	ıe on separate	sheet if nece	essary)		
SIGNATURE		<u>ie on separate</u> الجماعة	. энеес и песе		ATE	MARCH 26, 2025
J.GHAT OILE	Jean Jo					CS FORM 212 (Revised 2017), Pag

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 apppoin a. within the third degree? b. within the fourth degree (for Local Governmen	s immediate supervision over you nted,	YES NO YES NO If YES, give details:					
35.	a. Have you ever been found guilty of any admin	YES NO If YES, give details:						
	b. Have you been criminally charged before any	If YES						
36.	Have you ever been convicted of any crime or vio ordinance or regulation by any court or tribunal?	YES NO If YES, give details:						
	Have you ever been separated from the service i resignation, retirement, dropped from the rolls, d finished contract or phased out (abolition) in the a. Have you ever been a candidate in a national of	YES NO If YES, give details:						
38.	last year (except Barangay election)? b. Have you resigned from the government service period before the last election to promote/activel Have you acquired the status of an immigrant or	If YES NO If YES, give details: NO YES If YES, give details:						
39.	country?	YES NO If YES, give details (country):						
a. b.	Pursuant to: (a) Indigenous People's Act (RA 837: Persons (RA 7277); and (c) Solo Parents Welfare Are you a member of any indigenous group? Are you a person with disability? Are you a solo parent?	If YES NO If YES, please specify: NO YES If YES, please specify ID No: YES NO If YES, please specify ID No:						
41.F	REFERENCES (Person not related by consanguinity or affinity t	co applicant /appointee)						
	NAME	ADDRESS	TEL. NO.					
E,	VIV MENGULLO	CATARMAN N. SAMAR	0920 976 0155					
1A	NTHONY JAY ESTREMERA	CATARMAN N. SAMAR						
LYRA FAY CHAN ESPINA		CATARMAN N. SAMAR/TACLOBAN						
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								
Go ID	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's ense, etc.) PLEASE INDICATE ID Number overnment Issued ID: PRC ID //License/Passport No. 1798007 ate/Place of Issuance: 9/30/2019	e box) Right Thumbmark						
CRIBED AND SWORN to before me this								
		Domana Administration 2	a bh					
		Person Administering O	atn					