

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	DE DIOS		
FIRST NAME	CHRISTIAN EDUARD	NAME EXTENSION (JR., SR)	
MIDDLE NAME	ARCENA		
3. DATE OF BIRTH (mm/dd/yyyy)	04/17/1992	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:
4. PLACE OF BIRTH	TACLOBAN CITY	If holder of dual citizenship, please indicate the details.	
5. SEX	<input checked="" type="checkbox"/> Male <input 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:	17. RESIDENTIAL ADDRESS	Phase 2 Blk 20 Lot 7 Dona Gorgonia House/Block/Lot No. Street V&G Subdivision BRGY 109-A Subdivision/Village Barangay Tacloban City Leyte City/Municipality Province
7. HEIGHT (m)	1.6m	ZIP CODE	6500
8. WEIGHT (kg)	65kg	18. PERMANENT ADDRESS	Phase 2 Blk 20 Lot 7 Dona Gorgonia House/Block/Lot No. Street V&G Subdivision BRGY 109-A Subdivision/Village Barangay Tacloban City Leyte City/Municipality Province
9. BLOOD TYPE	O	ZIP CODE	6500
10. GSIS ID NO.	2005678947	19. TELEPHONE NO.	N/A
11. PAG-IBIG ID NO.	121110365710	20. MOBILE NO.	09278658662
12. PHILHEALTH NO.	130255139208	21. E-MAIL ADDRESS (if any)	xtianeduard@gmail.com
13. SSS NO.	0641797565		
14. TIN NO.	749530084		
15. AGENCY EMPLOYEE NO.	19-01-143		

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	N/A
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	De Dios			
FIRST NAME	Renerio	NAME EXTENSION (JR., SR)		
MIDDLE NAME	Cadinong			
25. MOTHER'S MAIDEN NAME				
SURNAME	Arcena			
FIRST NAME	Estrella			
MIDDLE NAME	Ordame			

(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	Tacloban Angelicum Learning Center	Primary Education	1998	2004	Graduated	2004	N/A
SECONDARY	Sacred Heart Seminary	High School	2004	2008	Graduated	2008	N/A
VOCATIONAL / TRADE COURSE	N/A						
COLLEGE	Dona Remedios Trinidad Romualdez Medical Foundation	Bachelor of Science in Nursing	2008	2012	Graduated	2012	N/A
GRADUATE STUDIES	Dr. Vicente Orestes Romualdez Educational Foundation	Juris Doctor - Non Thesis	2013	2017	Graduated	2017	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	11/2/20	CS FORM 212 (Revised 2017), Page 1 of 4
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IV. CIVIL SERVICE ELIGIBILITY

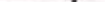
27.	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE ELIGIBILITY / DRIVER'S LICENSE BARANGAY	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
					NUMBER	Date of Validity
	RA 1080 - Bar Exam	75.5500	6/4/18	Metro Manila/Supreme Court	Roll No. 70756	4/6/18
	RA 1080 - Nurse Licensure Exam	80.8	12/13/2017	Tacloban City	License No. 0785884	2/12/13

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

[illegible]

(Continue on separate sheet if necessary)

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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)
Outdoor Activities	N/A	Integrated Bar of the Philippines
Video Editing		Philippine Nurses Association
Word Processing		Philippine National Red Cross

(Continue on separate sheet if necessary)

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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)?

☐ YES

☒ NO

☐ YES

☒ NO

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?

☐ YES

☒ NO

☐ 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 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?

☐ 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 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?

☐ YES

☒ NO

If YES, give details:

☐ 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 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?

☐ 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.
Atty. Ronelito O. Ticoy	San Jose, Tacloban City	09985502203
Atty. Tyrone B. Tutaan	Palo, Leyte	09177242443
Soccoro Salvacion Gasco	San Jose, Tacloban City	09173158885

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.

ID picture taken within the last 6 months
3.5 cm. X 4.5 cm
(passport size)

With full and handwritten name tag and signature over printed name

Computer generated or photocopied picture is not acceptable

PHOTO

Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)
PLEASE INDICATE ID Number and Date of Issuance

Government Issued ID: IBP ID

ID/License/Passport No.: 70756

Date/Place of Issuance: Manila

Signature (Sign inside the box)

Date Accomplished

Right Thumbmark

SUBSCRIBED AND SWORN to before me this

affiant exhibiting his/her validly issued government ID as indicated above.

ATTY. MY ANN C. CARERA
ROLL OF ATTORNIES NO. 72454, 6/14/19
IBP NO. 1312552/13/2011-LEYTE CHAPTER
P. 1312552/13/2011-LEYTE CHAPTER

Person Administering Oath

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