34.	Are you related by consanguinity or affinity to the appointing chief of bureau or office or to the person who has immediat Bureau or Department where you will be apppointed, a. within the third degree? b. within the fourth degree (for Local Government Unit - Ca	☐ YES ☑ NO ☐ YES ☑ NO If YES, give details:							
35.	a. Have you ever been found guilty of any administrative of	☐ YES ☑ NO If YES, give details:							
	b. Have you been criminally charged before any court?	b. Have you been criminally charged before any court?							
36.	Have you ever been convicted of any crime or violation of a any court or tribunal?	any law, decree, ordinance or regulation by	☐ YES ☑ NO If YES, give details:						
37.	Have you ever been separated from the service in any of the dropped from the rolls, dismissal, termination, end of term, in the public or private sector?		☐ YES If YES, give details	✓ NO :					
38.	A. Have you ever been a candidate in a national or local ele Barangay election)?	ection held within the last year (except	☐ YES ☑ NO If YES, give details:						
	b. Have you resigned from the government service during t election to promote/actively campaign for a national or loca		☐ YES ☑ NO If YES, give details:						
39.	Have you acquired the status of an immigrant or permanen	☐ YES ☑ NO If YES, give details (country):							
a. b.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972) Are you a member of any indigenous group? Are you a person with disability? Are you a solo parent?	☐ YES							
41.	REFERENCES (Person not related by consanguinity or affinity to applican	it /appointee)							
	NAME	ADDRESS	TEL. NO.						
	MICHELLE GERONES	TACLOBAN CITY	9173649944						
	ROSELYN SUGAROL	TACLOBAN CITY	9053676557	()					
	RENEE JOHN E. ADVINCULA	TACLOBAN CITY	9663023502						
42.	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. Approximately 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. Because the filing of administrative/criminal case/s against me.								
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: PRC ID ID/License/Passport No.: 1836525 Date/Place of Issuance: TACLOBAN CITY		Signature (Sign inside the bo JUNE 3, 2024 Date Accomplished	ox)	Right Thumbmark					
	SUBSCRIBED AND SWORN to before me this	, affiant exhibiti	ng his/her validly issued ç	government ID as indicated above.					
	L	h							

VI. VOLU	INTARY WORK OR INVOLVEMENT	IN CIVIC / NON-GOVERNMENT	/ PEOPLE / V	OLUNTARY C	RGANIZATIO	N/S		
29.	9. NAME & ADDRESS OF ORGANIZATION (Write in full)		INCLUSIVE DATES (mm/dd/yyyy) From To		NUMBER OF HOURS		POSITION / NATURE OF WORK	
	N/A		From	10				
	governor							
5-								
-								
VII. LEA	RNING AND DEVELOPMENT (L&D)			e sheet if necessar TENDED	y)			
(Start from	the most recent L&D/training program and includ	le only the relevant L&D/training taken for			ief/Executive/Mana	agerial positions)		
30. TITLE OF LEARNING AND DEVELOPMENT INTERVEN (Write in full)			INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy) From To		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
	COMPUTER SYSTEM SERV	/ICING NCII	09/01/2020	09/30/2020	48	TECHNICAL	TACLOBAN INSTITUTE OF ELECTRONICS	
	TEACHING INTERNSHIP P	ROGRAM	08/08/2019	12/02/2019	600	INTERNSHIP	LEYTE NORMAL UNIVERSITY	
B	CONTACT CENTER SERV	ICES NCII	08/11/2017	09/02/2017	136	TECHNICAL		
	SEMINAR ON CURRENT TRENDS IN OF	FICE ADMINISTRATION	08/29/2012	08/29/2012	3	ADMINISTRATIVE	LEYTE COMM TRAINING CENTER INC.	
	IN-SERVICE TRAINING FOR SENIOR HI	GH SCHOOL TEACHER	08/01/2022	08/03/2023	24	CURRICULUM	EASTERN VISAYAS STATE UNIVERSITY	
	PROFESSIONAL LEARNING O	OMMUNITIES	03/02/2023	03/04/2023	24	EDUCATION	HOLY INFANT COLLEGE TACLOBAN CITY	
							PHOENIX PUBLISHING CEBU CITY	
is G			o o					
/								
e G								
/								
j.								
		(Co.	ntinue on separat	e sheet if necessar	v)			
VIII. OTI	HER INFORMATION	100						
31.	SPECIAL SKILLS and HOBBIES	32. NOI		INCTIONS / RECO	GNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
	PHOTOGRAPHY	CERTIFICATE OF RECOGNITION		the corporate	value of INTEG	RITY (Boardwalk	PHILIPPINE ASSOCIATION OF OFFICE	
TRAVELLING				es inc.)			ADMINISTRATORS TEACHERS CERTIFICATE PROGRAM SOCIETY	
COMPUTER SKILLS								
	INTERPERSONAL SKILLS							
	COMMUNICATION SKILLS							
	conservation per transcription (1997) 123 - 30,000 Per 250 DFT (1							
				e sheet if necessar	y)			
	SIGNATURE	8884			D	ATE	JUNE 3,2024	

IV. CIVIL SE	RVICE ELIGI	BILITY							
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER		RATING	DATE OF	DI ACE CE EVALUITA			LICENSE (if a	1	
SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE		(If Applicable)	EXAMINATION / CONFERMENT		TION / CONFERMENT		NUMBER	Date of Validity	
PROFESSIONAL TEACHER			80.00%	09/29/2019	SAGKAHAN NATIO TACLOE	NAL HIGH S BAN CITY	CHOOL	1836525	02/16/2023
			10-						
TOTAL CONTRACTOR OF THE PARTY O	XPERIENCE	at Start from your recent		of duties should be	if necessary) indicated in the attached	Work Expe	rianca shaat		
28. INCLU	SIVE DATES						SALARY/ JOB/ PAY GRADE (if		GOVT
From	n/dd/yyyy) To	POSITION T (Write in full/Do not			ENCY / OFFICE / COMPANY I/Do not abbreviate)	MONTHLY SALARY	applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	SERVICE (Y/N)
07/01/2021	06/16/2024	SENIOR HIGH SCHO	OL TEACHER	HOLY INFANT COI	LEGE TACLOBAN CITY	11000.00		CONTRACTUAL	
09/01/2017	12/31/2017	RESEARCH AS	SISTANT		ASIS CONTROL AND RH HOSPITAL	8000.00		CONTRACTUAL	
02/28/2017	08/28/2017	DOCUMENTERE/F	ACILITATOR	CENTER FOR APP	PLIED SOCIAL SCIENCE	7000.00		CONTRACTUAL	
08/06/2013	02/15/2017	OFFICE ADMIN / N		BOARDWALK B	ND DEVELOPMENT USINESS VENTURES	12000.00		REGULAR	
		RECRUITMENT A	SSOCIATE	INCO	RPORATED				
2 0									13
			ž.						
									8
			, ,	4					
SIGNATURE				ntinue on separate sheet	DATE		JUNE	3, 2024	
							CS	FORM 212 (Revised 2	017), Page 2 of 4

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	V									
2. SURNAME	URNAME MAGLANGIT									
FIRST NAME	RAFFY	NAME EXTENSION (JR., SR)								
MIDDLE NAME	MIDDLE NAME CANCILLER									
DATE OF BIRTH (mm/dd/yyyy)	I FEBRUARY IN 1994			16. CITIZENSHIP			Dual Citizenship	by naturaliz	ation	
4. PLACE OF BIRTH	PALO, LEYTE		If holder of dual citizenship,		☐ by birth ☐ by naturalization Pls. indicate country:					
5. SEX	✓ Male	Female	please indicate the details.						_	
6 CIVIL STATUS		Married	17. RESIDENTIAL ADDRESS				Street			
	☐ Widowed ☐ Other/s:	Separated			se/Block/Lot No odivision/Village					
7. HEIGHT (m)	1.58 m				ty/Municipality	,		Barangay		
8. WEIGHT (kg)	50 kg		ZIP CODE		ty/Muriicipality		Province			
9. BLOOD TYPE	0		18. PERMANENT ADDRESS	Hausa Dical II at Na			PIO PEDROSA STREET			
10. GSIS ID NO.					use/Block/Lot No.			Street NAGA-NAGA		
11. PAG-IBIG ID NO.					bdivision/Village PALO			Barangay LEYTE		
12. PHILHEALTH NO.	13-025218244-7		ZIP CODE	City/Municipality 6501			Province			
13. SSS NO.	0684887288		19. TELEPHONE NO.							
14. TIN NO.	326-343-432		20. MOBILE NO.	096671160			60 / 09082598084			
15. AGENCY EMPLOYEE NO.			21. E-MAIL ADDRESS (if any)	maglangitra			ff0216@gmail.com			
II. FAMILY BACKGROUND									-	
22. SPOUSE'S SURNAME	N/A		23. NAME of CH		HILDREN (Write full name and list all)			DATE OF BIRTH (mm/dd/yyyy)		
FIRST NAME	N/A		NAME EXTENSION (JR., SR)							
MIDDLE NAME	N/A									
OCCUPATION	N/A								15	
EMPLOYER/BUSINESS NAME	N/A									
BUSINESS ADDRESS	N/A									
TELEPHONE NO.		N/A								
24. FATHER'S SURNAME	MAGLANGIT									
FIRST NAME	RUBEN		NAME EXTENSION (JR., SR)							
MIDDLE NAME	RAGMAC									
25. MOTHER'S MAIDEN NAME	CANCILLER								1	
SURNAME	CANCILLER									
FIRST NAME	EVA									
MIDDLE NAME	CENTINO			(Continue on separate sheet if necessary)						
III. EDUCATIONAL BACKGR										
26. LEVEL	NAME OF SCHOO (Write in full)	L	BASIC EDUCATION/DEGRE (Write in full)	E/COURSE	PERIOD OF A	To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED	
ELEMENTARY	NAGA-NAGA ELEMENTAR	r SCHOOL	ELEMENTARY		2000	2005	Graduated	2005	3RD HONOR	
SECONDARY	PALO NATIONAL HIGH SCHOOL		SECONDARY		2005	2009	Graduated	2009	NONE	
VOCATIONAL / TRADE COURSE	NONE									
COLLEGE	EASTERN VISAYAS STATE UNIVERISTY		BACHELOR OF SCIENCE IN OFFICE ADMINISTRATION		2009	2013	Graduated	2013	NONE	
	LEYTE NORMAL UNIVE	UNIVERSITY TEACHER CERTIFICATE		PROGRAM	2018	2020	Graduated	2020	NONE	
GRADUATE STUDIES			MASTERS IN EDUCATION MAJ STUDIES	JOR IN SOCIAL	2023		9 Units			
			ontinue on separate sheet if nece	essary)					· ·	
SIGNATURE		884	t		DATE JUNE 3, 2024					