S Form No. 212 evised 2017	PERSOI	NAL DAT			strative/crir	ninal case/s agai	nst the person	n
oncerned.	TO BUILING OUT THE PERSONAL DATA SHEE	ET (PDS) BEFORE ACCOMP	LISHING THE PE	S FORM			Do not fill up. For	
rint legibly. Tick appropriate boxe	s) and use separate sheet if necessary. Indicat	e N/A if not applicable. DO NO	T ABBREVIATE.	11.	CS ID No.		Do not lis up. For	CSC use only
PERSONAL INFORMATION								
2 SURNAME	Nierras				N	AME EXTENSION (JR., S	R)	
FIRST NAME	Kyle anthony							
MIDDLE NAME 3. DATE OF BIRTH	Fiel	40 OTT/751/01/10				- 1 6W		
(mm/dd/yyyy)	01/24/2001	16. CITIZENSHIP		Filipino Dual Citizenship by birth by na		by naturaliza	tion	
4. PLACE OF BIRTH	Naval, Biliran	If holder of dual citizes	nship,	Pls. indicate country		untry:		
5. SEX	Male Female	please indicate the de	dails.					
	☑ Single ☐ Married	17. RESIDENTIAL ADDRESS						
6 CIVIL STATUS	☐ Widowed ☐ Separated		House	/Block/Lot No.		Gua	olalupe	
	Other/s:			wision/Village			Barangay	
7. HEIGHT (m)	1.72			/Municipality		- C	Province	
8. WEIGHT (kg)	40	ZIP CODE						
9. BLOOD TYPE	0+	18. PERMANENT ADDRESS	House	e/Block/Lot No.			Street	
10. GSIS ID NO.			Subo	fivision/Village		Gue	Barangay	
11. PAG-IBIG ID NO.			Calub			Le	yte Province	
12. PHILHEALTH NO.		ZIP CODE	4534	rivianispanty		STATE OF THE		
		19. TELEPHONE NO.	4.71					
13. SSS NO.			AGARA	21.200	G			
14. TIN NO.		20. MOBILE NO.	kyleanthony 47 @gmail.com					
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)	Kylean	Mony	11009	mail. on	1	
II. FAMILY BACKGROUN	ID .		23, NAME of CHIL	DREN (Write	full name and	ist aft	DATE OF BIRTI	H (mm/dd/yyy
22. SPOUSE'S SURNAME		NAME EXTENSION (JR., SR)	25, To the Grant					
FIRST NAME			1					
MIDDLE NAME								
OCCUPATION			-					
EMPLOYER/BUSINESS NAME			-					
BUSINESS ADDRESS			+					
TELEPHONE NO.	Waren		+					
24. FATHER'S SURNAME	Nievras	NAME EXTENSION (JR., SR)						
FIRST NAME	Antonio							
MIDDLE NAME 25 MOTHER'S MAIDEN NAME	Genogun							
	Nierras							
SURNAME	Flordeliza		1					
FIRST NAME MIDDLE NAME	Fiel			(0	ontinue on se	parate sheet if neces	ssary)	
III. EDUCATIONAL BAC								
26.	NAME OF SCHOOL	BASIC EDUCATION/DEG	SREE/COURSE	PERIOD OF	ATTENDANCE	HIGHEST LEVEL/	YEAR	SCHOLARSH ACADEMIC
LEVEL .	(Write in full)	(Write in ful		From	То	UNITS EARNED (if not graduated)	GRADUATED	HONORS RECEIVED
	Calubian South Central			2007	2012		2012	
ELEMENTARY	JHS - Calubian National HS	Sciena Tedenal van	and Engineer		2011			
SECONDARY	SHS - Western Leste college	science Technology ng (STE)	tendrology (2018	2019		2019	

VOCATIONAL / TRADE COURSE

GRADUATE STUDIES

SIGNATURE

COLLEGE

Visayas State University

Ryle

2025

2020

BS - Computer Science

2025

CIVIL SERVICE ELIGIE		parais	DATE OF			ITALT.	LICENSE (if app	-
SPECIAL LAW	REER SERVICE/ RA 1000 (BOARD) BRY CROSS RATING RATING EXAMINATION PLACE OF EXAMINATION		ION / CONFERM	ENI	NUMBER	Date of Validity		
BARANGAY ELIGIBILIT	Y / DRIVER'S LICENSE		OOI LI WEN		entre de la companya			
			111111111111111111111111111111111111111					
		(C)	ontinue on separate sheet i	f necessary)				
WORK EXPERIENCE								
WORK EXPERIENCE clude private employme	nt. Start from your rec	ent work) Descript	on of duties should t	e indicated in the attac	hed Work Ex	perience she	et.	
INCLUSIVE DATES	POSITION			NCY / OFFICE / COMPANY	MONTHLY	GRADE M	STATUS OF	GOV SERVI
(mm/dd/yyyy)	(Write in full/Do n		(Write in full	/Do not abbreviate)	SALARY	applicable)& STEP (Format "90-0")/ INCREMENT	APPOINTMENT	(Y/ N
From To		1. /	8 - 1 TI	Schrister	14 9/4		Part time	N
19 2024 June 2021	Front - End Peux	supper (WBb)	Byandev It	Solutions	19,960			1.
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	K OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT NAME & ADDRESS OF ORGANIZATION	INCLUSIVE DATE (mm/dd/yyyy)	S NUMBER OF HOURS		POSITION / NATURE OF WORK
	(Write in full)		To		
19					
	(C	ontinue on separate sheet i	necessary)		
LEARNING AND	DEVELOPMENT (L&D) INTERVENTIONS/TRAINING F	INCLUSIVE DATE	S OF	T(10	
TITLE OF LEAR!	NING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS	ATTENDANC	E MANAGE OF HOUSE	Type of LD (Managerial/ Supervisory/	CONDUCTED/ SPONSORED BY (Write in full)
THE OF LOW	(Write in full)	(mm/dd/yyyy		Technical/etc)	(***) (*** *** ****)
		From	То		
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THE STATE OF THE					
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		(Continue on separate she	et if necessary)		
VIII. OTHER INFO	PULATION				
THE OTHER BY OF		NON-ACADEMIC DISTINC	IONS / RECOGNITION		MEMBERSHIP IN ASSOCIATION/ORGA
31. SPECIA	L SKILLS and HOBBIES 32.	(Write in			33. (Write in full)
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Are you related by consanguinity or affinity to the appointing or chief of bureau or office or to the person who has immediate Bureau or Department where you will be apppointed,	supervision over you in the Office,	☐ YES ☑ NO	
a. within the third degree?	YES NO		
b. within the fourth degree (for Local Government Unit - Care	er Employees)?	If YES, give details:	
		ii 120, give detaile.	
a. Have you ever been found guilty of any administrative offe	inse?	☐ YES ☑ NO	
a. Have you ever been found guilty of any authinious days one		If YES, give details:	
		☐ YES ☑ NO	
b. Have you been criminally charged before any court?		If YES, give details:	
		Date Filed:	
		Status of Case/s:	
Have you ever been convicted of any crime or violation of an	ny law, decree, ordinance or regulation by	☐ YES ☑ NO	
any court or tribunal?		If YES, give details:	
7. Have you ever been separated from the service in any of the	e following modes: resignation, retirement,	☐ YES ☑ NO	
dropped from the rolls, dismissal, termination, end of term, fi	inished contract or phased out (abolition)	If YES, give details:	
in the public or private sector?	after hald within the last year lavaent		
8. a. Have you ever been a candidate in a national or local ele Barangay election)?	cool her winin he isst hear favoahr	☐ YES ☑ NO If YES, give details:	
	ha three (O) wouth would hadou the lock	YES NO	
 b. Have you resigned from the government service during the election to promote/actively campaign for a national or local 	ne three (3)-month period before the last	If YES, give details:	
Have you acquired the status of an immigrant or permanen	troduction andular obtains y :	YES NO If YES, give details (country):	
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma	igna Carta for Disabled Persons (RA 7277)		
and (c) Solo Parents Welfare Act of 2000 (RA 8972), please	e answer the following items:		
Are you a member of any indigenous group?		YES NO	
		If YES, please specify:	
Are you a person with disability?		If YES, please specify ID No:	
c. Are you a solo parent?		☐ YES ☑ NO	
		If YES, please specify ID No:	
41. REFERENCES (Person not related by consanguinity or affinity to applic	ant /appointee)		
NAME	ADDRESS	TEL. NO.	E TOWN
42. I declare under oath that I have personally accomplish	ed this Personal Data Sheet which is a	true, correct and	
complete statement pursuant to the provisions of pert	linent laws, rules and regulations of the	Republic of the	
Philippines. I authorize the agency head/authorized repre agree that any misrepresentation made in this do	cument and its attachments shall car	and the films of	Agle .
administrative/criminal case/s against me.		Nerms., Kyli	Chilliong Tiel
Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance	1.0		
Government Issued ID:	lyli		
	Signature (Sign inside th		
ID/License/Passport No.:	e DOX)		
Date/Place of Issuance:	Date Accomplished	Right	Thumbmark
		iting his/her validly issued government ID as ind	licated above
SUBSCRIBED AND SWORN to before me this	, amant exhib	nung marier validiy issued government ib as ind	notion above.
The second secon		St. St. St. St. St. St. St.	
	Person Administering (ath	