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. (Do not fill up. For CSC use only Print legibly, Tick appropriate boxes (🔲 nd use separate sheet if necessary, Indicate N/A if not applicable, DO NOT ABBREVIATE, PERSONAL INFORMATION 2. SURNAME NERI NAME EXTENSION (JR., SR) VICTOR FIRST NAME MIDDLE NAME SAMOYA 3. DATE OF BIRTH 16. CITIZENSHIP 12/10/1999 Filipino Dual Citizenship (mm/dd/yyyy) by birth by naturalization AMGUHAN, BAYBAY CITY, LEYTE 4. PLACE OF BIRTH Pls. indicate country: If holder of dual citizenship. please indicate the details. Female • 5. SEX √ Male Single Married 17 RESIDENTIAL ADDRESS N/A N/A 6 CIVIL STATUS 9/Block/Lot No Widowed Separated **AMGUHAN** N/A Other/s: Subdivision/Ville Barangay **BAYBAY CITY LEYTE** 7. HEIGHT (m) 1.67 m City/Municipality Province ZIP CODE 8. WFIGHT (kg) 72 kg 6521 18. PERMANENT ADDRESS N/A N/A 9. BLOOD TYPE UNKNOWN House/Block/Lat Na N/A **AMGUHAN** 10 GSIS ID NO N/A bdivision/Village Barangay **BAYBAY CITY** LEYTE 11. PAG-IBIG ID NO. N/A 12. PHILHEALTH NO. 13-202845982-7 ZIP CODE 6521 13. SSS NO. N/A 19. TELEPHONE NO. N/A 14. TIN NO. 613-996-325-00000 20. MOBILE NO. 09950279652 15. AGENCY EMPLOYEE NO. N/A 21. E-MAIL ADDRESS (if any) victorsamuya17@gmail.com FAMILY BACKGROUND 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) 22. SPOUSE'S SURNAME N/A NAME EXTENSION (JR., SR) FIRST NAME N/A N/A N/A MIDDLE NAME N/A N/A N/A N/A N/A OCCUPATION N/A EMPLOYER/BUSINESS NAME N/A N/A N/A **BUSINESS ADDRESS** N/A N/A N/A TELEPHONE NO. N/A N/A N/A NERI N/A N/A 24. FATHER'S SURNAME NAME EXTENSION (JR., SR) **FEDELINO** N/A N/A FIRST NAME **VILLASOTES** N/A N/A MIDDLE NAME 25. MOTHER'S MAIDEN NAME N/A N/A N/A N/A SURNAME SAMUYA FIRST NAME **GLORIA** N/A **BARCOS** (Continue on separate sheet if necessary) MIDDLE NAME EDUCATIONAL BACKGROUND SCHOLARSHIP! HIGHEST LEVEL 26. BASIC EDUCATION/DEGREE/COURSE PERIOD OF ATTENDANCE NAME OF SCHOOL UNITS EARNED LEVEL (Write in full) (Write in full) GRADUATED HONORS (if not graduated) From To RECEIVED VALEDICT AMGUHAN ELEMENTARY SCHOOL PRIMARY EDUCATION 2006 2012 2012 ELEMENTARY ORIAN SCIENCE, TECHNOLOGY, WITH BAYBAY CITY SENIOR HIGH SCHOOL **ENGINEERING, AND** SECONDARY 2012 2018 2018 **HONORS MATHEMATICS** VOCATIONAL / N/A N/A N/A N/A N/A N/A TRADE COURSE BACHELOR OF SCIENCE IN VISAYAS STATE UNIVERSITY COLLEGE 2018 2022 2022 N/A **DEVELOPMENT COMMUNICATION** N/A N/A N/A N/A **GRADUATE STUDIES** N/A N/A (Continue on separate sheet if necessary) DATE SIGNATURE March 26, 20 24

7. CAREER	SERVICE ELIGIBILITY ER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL RATING DATE OF EXAMINATION /				MENT	LICENSE (if applicable)			
LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE				CONFERMENT	PLACE OF EXAMINATION / CONFERMENT			NUMBER	Date of Validity
CAREER SERVICE EXAMINATION- PROFESSIONAL 81.049			81.04%	3/26/2023 MAASIN CITY, S		SOUTHERN LEYTE		23-13221908	JULY 21, 20
	XPERIENCE te employment. St	art from your recent wo	rk) Description	(Continue on separate	sheet if necessary) dicated in the attached	Work Experie	nce sheet.		
. INCLUSIVE DATES (mm/dd/yyyy) POSITION TITLE (Write in ful/Do not abb			DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)		MONTHLY SALARY	SALARY/JOB/PAY GRADE (ifapplicable) & STEP (Format*00-0*)/ INCREMENT		GOV'T SERVICE (Y/ N)	
7/01/2023	PRESENT	CONSULTAN	Т	DISTRICT OF LI NICOLA	IFTH LEGISLATIVE EYTE- REP. CARL S C. CARI	11,500.00	N/A	CONTRACTUAL	Υ
1/01/2023	06/30/2023	CONSULTAN	Т	DISTRICT OF LI NICOLA	IFTH LEGISLATIVE EYTE- REP. CARL S C. CARI	11,500.00	N/A	CONTRACTUAL	Υ -
08/01/2022	12/31/2022	CONSULTAN	Т -	OFFICE OF THE FIFTH LEGISLATI DISTRICT OF LEYTE- REP. CARL NICOLAS C. CARI		11,500.00	N/A	CONTRACTUAL	Υ
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SIGNA	TURF		λ,	(Continue on separate s	heet if necessary) DATE	14	ch 26	2.41	

VI. VOLUNTARY WORK OR INVOLVEMEN	IT IN CIVIC / NON-COVERNMENT	PEODLE / VO	I HAITARY OF	PGANIZATION	VS		
29. NAME & ADDRESS OF	F ORGANIZATION	INCLUSI	VE DATES		/5		
(Write in	ı full)	From	d/yyyy) To	NUMBER OF HOURS		POSITION / NATURE OF WORK	
LIHOK BAYBAY ELECTION R	03/25/2022	04/25/2022		PH	IOTOGRAPHER/VIDEOGRAPHER		
RADYO KABATAAN- A RADIO PROGRAM FEDERATION OF BA	10/01/2020	03/01/2021			HOST/RADIO DJ		
·							
VII. LEARNING AND DEVELOPMENT (L&			sheet if necessary,		SECULIA DE LA COMPANSIONA DEL COMPANSIONA DE LA		
		A STATE OF THE PARTY OF THE PAR	OF ATTENDANCE		Type of LD		
	30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)			NUMBER OF HOURS	(Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
BASICS OF RES	SILIENCE	01/15/2024	02/16/2024	16 HRS	OTHERS	UNIVERSITY OF THE PHILIPPINES OPER UNIVERSITY	
OJT AT BAYBAY CITY INF	ORMATION OFFICE	01/12/2022	12/31/2023	200 HRS	TECHNICAL	BAYBAY CITY INFORMATION OFFICE	
ABS-CBN PINOY MEDIA CONGR	RESS DIGITAL CARAVAN	12/03/2022	12/03/2022	8 HRS	TECHNICAL	ABS-CBN AND PACE	
REGIONAL TRAINING FOR NATIONAL QUALIFIE		01/13/2018	01/16/2018	24 HRS	TECHNICAL	DEPED REGION 8	
MEDIA FEST	TVAL	04/08/2016	06/08/2016	24 HRS	TECHNICAL	COMARTS TRAINING CENTER	
		فأعسسا	40-15				
						700	
		=					
		1.1.1.1					
	(Con	tinue on separate :	sheet if necessary)				
VIII. OTHER INFORMATION	NO.	N-ACADEMIC DISTIN	ICTIONS / RECOGN	ITION		MEMBERSHIP IN ASSOCIATION/ORGANIZATION	
31. SPECIAL SKILLS and HOBBIES	32.	(Writ	e in full)		.h 2040 in	33. (Write n full) DEVELOPMENT COMMUNICATION	
HOSTING	National Qualifier for Rad	National Qualifier for Radio Broadcasting Secondary English in Feb 2018 in Dumaguete City					
VOICE OVER	Research Presenter at the 5th	Research Presenter at the 5th International 6th National TEStcon 2018 at Marco Polo Hotel, Cebu City					
PHOTOGRAPHY	BCSHS Most Outsta	HOPE VSU					
VIDEOGRAPHY	N/A					N/A	
MS OFFICE	N/A					N/A	
SINGING AND THE	N/A				N/A		
N/A	, (Con	N/A	sheet if necessary)	3.137		N/A	
SIGNATURE	1 1	. ·	, , , vecoai y /	(1) of particular co	ATE	March 26, 2024	
	The state of the s					CS FORM 212 (Revised 2017), Page 3 c	

34. Are you related by consanguinity or affinity to the appoin chief of bureau or office or to the person who has immed							
Bureau or Department where you will be appointed,							
a. within the third degree?	YES .	NO					
b. within the fourth degree (for Local Government Unit -	If YES, give details:	NO					
35. a. Have you ever been found guilty of any administrative	offense?		NO				
	If YES, give details:						
h Haya yay haan ariminally sharged hafara any sayut?	☐ YES [7	, NO					
b. Have you been criminally charged before any court?	If YES, give details:	/ NO					
	Date Filed: Status of Case/s:						
36. Have you ever been convicted of any crime or violation of any court or tribunal?	YES , NO						
	If YES, give details:						
37. Have you ever been separated from the service in any o		YES , NO					
dropped from the rolls, dismissal, termination, end of termination the public or private sector?	n, finished contract or phased out (abolition) in	If YES, give details:					
38. a. Have you ever been a candidate in a national or local Barangay election)?	election held within the last year (except	YES NO If YES, give details:					
b. Have you resigned from the government service durin	g the three (3)-month period before the last	YES VO					
election to promote/actively campaign for a national or lo	If YES, give details:						
39. Have you acquired the status of an immigrant or perman	YES NO If YES, give details (country):						
经济的基本的			тиу).				
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) M	Magna Carta for Disabled Persons (RA 7277);						
and (c) Solo Parents Welfare Act of 2000 (RA 8972), plea Are you a member of any indigenous group?	ase answer the following items:						
Are you a member or any mulgenous group?	If YES, please specify:	NO					
b. Are you a person with disability?	YES If YES, please specify ID N	O. NO					
c. Are you a solo parent?	Are you a solo parent?						
44. DEFEDENCE OF		If YES, please specify ID N	0:				
41. REFERENCES (Person not related by consanguinity or affinity to application) NAME	ADDRESS	TEL. NO.					
JILL VIVIENNE Y. LEE	QUEZON CITY	0917-895-4916					
MRS. MARISSA M. CANO	BAYBAY CITY, LEYTE	0975-878-2331					
DR. ROTACIO S. GRAVOSO		0935-594-1621	7				
42. I declare under oath that I have personally accomplishe	d this Personal Data Sheet which is a true, corr						
statement pursuant to the provisions of pertinent laws, ru the agency head/authorized representative to verify	les and regulations of the Republic of the Philip	pines. I authorize					
misrepresentation made in this document and its atta		agree that any re/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: BIR TIN CARD	The man	. 11					
ID/License/Passport No.: 613-996-325-00000	Signature (Sign inside the b	ox _f					
Date/Place of issuance: 05-SEP-2022/ORMOC CITY, LEYTE		Right Thumbmark					
APR	Date Agromy Ished	Z-BUTAWAN					
SUBSCRIBED AND SWORN to before me this	THEY PUBLIC FOR THE, EMBAN WHISTIN	his/frervalidly issued government	4Y 6A1 nent ID as indicated above.				
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