CS Form No. 212									
Revised 2017	PERSO	NAL DAT	'A SH	HEE	Т				
WARNING: Any misrepresent concerned.	tation made in the Personal Data Sheet and to					ve/criminal case.	's against the	person	
READ THE ATTACHED GUID	E TO FILLING OUT THE PERSONAL DATA SI	HEET (PDS) BEFORE ACCO	MPLISHING	THE PDS F	ORM.		(De set fill up	For CSC use only	
I. PERSONAL INFORMATION	es () and use separate sheet if necessary. Indicate	WA if not applicable. DO NOT	ABBREVIATE		1. CS ID No		(Do not its up.	FBI CSG GSS GIS	
2, SURNAME	PEMING								
FIRST NAME	NEWA TE					NAME EXTENSION (IR. SRI		
MIDDLE NAME	PEDRA					I MA			
3. DATE OF BIRTH		16. CITIZENSHIP				7			
(mm/dd/yyyy)	02/13/2000	To. OTTECHOIN		2 Filip	oino [Dual Citizenship by birth	by natura	lization	
4. PLACE OF BIRTH	CADALIWAN, MERIDA, LETTE	If holder of dual citize	enship,			Pls. indicate			
5. SEX	☐ Male	please indicate the o	details.					-	
6 CIVIL STATUS	☑ Single ☐ Married	17. RESIDENTIAL ADDRESS					PROPER Street		
	Widowed Separated		Ho	use/Block/Lot I	No.	CA			
	Other/s:			Subdivision/Village			CANBANTUG Barangay LEYTT		
7. HEIGHT (m)	1:48			MERIDA City/Municipality			Province		
8. WEIGHT (kg)	42	ZIP CODE					HPADCH		
9. BLOOD TYPE	NA	18. PERMANENT ADDRESS	Hou	use/Block/Lot I	Vo.	PROPER Street			
10. GSIS ID NO,	NA		Su	ubdivision/Villag	70	0	ANDANTVG Barangay		
11. PAG-IBIG ID NO.	121305 972 698			MERDA City/Municipality		LFY TF Province			
12. PHILHEALTH NO.	13-2507086407	ZIP CODE	The second secon				FIONING		
13. SSS NO.	06-459765-2	19. TELEPHONE NO.	NIA						
14. TIN NO.	613-554-967-0000	20, MOBILE NO.	प्राज्य वर्ष						
15. AGENCY EMPLOYEE NO.	YA AY	21. E-MAIL ADDRESS (if any)	peringnan		1136) AN	vail-com			
II. FAMILY BACKGROUND			Tomogram	Offercan	No- gi		Value	Baller	
22. SPOUSE'S SURNAME	N/A		23. NAME of Ch	HILDREN (Writ	te full name an	d list all)	DATE OF BIR	TH (mm/dd/yyyy)	
FIRST NAME	N/A	NAME EXTENSION (JR., SR)		N/A		N/A			
MIDDLE NAME	NJA								
OCCUPATION	W/A								
EMPLOYER/BUSINESS NAME	NIA								
BUSINESS ADDRESS	N/A								
TELEPHONE NO.	N/A								
24. FATHER'S SURNAME	FENIN G								
FIRST NAME	FELIX	NAME EXTENSION (JR., SR)							
MIDDLE NAME	CUCTODIO								
25. MOTHER'S MAIDEN NAME									
SURNAME	PEDRA								
FIRST NAME	NILDA								
MIDDLE NAME	PHALDE			(Co	ontinue on se	parate sheet if neces	sary)		
III. EDUCATIONAL BACKG	ROUND							SCHOLARSHIP/	
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGRE (Write in full)	E/COURSE	PERIOD OF /	To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	ACADEMIC HONORS RECEIVED	
ELEMENTARY	CANBANTUG FLEHEUTARY SCHOOL	PRIMARY EDUCA		2006	2012	WA	2012	+OVETH HONOR	
SECONDARY	PUERTO DELLO PATIONAL HIGH SQU	DOL JUNDE HIGH O	CHOOL	20/2	2018	NIA	298	HONOR	
VOCATIONAL / TRADE COURSE	N/A	N/A		N/A	NA	N/A	NA	N/A	
COLLEGE	VISAYAS STATE UNIVERSITY			2018	2022	IMA	2022	CUM	
GRADUATE STUDIES	N/A	MY		NA	N/A	N/A	N/A	N/A	
SIGNATURE	Sand	ontinue on separate sheet if nece	essary)	DA	TE	bi	26/2024		
	.,,,,,,,	-						12017), Page 1 of 4	



IV. CIVIL SERVICE E	LIGIBILITY							
SPECIA	RA 1080 (BOARD/BAR) UNDER NL LAWS/ CES/ CSEE GIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINA			LICENSE (if ap	Date of Validity
HONOR GRADULA	HE EUGIDILITY	P/4	JANUARY 14, 2023	CIVIL (ERVICE VIII - PALO. 1	COMMISSIN	ON REGION	100108230028	AUGUST 05, 2022
11-1- 41-7(100)	ne one pierri		I WI WAS	VIII TALV.	M. 7.10			
		10-	ntinue on separate sheet	if names and				
V. WORK EXPERIEN	ICE							
	yment. Start from your recei	nt work) Descriptio	n of duties should b	e indicated in the attache	d Work Exp	SALARY/ JOB/ PAY		GOVT
28. INCLUSIVE DATES (mm/dd/yyyy)	POSITION 1 (Write in full/Do not			ENCY / OFFICE / COMPANY /Do not abbreviate)	MONTHLY SALARY	GRADE (if applicable) & STEP (Format "00-0")/	STATUS OF APPOINTMENT	SERVICE (Y/N)
From To				LIMENT /CONTHONALLA	80.0	SALARY GRADE 10	PPOD/th-N/M	/ N
03/01/2013/09/15/20	23 BRANCH ADMINIUM ASSOCIATANT	141100	tcallopulc 1	JENTURES INC OPINUO	f9,782	GRADEIO	PROBATIONAR.	/ N
		-						
37								
(4) E								
			8					
0/04/47/17	1		tinue on separate sheet	necessary) DATE		0/24/2	102.1	
SIGNATURE	Kant			DATE		9/4/2	(0) 1 4 FORM 212 (Revised 20	17), Page 2 of 4



VI VOLUNTARY WORK OR INVOLVEMENT	IN CIVIC NON-GOVERNMENT	/PEOPLE / VO	DLUNTARY O	RGANIZATIO	N/S		
29. NAME & ADDRESS OF C (Write in fu		INCLUSIVE DATES (mm/dd/yyyy) From To			POSITION / NATURE OF WORK		
V/A		NIA	N/A	MIA		MA	
(4/1)			SUATO				
		tinue on separate					
VII. LEARNING AND DEVELOPMENT (L&D) (Start from the most recent L&D training program and inclu-	INTERVENTIONS TRAINING PR de only the relevant L&D/training taken for	the last five (5) yes	rs for Division Ch	ief Executive Man	agerial positions)		
30. TITLE OF LEARNING AND DEVELOPMENT INTI (Write In ful			DATES OF DANCE d/yyyy)	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/	CONDUCTED/ SPONSORED BY (Write in full)	
		From	То		Technical/etc)	KALAH - CIDJ'S NODDP, MERIDA	
COMMUNITY FINANCE TRAIN	NG	1110 2022	11/11/2022	14	FOUNDATION		
DN-THE- JOB TRAINING	1	11/7/2017	12/20/2013	80	COPERATIVE	COPERATIVE COLVEMP(0)	
	(Conti	nue on separate sh	neet if necessary)				
VIII. OTHER INFORMATION	STATE OF STA						
31. SPECIAL SKILLS and HOBBIES	32. NON-A	CADEMIC DISTING (Write i		ITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
MUIC ACCOUNTING	NA				N/A		
BASIC COMPUTER LITERATE			915				
ACCOUNTABILITY							
IMTEGRITY							
TUEXIBILITY							
COMMUNICATION SHUS							
	(Contli	nue on separate sh	eet if necessary)				
SIGNATURE	flant			DA	TE	0 20 7074 CS FORM 212 (Revised 2017), Page 3 of 4	



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?	YES NO				
b. within the fourth degree (for Local Government Unit - Ca	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?	☐ YES				
36. Have you ever been convicted of any crime or violation of a by any court or tribunal?	☐ YES ☐ NO If YES, give details:				
37. Have you ever been separated from the service in any of th retirement, dropped from the rolls, dismissal, termination, e 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 ele Barangay election)?	☐ YES ☑ NO If YES, give details:				
b. Have you resigned from the government service during the election to promote/actively campaign for a national or local	☐ 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. 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	t /appointee)				
NAME	ADDRESS	TEL. NO.			
ELWIN P. GARCIA	BAYBAY CITY	09380230772			
TESSE MICA CACEPES	DANOC CITY	विधा अवस्था १			
LECIL N- MANAGBANAG 42. I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertine Philippines. I authorize the agency head/authorized representation made in this doct administrative/criminal case/s against me.	ent laws, rules and regulations of the esentative to verify/validate the content	Republic of the s stated herein.			
Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: PHILHEALTH ID ID/License/Passport No.: 3-250708(40-7) Date/Place of Issuance: 03 1003 0000 CITY	ox) Right Thumbmark				
SUBSCRIBED AND SWORN to before me this	6 JAN 2024 , affiant exhibit	ting his/her validly issued government ID as indicated above.			
	Parent Administration (c)	1			
	Person Administering Gal	CS FORM 212 (Revised 2017), Page 4 of			

WORK EXPERIENCE SHEET

Instructions: 1. Include only the work experiences relevant to the position being applied to.

- 2. The duration should include start and finish dates, if known, month in abbreviated form, if known, and year in full. For the current position, use the word Present, e.g., 1998-Present. Work experience should be listed from most recent first.
- · Duration: March 1, 2023 September 15, 2023
- Position: Branch Administrative Assistant
 Name of Office/Unit: Finance Department 1 CEVI-OFMOC
- Immediate Supervisor: Jesce Nica Cactors / Fluin Gavoia
 Name of Agency/Organization and Location: COMMUNITY ECONOMIC VENTURES IN C. ORMOC
 - · List of Accomplishments and Contributions (if any)
 - Attended online training to the new cyclem used in creating, processing and approving loan applications are well are parting payments and other clients tran-
 - Summary of Actual Duties
 - Responsible in cautiering Functions, tetty cash custodian, processing loan applications and administrative functions within a branch office.
- Duration:
- Position:
- Name of Office/Unit:
- Immediate Supervisor:
- Name of Agency/Organization and Location:
 - List of Accomplishments and Contributions (if any)

Summary of Actual Duties

FE PENING NENIA (Signature over Printed Name of Employee/Applicant)

Date: 01/26 2024