CS Form No. 212

Revised 2017

## PERSONAL DATA SHEET

oncerned.	ion made in the Personal Data Sheet and the	ET (PDS) BEFORE ACCOMP	LISHING TH	E PDS FORM.	CS ID No.		(Do not fill up. F	or CSC use only)
rint legibly. Tick appropriate boxes	) and use separate sheet if necessary. Indicate N	I/A II TIOL Applicable. DO NOT ABI	JAL VIA I E.					
	BARABAD			· ·				
				NAME EXTENSION (JR., SR)			SR)	
FIRST NAME	JAY-ANN				la l			
MIDDLE NAME  3. DATE OF BIRTH	LABRAGUE	40 OLTIZENOUID				. au II		
(mm/dd/yyyy)	8/6/1993 16. CITIZENSHIP			✓ Filipino	∐ Di	ual Citizenship  by birth  Pls. indicate co	by natural	ization
4. PLACE OF BIRTH	Catbalogan, Samar	If holder of dual citizenshi				Pis. Illuicate co	unu y.	
5. SEX	☐ Male ☑ Female	please indicate the detail	5.					_
6 CIVIL STATUS			Н	59 ouse/Block/Lot No.		Rudy	Revilla Ave Street	nue
	☐ Widowed ☐ Separated ☐ Other/s:					(	Can-adieng Barangay	
7 UEIQUE (-)	1.53	_	8	Ormoc		,	Leyte	
7. HEIGHT (m)		710 0005		City/Municipality	61	5/1	Province	
8. WEIGHT (kg)	50	ZIP CODE		59		Rudy Revilla Avenue		
9. BLOOD TYPE	0+	18. PERMANENT ADDRESS	Н	ouse/Block/Lot No.			Street	
10. GSIS ID NO.	N/A			Subdivision/Village		(	Can-adieng Barangay	
11. PAG-IBIG ID NO.	1211-4844-9008			Ormoc City/Municipality			Leyte Province	
40 PHILLIPALTUNO	13-050174231-8	ZIP CODE		6541			Flovince	
12. PHILHEALTH NO.				0047	(050) (	200 7070		
13. SSS NO.	06-3543278-4	19. TELEPHONE NO.			(053) 8	332-7376		
14. TIN NO.	465-700-942	20. MOBILE NO.		+63910-521-9303				
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	jbarabad@gmail.com					
II. FAMILY BACKGROUND								
22. SPOUSE'S SURNAME	N/A		B. NAME of CH	LDREN (Write full	name and list all	)	DATE OF BIF	RTH (mm/dd/yyyy
FIRST NAME	N/A	NAME EXTENSION (JR., SR)		N	I/A			N/A
MIDDLE NAME	N/A							
OCCUPATION	N/A							
EMPLOYER/BUSINESS NAME	N/A							
BUSINESS ADDRESS	N/A							
TELEPHONE NO.	N/A							
24. FATHER'S SURNAME	BARABAD							
FIRST NAME	JESUS	NAME EXTENSION (JR., SR)						
MIDDLE NAME	TEODOSIO							
25. MOTHER'S MAIDEN NAME								
SURNAME	LABRAGUE							
FIRST NAME	IMELDA							
MIDDLE NAME	SOLAYAO			(Co	ntinue on separ	ate sheet if necessa	inv)	
III. EDUCATIONAL BACKS							,	
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE (Write in full)	/COURSE	PERIOD OF A	TTENDANCE	HIGHEST LEVEL/ UNITS EARNED	YEAR GRADUATE	SCHOLARSHIP/ ACADEMIC
ELEMENTARY	CAN-ADIENG ELEMENTARY SCHOOL		VEL	From <b>6/7/1999</b>	To 3/24/2006	(if not graduated)	2006	N/A
SECONDARY	NEW ORMOC CITY NATIONAL HIGH SCHOOL			6/5/2006	3/26/2010		2010	N/A
VOCATIONAL / TRADE COURSE	Philippine Call Center Institute	Contact Center Services NCII		7/29/2022	8/23/2022	N/A	2022	1st Honorable Mention
COLLEGE	EASTERN VISAYAS STATE UNIVERSITY - ORMOC CITY	BACHELOR OF SCIENCE		6/10/2010	5/26/2014	N/A	2014	N/A
GRADUATE STUDIES	PALOMPON INSTITUTE OF TECHNOLOGY	MASTER OF MANAG		-		21	N/A	N/A
		(Continue on separate sheet if ne	cessary)					
SIGNATURE	Showar &			DA	TE			
	(10)					CS	FORM 212 (Revis	sed 2017), Page 1 o

IV. CIVIL SERVICE ELIGIBILITY  27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER  PATING			DATE OF				LICENSE (if applicable)		
SDECIVI I VINSI CESI CSEE		RATING (If Applicable)	EXAMINATION / CONFERMENT	EXAMINATION / PLACE OF EXAMINATION / CONFERMENT			NUMBER	Date o	
		sional Examination	80.65%	6/19/2022 New Ormoc City National High School			N/A	N/A	
	XPERIENCE			ntinue on separate sheet i					
. INCLU	SIVE DATES n/dd/yyyy)	POSITION T	TLE	DEPARTMENT / AGE	NCY / OFFICE / COMPANY	MONTHLY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP	STATUS OF	GOV" SERVIO
From	То	(Write in full/Do not	abbreviate)	(Write in full	(Do not abbreviate)	SALARY	(Format *00-0*)/ INCREMENT	APPOINTMENT	(Y/ N
4/11/2013	5/15/2013	OJT		LANDBANK OF	THE PHILIPPINES	-		OJT	Υ
5/13/2013	5/13/2013	PCOS Tech	nician	со	MELEC			Part-time	Υ
10/28/2013	10/28/2013	Third Men	nber	со	MELEC	-	-	Part-time	Y
8/4/2014	7/1/2015	Sales Cl	erk	Electro Computer Data System - Tacloban City				Full-time	N
5/9/2016	5/9/2016	VCM Techr	ician	Comelec - Ventureslink			-	Part-time	Y
7/6/2015	5/14/2019	Principal's Se	ecretary	St. Peter's College of Ormoc			-	Regular	N
5/13/2019	5/13/2019	DESO Technical S	upport Staff	COMELEC		•	•	Part-time	Υ
5/15/2019	9/30/2021	SHS Record Ir	-Charge	St. Peter's College of Ormoc			-	Regular	N
5/9/2022	5/9/2022	DESO Technical S	upport Staff	COMELEC		-	-	Part-time	Υ
10/1/2021	7/31/2022	OIC-Registrar		St. Peter's C	•	-	Regular	N	
		and my	CONTRACTOR OF STREET	ntinue on separate sheet i	f necessary)  DATE				

I. VOLUNTARY WORK OR INVOLVEMENT				ZATTC			
9. NAME & ADDRESS OF OF (Write in full)	GANIZATION		INCLUSIVE DATES (mm/dd/yyyy)  From To			POSITION / NATURE OF WORK	
N/A		N/A	N/A	N/A		N/A	
	(Caroli						
II. LEARNING AND DEVELOPMENT (L&D)	THE PARTY OF THE P	nue on separate si ROGRAMS A1	THE PERSON NAMED IN COLUMN 2 IS NOT THE OWNER, THE PERSON NAMED IN COLUMN 2 IS NOT THE OWNER, THE PERSON NAMED IN COLUMN 2 IS NOT THE OWNER, THE PERSON NAMED IN COLUMN 2 IS NOT THE OWNER, THE PERSON NAMED IN COLUMN 2 IS NOT THE OWNER, THE OWN				
30. TITLE OF LEARNING AND DEVELOPMENT INTE	RVENTIONS/TRAINING PROGRAMS	INCLUSIVE DATES OF ATTENDANCE		Type of LD (Managerial/		CONDUCTI	ED/ SPONSORED BY
<ol> <li>TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)</li> </ol>			d/yyyy) To	NUMBER OF HOURS	Supervisory/ Technical/etc)		Vrite in full)
2018 Regional Orientation for the GASTPE P	rogram Guidelines in SY:2018-	5/31/2018	5/31/2018	8	Managorial	Private Education	n Assistance Committe
2019					Managerial		(PEAC)
DESO Technical Support S		2/28/2019	2/28/2019	8	Technical	Commission on Ele	
2019 Regional Orientation for the GASTPE P 2020	rogram Guidelines III 51:2019-	6/20/2019	6/20/2019	8	Managerial	(PEAC)	Assistance Committee
LIS Enrollment / Encoding SY 20	9-2020 Orientation	7/24/2019	7/24/2019	8	Managerial	Ormoc City Division	1
Tertiary Education Subsidy (TES) Program Orientation on the Gu		8/16/2019	8/16/2019	8	Managerial	Private Education A (PEAC)	Assistance Committee
Empowering Higher Education Institutions towards Greater Access, Equity and			11/29/2019	16	Managerial	Unified Student Fin	ancial Assistance Sys
Global Excellence						for Tertiary Educati UP System Informa	
Digital Tranformation Briefing	tor Executives	9/14/2020	9/16/2020	24	Supervisory	Foundation	
DESO Technical Support Staff Training			2/24/2022	12	Technical	Commission on Ele	
Microsoft PowerPoint Proficiency			2/25/2022	8	Technical	Department of Infor	
A Deep Dive in 5G Network			3/12/2022	4	Technical	Department of Infor	rmation and
						Communication Tec Department of Infor	
Woman of ICT for Education: Empowering V		3/12/2022	3/12/2022	3	Technical	Communication Te	chnology (DICT)
Gender Inequality in Graphic Design: What Ca Gap	n Be Done to Bridge the Gender	3/23/2022	3/23/2022	8	Technical	Department of Information Territory	
Animation as a Side Hustle in the New Nor Animation	mal: Careers and Degrees in	4/6/2022	4/6/2022	2	Technical	Department of Infor	
Tech Trends: Internet of Things	(Basic Session)	9/7/2022	9/7/2022	2	Technical	Department of Infor	mation and
Contact Center Service		7/29/2022	8/23/2022	144	Technical		chnology (DICT) n And Skills Developm
Human Resources Information Systems		10/25/2022	10/26/2022	8	Technical	Authority (TESDA) Department of Infor	
Trainent toodardoo midimatidh dysteme	( iio) ao an i'i oolulon	TOTEUTEUE	TOTEULE	U	rounnoal	Communication Te	chnology (DICT)
	(Conti	nue on separate si	neet if necessary)				
III. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES	32. NON-	ACADEMIC DISTIN (Write	CTIONS / RECOGN in full)	NITION		33. MEMBERSHIP IN	ASSOCIATION/ORGANIZATION/ORGANI
Strong interpersonal and communication skills and the ability to work effectively with a wide ange of constituencies in a diverse community.	d the ability to work effectively with a wide			N/A			N/A
Computer literacy /							
Typing speed 40-50 WPS							
Oriented in Microsoft Office application							
Hardware and Software Installation  Database management skills using Mail merge							
and MS excel							
Basic knowledge about Adobe Photoshop, Layout design							
Web Researching							
SIGNATURE	(Conti	nue on separate si	neet if necessary)	DA	TF		
SIGNATURE	On the last			UA	•	CS FORM	

34.	Are you related by consanguinity or affinity to the appointing chief of bureau or office or to the person who has immediate Bureau or Department where you will be apppointed, a. within the third degree?  b. within the fourth degree (for Local Government Unit - Car	☐ YES ☑ N	NO NO					
		If YES, give details:						
35.	a. Have you ever been found guilty of any administrative off	YES If YES, give details:	NO					
	b. Have you been criminally charged before any court?	☐ YES ☑  If YES, give details:  Date Filed:  Status of Case/s:	NO					
36.	Have you ever been convicted of any crime or violation of a by any court or tribunal?	YES If YES, give details:	NO					
37.	Have you ever been separated from the service in any of th retirement, dropped from the rolls, dismissal, termination, er out (abolition) in the public or private sector?		YES If YES, give details: Resigned at St. Peter	NO r's College of Ormoc - Private				
38.	a. Have you ever been a candidate in a national or local ele Barangay election)?	ction held within the last year (except	☐ YES ☑	7 NO				
	b. Have you resigned from the government service during the election to promote/actively campaign for a national or local	YES If YES, give details:	Z NO					
39.	Have you acquired the status of an immigrant or permanent	☐ YES ☑ If YES, give details (cour	NO ntry):					
a. b.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag 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?	If YES, please specify:  YES  If YES, please specify ID No	V NO					
41.	REFERENCES (Person not related by consanguinity or affinity to applicant	t /appointee)						
	NAME	ADDRESS	TEL. NO.					
	MR. MARK ANTHONY B. MALINAO	BRGY. SAN PABLO SIMANGAN ORMOC CITY	09453372529					
	MS. KATHLEEN ROSE PIDOR	BRGY. ALEGRIA ORMOC CITY	09561833972					
	MRS. CARLA JANE S. CULTURA	BRGY. TAMBULILID ORMOC CITY	09474513386					
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.  agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me.								
	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)							
	LEASE INDICATE ID Number and Date of Issuance overnment Issued ID: DRIVER'S LICENSE		Mariting					
-	/License/Passport No.: H03-20-100026							
-	ete/Place of Issuance: ORMOC CITY	ox)						
<u> </u>	Jersino Gri		Right Thumbmark					
	SUBSCRIBED AND SWORN to before me this	, affiant exhibit	ing his/her validly issued govern	nment ID as indicated above.				
		h						