CS Form No. 212 Revised 2017	DEDEC	MAL DAT	'A CL	JEET			
	PERSC	NAL DAT	A Sr	1EE I			
WARNING: Any misrepresenta concerned.	ation made in the Personal Data Sheet and	the Work Experience Sheet	shall cause the	e filing of administrative/criminal	case/s against the person		
READ THE ATTACHED GUIDE	TO FILLING OUT THE PERSONAL DATA	SHEET (PDS) BEFORE ACCO	MPLISHING TH	HE PDS FORM.			
Print legibly. Tick appropriate boxe PERSONAL INFORMATI	s) and use separate sheet if necessary, Indi	cate N/A if not applicable. DO NO	T ABBREVIATE	t. CS ID No.	(Do not fill up. For CSC use		
2. SURNAME	ARBISO	社会会会会会等等的	A THINKS		Strain Strain Strain		
FIRST NAME				NAME EXTER	NSION (JR., SR) N/A		
	LICHELL BHONG						
MIDDLE NAME 3. DATE OF BIRTH	BIOCO		_				
(mm/dd/yyyy)	02/10/2002	16. CITIZENSHIP		☑ Filipino ☐ Dual Citi			
4. PLACE OF BIRTH	ORMOC CITY	If holder of dual citiz	enshio	✓ by b	oirth		
		please indicate the			and		
5. SEX	☐ Male ☑ Female		1 10744	NAME OF THE PARTY			
6 CIVIL STATUS	✓ Single	17. RESIDENTIAL ADDRESS		9, WORLD VISION use/Block/Lot No.	Street		
	Other/s:		0,1	bdivision/Village	LINAO Barangay		
7. HEIGHT (m)	1.54		OI	RMOC CITY	LEYTE		
8. WEIGHT (kg)	48	ZIP CODE	C	ity/Municipality	Province		
9. BLOOD TYPE	0+	18. PERMANENT ADDRESS	LOT 119	9, WORLD VISION			
	N/A		Hou	ise/Block/Lot No.	Street LINAO		
10. GSIS ID NO.	IVO		Sul	bdivision/Village	Barangay		
11. PAG-IBIG ID NO.	121344869982		C	ORMOC CITY ity/Municipality	Province		
12. PHILHEALTH NO.	13-250757377-4	ZIP CODE	6541				
13. SSS NO.	06-4892668-5	19. TELEPHONE NO.	NA				
14. TIN NO.	656-058-391-00000	20. MOBILE NO.	09066185844				
15. AGENCY EMPLOYEE NO.	N/A	arbisolichell40@gmail.com					
II. IFAMILY 320 (GROUNI							
22. SPOUSE'S SURNAME	N/A		23. NAME of CH	ILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyy		
FIRST NAME	N/A	NAME EXTENSION (JR., SR) N /A					
MIDDLE NAME	N/A						
OCCUPATION	N/A						
EMPLOYER/BUSINESS NAME	N/A						
BUSINESS ADDRESS	N/A						
TELEPHONE NO.	NA	Local States of the Colonial States					
24. FATHER'S SURNAME	ARBISO						
FIRST NAME	MANUEL	NAME EXTENSION (JR., SR) N/A					
MIDDLE NAME	ARAÑO						
25. MOTHER'S MAIDEN NAME							
SURNAME	BIOCO						
FIRST NAME	MARIA TERESA						
MIDDLE NAME	QUINTE	(Continue on separate sheet if necessary)					

		(Continue on separate sheet if necessary)					
ROUND	(1) · · · · · · · · · · · · · · · · · · ·	有一种	展。這樣		对国家		
NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF	ATTENDANCE	HIGHEST LEVELU UNITS EARNED	YEAR GRADUATED	SCHOLARSHIP ACADEMIC HONORS	
(From	То	(ir not graduated)		RECEIVED	
LINAO CENTRAL SCHOOL	PRIMARY EDUCATION	2008	2014	N/A	2014	ACHIEVER	
LINAO NATIONAL HIGH SCHOOL	HIGH SCHOOL	2014	2018	N/A	2018	WITH HIGH HONORS	
N/A							
LEYTE NORMAL UNIVERSITY	EDUCATION MAJOR IN	2018	2024	N/A	2024	CUM LAUD	
N/A				9 9 B			
	(Continue on separate sheet if necessary)						
SIGNATURE POARIN			DATE April 21, 2025				
	(Write in full) LINAO CENTRAL SCHOOL LINAO NATIONAL HIGH SCHOOL N/A LEYTE NORMAL UNIVERSITY N/A	(Write in full) LINAO CENTRAL SCHOOL PRIMARY EDUCATION LINAO NATIONAL HIGH SCHOOL N/A LEYTE NORMAL UNIVERSITY N/A (Continue on separate sheet if necessary)	(Write in full) Erom LINAO CENTRAL SCHOOL PRIMARY EDUCATION 2008 LINAO NATIONAL HIGH SCHOOL N/A LEYTE NORMAL UNIVERSITY N/A (Continue on separate sheet if necessary)	(Write in full) (Write in full) From To LINAO CENTRAL SCHOOL PRIMARY EDUCATION 2008 2014 LINAO NATIONAL HIGH SCHOOL HIGH SCHOOL 2014 2018 N/A LEYTE NORMAL UNIVERSITY EDUCATION MAJOR IN MATHEMATICS (Continue on separate sheet if necessary)	NAME OF SCHOOL (Write in full) LINAO CENTRAL SCHOOL PRIMARY EDUCATION 2008 2014 N/A LINAO NATIONAL HIGH SCHOOL HIGH SCHOOL N/A LEYTE NORMAL UNIVERSITY N/A (Continue on separate sheet if necessary) DATE	NAME OF SCHOOL (Write in full) END OF ATTERDANCE (Write in full) LINAO CENTRAL SCHOOL PRIMARY EDUCATION 2008 2014 N/A LINAO NATIONAL HIGH SCHOOL HIGH SCHOOL N/A LEYTE NORMAL UNIVERSITY N/A (Continue on separate sheet if necessary)	

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SPE BARANGAY VIL SERVICE COM CREE 907 INCLUSIVE DA (mm/dd/yyy	MMISSION MISSION MATES MY TO	PRESIDENTIAL	nkway (vibes opinuo TITLE t abbreviate)	DEPARTMENT / AGE (Write in full		LEYTE		NUMBER 100108250417 STATUS OF APPOINTMENT N/A	GOVT SERVICE (Y/N) N
INCLUSIVE DA (mm/dd/yyy	MMISSION	POSITION T (Write in full/Do not	(Continue of the continue of t	DEPARTMENT / AGE (Write in full	f necessary) ENCY / OFFICE / COMPANY //Do not abbreviate)	MONTHLY SALARY	SALARYI JOBI PAY GRADE (II applicable)& STEP (Format 100-0") INCREMENT	100108250417	GOVT SERVIC (Y/N)
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VI. YOLUNTARY WORK OR INVOLVEMENT	IN CIVIC / NON-GOVERNMENT	/PEOPLE/V	OLUNTARY O	RGANIZATION	ľs'	
29 NAME & ADDRESS OF C (Write in ful	ORGANIZATION	INCLUSA	VE DATES	NUMBER OF HOURS		POSITION / NATURE OF WORK
N/A	εn, Cl					
7 <u>[</u>]					18.9.51	
NOTES 1						
189.3	Jan 12, 1					
		ntinue on separate)		*****
VII. LEARNING AND DEVELOPMENT (L&D)) INTERVENTIONS ARAINING PR			i yearsa	10.85 (6.2	
30. TITLE OF LEARNING AND DEVELOPMENT INT	ERVENTIONS/TRAINING PROGRAMS	ATTEN	DATES OF DANCE	NUMBERS OF HOUTS	Type of LD (Managerial)	CONDUCTED/ SPONSORED BY
(White in fu	/I)	From	(d/yyyy) To		Supervisory! Technicalietc)	(Write in full)
N/A				EIN g Isr		v m - v n
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	(Con	ntinue on separate	sheet if necessary)		
VIII. OTHER INFORMATION	e varie a openiorial and	and an analysis of the state of				
31. SPECIAL SKILLS and HOBBIES	32. NON-	-ACADEMIC DISTII	NCTIONS / RECOG e in full)	INITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
COOKING		N/A	-	1		YOUTH FOR ENIVIRONMENT IN SCHOOL
PLANTING						ORGANIZATIONS MATHEMATICS STUDENT SOCIETY
CHESS						
	Name to the control of the control of			-		
PHOTOGRAPHY			110 [(* 133		The second secon
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SIGNATURE	form.	Nue on separate	access of necessary		TE	April 21 2025
least, ser	0 1		4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			CS FORM 212 (Revised 2017), Page 3 of a

34. Are you related by consanguintly or affinity to the chief of bureau or office or to the person who has	s immediate supervision over you in the Office.			
Bureau or Department where you will be apppoint a. within the third degree?	ited,	5.00		
b. within the fourth degree (for Local Government	YES 2 NO If YES, give details:			
as. a. Have you ever been found guilty of any adminis	istrative offense?	☐ YES ☑ NO		
	If YES, give details:			
b. Have you been criminally charged before any c	YES NO If YES, give details: Date Filed: Status of Case/s:			
36. Have you ever been convicted of any crime or vio any court or tribunal?	olation of any law, decree, ordinance or regulation by	☐ YES ☑ NO If YES, give details:		
dropped from the rolls, dismissal, termination, end the public or private sector?	n any of the following modes: resignation, retirement, d of term, finished contract or phased out (abolition) in	YES INO If YES, give details:		
38. a. Have you ever been a candidate in a national of Barangay election)?	or local election held within the last year (except	☐ YES ☑ NO If YES, give details:		
b. Have you resigned from the government service election to promote/actively campaign for a nation	☐ YES ☑ NO If YES, give details:			
39. Have you acquired the status of an immigrant or p	permanent resident of another country?	☐ YES ☑ NO If YES, give details (country):		
and (c) Solo Parents Welfare Act of 2000 (RA 89) Are you a member of any indigenous group? Are you a person with disability? Are you a solo parent?	72), please answer the following terms.	☐ 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 affin	nity to applicant /appointee)			
NAME	ADDRESS	TEL. NO.		
RAMIL COSTA	ORMOC CITY, LEYTE	9514611171		
LOEZENETH ONATE	ORMOC CITY, LEYTE	9654150983		
FLORDELYN PORIO	ORMOC CITY, LEYTE	9700681018		
statement pursuant to the provisions of pertine authorize the agency head/authorized representa	nplished this Personal Data Sheet which is a true, cornent laws, rules and regulations of the Republic of tative to verify/validate the contents stated herein. its attachments shall cause the filing of administrative	the Philippines. I		
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's Liconor PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: TIN	ie, etc.)			
ID/License/Passport No.: 656-058-391-00000	box)			
Date/Place of Issuance: 06/07/2024 / ORMOC CITY	April 21, 2025 Date Accomplished	S Right Thumbmark		
SUBSCRIBED AND SWORN to before me this	s 2 2 APR 2025 , affant exhibit	ting his/her validly issued government ID as indicated above.		
	Public Attorney	AZAR-TALUA II .9406		