CS Form No. 212 Revised 2017	PERSO	NAL DAT	A SHEET	
WARNING: Any misinterpreta	tion made in the Personal Data Sheet and the	Work Experience Sheet sha	If cause the filing of administrative/crimin	nal case/s against the person
concerned. READ THE ATTACHED GUIDE	E TO FILLING OUT THE PERSONAL DATA SH	EET (PDS) BEFORE ACCOM	PLISHING THE PDS FORM.	
	es (and use separate sheet if necessary. Indicate	N/A if not applicable. DO NOT A	ABBREVIATE. 1 CS 10 No	(Do not fill up. For CSC use on
I. PERSONAL INFORMATION				
2 SURNAME	RADAZA			
FIRST NAME	RENIEL		NAM.	E EXTENSION (JR., SR)
MIDDLE NAME	SOLAJES			
3. DATE OF BIRTH (mm/dd/yyyy)	07/10/1983	16. CITIZENSHIP	☑ Filipino ☐ D	ual Otizenship
(miroussy)				by birth by naturalization
4. PLACE OF BIRTH	TACLOBAN CITY	If holder of dual citize		Pls. indicate country:
5. SEX	☑ Male ☐ Female	please indicate the d	etails.	-
6 CIVIL STATUS	☐ Single ☑ Married	17. RESIDENTIAL ADDRESS	N/A	
	☐ Widowed ☐ Separated		House/Block/Lot No.	Street NAGA-NAGA
	Other/s:		Subdivision/Villege	Barangay
7. HEIGHT (m)	1.65 m		TACLOBAN City/Municipality	LEYTE Province
8. WEIGHT (kg)	90 kg	ZIP CODE	650	
9. BLOOD TYPE	B+	18. PERMANENT ADDRESS	N/A	
10. GSIS ID NO.	N/A	-	House/Block/Lat No. N/A	Street MALIHAO
	1777.	-	Subdivision/Village HINABANGAN	Barangay SAMAR
11. PAG-IBIG ID NO.	N/A		City/Municipality	Province
12. PHILHEALTH NO.	03-050442447-9	ZIP CODE	671	3
13. SSS NO.	34-0883871-6	19. TELEPHONE NO.	N/A	
14. TIN NO.	665336476	20. MOBILE NO.	0970-9958-502 / 0945-216-7822	
15. AGENCY EMPLOYEE NO.	COS-722	21. E-MAIL ADDRESS (if any)	renradz84@	gmail.com
I. FAMILY BACKGROUND				
22. SPOUSE'S SURNAME	RADAZA		23. NAME of CHILDREN (Write full name and list all	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	MITCHEL	NAME EXTENSION (JR., SR)	NONE	10/27/1986
MIDDLE NAME	CASTILLO			
OCCUPATION	HEAD TEACHER II			
EMPLOYER/BUSINESS NAME	DEPED			
BUSINESS ADDRESS	HINABANGAN SAMAR			
TELEPHONE NO.	0927-439-4580			
24. FATHER'S SURNAME	RADAZA			2/19/1960
FIRST NAME	REYNALDO	SR.		
MIDDLE NAME	BEDERIO			
5. MOTHER'S MAIDEN NAME	SOLAJES			9/12/1962
SURNAME	RADAZA			
FIRST NAME	NENITA			
MIDDLE NAME	PALITA		(Continue on separate	short if necessary
L SOURATIONAL SACKE			Lawrence of the law of	

LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE		UNITS EARNED	SCHOLARSHIPI ACADEMI HONORS RECEIVED
			From	To	(if not graduated)	
ELEMENTARY RIZAL CENTRAL SCHOOL		PRIMARY	1991	1996	GRADUATE	NA
SECONDARY	LEYTE NATIONAL HIGH SCHOOL	SECONDARY	1996	2000	GRADUATE GRADUATE	N/A
VOCATIONAL / TRADE COURSE	NONE	11 1 19 N				
COLLEGE	EASTERN VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN ARCHITECTURE	2001	2006		
GRADUATE STUDIES	NONE					
SIGNATURE	(Con	tinue on separate sheet if necessary)	- PAGE			

A WORK EX	LANGAY ELIGIBILIT	IS CEST CREE Y TORIVER'S LICENSE RCHITECT	(if Applicable)	JANUARY 21 &				NUMBER	Validity
INCLUS (man)	REGISTERED A	RCHITECT		A STATE OF THE PARTY OF THE PAR		and the second		- Igrauaw-	
INOLUS (mm/			REGISTERED ARCHITECT		23, 2025 TACLOR			63829	7/10/20
INCLUS (mm/									
INOLUS (mm/									
INCLUS (mm/									
INCLUS (mm/									
INOLUS (mm/			(Co	intinue on separate sheet if	necessary)				
(mm)	PERIENCE te employment	l. Start from your recen	t work) Description	on of duties should be	indicated in the attach	ed Work Ex	perience shee		
-	IVE DATES /dd/yyyy)	POSITION TI (Write in full/Do not a			NCY / OFFICE / COMPANY Do not abbreviate)	MONTHLY SALARY	SALARYI XXV PAY GRADE (F apphrable)\$ STEP (Format 'US/BY) HICREMENT	STATUS OF APPOINTMENT	SONT SERVICE (VIII)
1/02/2022	PRESENT	CONTRACT OF	SERVICE	SAMAR STATE UNIVER	SITY MERCEDES CAMPUS	14,000.00	N/A	CASUAL	Y
1/07/2018	05/08/2022	ARCHITE	ст	RINEX SURVEYING	AND ALLIED SERVICES	15,000.00	N/A	REGULAR	N
-	28/07/2017	STRUCTURAL DR			OGER LTD.	60,000.00	N/A	REGULAR	N
-	01/01/2015	ENGINEERING			RNALTIONAL CORP.	20,000.00	N/A N/A	REGULAR REGULAR	N
1/2/2010	1/1/2012	ARCHITECTURAL D		SAGE GROUP OCB+ASSOCIATES ARCHITECTS		15,000.00	N/A	REGULAR	N
1/3/2008	1/1/2010	ARCHITE	7,172	V-THE VILLAS GROUP OF COMPANIES		15,000.00	N/A	REGULAR	N
2/28/2007	12/30/2007	ARCHITE	ст	FLORINTINO A	8,000.00	N/A	REGULAR	N	
3/30/20006	/30/20006 1/30/2007 ARCHITECT		CT	ED. CUMPIO AND ASSOCIATES		3,000.00	N/A	apprenticeship	N
-									
-									
				1. 812					3-1-1
SIGNATI	upe T		Can	tinue on separate sheet if n	5-5-20			12 (Revised 2017), Pa	

NAME & ADDRESS (Write	OF ORGANIZATION (In full)		AVE DATES (AUVYYY)	MARIER OF HOLES		POSITION I NATURE OF WORK
HAD CAN HAND	CHAPTER	From	To DOCCENT			ARCHITECT
UAP SANJUANICO CHAPTER INTEGRATED AND ACCREDITED PROFESSIONAL ORGANIZATION OF		2/1/2025	PRESENT			ARCHITECT
ARCHITECTS		2/14/2025	PRESENT			Profitties
LEARNING AND DEVELOPMENT (L	ED) INTERVENTIONS TRAINING P	caus on separate s ROGRAMS AT	TENDED			
TITLE OF LEARNING AND DEVELOPMEN (Write		INCLUSIVE ATTEN (mm/d	DATES OF DANCE d'yyyy)	MANDER-OFHOURS	Type of LO (Managorish Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Virite in full)
AUTOCAD CIVIL 3D 2014 FUND	EMENTALS (15570020F3)	From 4/28/2010	To 04/30/2014	24 HOURS	Technical	STANFORD IT LEARNING CENTER
OCCUPATIONAL HEALTH AND		10/08/2022	10/08/2022	8 HOURS	Technical	SAMAR STATE UNIVERSITY
ASIC EMERGENCY RESPONSE TRAINING FO	R THE SSU-DISASTER RISK REDUCTION	02/15/2023	02/17/2023	24 HOURS	Technical	SAMAR STATE UNIVERSITY
COUNCIL ME SURVEY INSTRUMENT OPERATO	MBERS	01/30/2021	01/30/2021	8 HOURS	Technical	DENR-VIII CONFERENCE ROOM TACLOBAN CIT
	(Conti-	ue on separate sh	eel If necessary)			
OTHER INFORMATION		CADEMIC DISTING	TIONS I DECOCAL	ITION		MEMBERSHIP IN ASSOCIATION/ORGANIZATION
SPECIAL SKILLS and HOBBIES	32		33. (Write in full)			
PUTER LITERATE (MS WORD, MS EXCE MS POWER POINT)	L,	N/A				UAPGA
AUDTOCAD / AUTODESK						IAPOA
3DMAX					UAP	
CIVIL 3D			UAP SAN JUANICO CHAPTER			
ADOBE PHOTOSHOP CS3		1	-			
MS PROJECT	*.	who is	-			
LAND DESKTOP		se on seperale she	al Variation of			
	H.ontia	ue on senarale sho	SETT DECRESSION			

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 appointed.	or recommending authority, or to the supervision over you in the Office,	☐ YES	☑ NO		
	a. within the third degree? b. within the fourth degree (for Local Government Unit - Care	☐ YES ☑ NO If YES, give details:				
35.	a. Have you ever been found guilty of any administrative offer .	YES INO If YES, give details:				
	b. Have you been criminally charged before any court?	☐ YES ☑ NO If YES, give details: Date Filed: Status of Case/s:				
35.	Have you ever been convicted of any crime or violation of any any court or tribunal?	☐ YES ☑ NO If YES, give details:				
37.	Have you ever been separated from the service in any of the dropped from the rolls, dismissal, termination, end of term, fir 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 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 of	☐ YES ☑ NO If YES, give details:				
39.	Have you acquired the status of an immigrant or permanent	☐ YES ☑ NO If YES, give details (country):				
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag and (c) Solo Parents Welfare Act of 2000 (RA 8972), please					
a.	Are you a member of any indigenous group?	☐ YES	2 NO			
b.	Are you a person with disability?	If YES, please specify: YES NO NO				
c.	Are you a solo parent?	If YES, please specify ID No: YES If YES, please specify ID No:				
41.	REFERENCES (Person not related by consanguinity or affinity to applicant	/appointee)				
	NAME	ADDRESS	TEL. NO.			
	REDENTOR S. PALENCIA	CATBALOGAN	(055)251 2139	36		
	ENGR. EUGINE GONZALES	TACLOBAN CITY	0917-529-6155	3		
	ENGR. MARVIN FERNANDEZ	PARANAS, SAMAR	0915-186-1256			
42.	I declare under oath that I have personally accomplished this statement pursuant to the provisions of pertinent laws, rules at the agency head / authorized representative to verify/ misrepresentation made in this document and its attachment against me.	and regulations of the Republic of the Philivalidate the contents stated herein. I	ippines. I authorize agree that any	RENIEL S. RADAZA		
	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)	b		2000		
Н	.EASE INDICATE ID Number and Date of Issuance overnment Issued ID: DRIVER'S LICENSE					
Н	License/Passport No.: HO2-17-002803	x)				
Da	te/Place of Issuance: CATBALOGAN CITY, SAMAR	Right Thumbmark				
	SUBSCRIBED AND SWORN to before me this 0 4 MA	Y 7025 , affiant exhibit	ing his/her validly issu	ned government ID as indicated above.		
		ATTY. JONALYN A. LABALAR NOT RYPUBLIC NC No. 2024-01-39 until December 31, 2025 Roll of Attorneys No. 748/06; Ity No. 491/95, 01-94-906 MCLE Compliance No. 761/961/961/961/961/961/961/961/961/961/9	N 25 8			
		Rm. 10, Calzita Bldg., Sta. Cruz St., Brgy. 45, 1acioban C	ity	CS FORM 212 (Revised 2017), Page 4 of		