PERSONAL DATA SHEET

(Do not fill up. For CSC use only)

WARNING: Any misrepresentation made in the Personal Data Sheet and the Work Experience Sheet shall cause the filing of administrative/criminal case/s against the person

READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM.

Print legibly. Tick appropriate boxes () and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. 1. CS ID No.

I. PERSONAL INFORMATION	N ,							
2. SURNAME	Jabillo							
FIRST NAME	Mariana Clarice					NAME EXTENSION (JF	R., SR) N/A	
MIDDLE NAME	Estupa							
3. DATE OF BIRTH (mm/dd/yyyy)	11/20/1997	16. CITIZENSHIP						
4. PLACE OF BIRTH	Jasaan Misamis Oriental	If holder of dual citizer				Pls. indicate c	ountry:	
5. SEX	Female	please indicate the de	tails.					
6 CIVIL STATUS	Single	17. RESIDENTIAL ADDRESS	Hou	064 se/Block/Lot N	lo		Proper	
							Street Salvacion	
7. HEIGHT (m)	154 cm			bdivision/Villag Albuera			Barangay Leyte	
8. WEIGHT (kg)	71kg	ZIP CODE	City/Municipality 6542			Province		
9. BLOOD TYPE	N/A	18. PERMANENT ADDRESS	064 House/Block/Lot No.		proper Street			
10. GSIS ID NO.	N/A		Sut	bdivision/Villag	ie.		Salvacion Barangay	
11. PAG-IBIG ID NO.	121261568539		Albuera		Leyte			
12. PHILHEALTH NO.	1325-0280-2937	ZIP CODE	City/Municipality 6542		Province			
13. SSS NO.	06-4372368-9	19. TELEPHONE NO.	N/A					
14. TIN NO.	N/A	20. MOBILE NO.	09263684556					
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)		ma	rianaclario	ejabillo@gmai	l.com	
II. FAMILY BACKGROUND								
22. SPOUSE'S SURNAME	N/A		23. NAME of CHI	LDREN (Write	e full name and	list all)	DATE OF BIRT	ΓΗ (mm/dd/yyyy)
FIRST NAME		NAME EXTENSION (JR., SR)						
MIDDLE NAME								
OCCUPATION								
EMPLOYER/BUSINESS NAME								
BUSINESS ADDRESS								
TELEPHONE NO.								
24. FATHER'S SURNAME	Jabillo	T						
FIRST NAME	Bernardo	NAME EXTENSION (JR., SR)					1/23	/1974
MIDDLE NAME	Cretecio							
25. MOTHER'S MAIDEN NAME	Estupa							
SURNAME	Jabillo							
FIRST NAME	Beatriz			5/10/1974				
MIDDLE NAME	Casas			(C	Continue on se	parate sheet if neces	sary)	
III. EDUCATIONAL BACKG	ROUND							
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGRE (Write in full)	:E/COURSE	PERIOD OF	ATTENDANCE To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
ELEMENTARY	Albuera South Central School	ELEMENTARY GRADU	JATE	2004	2010	N/A	2009-2010	N/A
		HIGH SCHOOL 2010 2014 N/A						

VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	Visayas State University	BACHELOR OF SCIENCE IN AGRICULTURE	2015	2019	N/A	2018-2019	N/A
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A
(Continue on separate sheet if necessary)							
SIGNATURE	mclajabillo		DA	TE		June 18, 2021	

CS FORM 212 (Revised 2017), Page 1 of 4

	SERVICE ELIG			DATE OF				LICENSE (if a	nnlicable)
	SPECIAL LAV	080 (BOARD/ BAR) UNDER WS/ CES/ CSEE TY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINA	ΓΙΟΝ / CONFE	RMENT	NUMBER	Date of Validity
	N/A	1	N/A	N/A	N	/A		N/A	N/A
WORK	EXPERIENCE		(Con	tinue on separate sheet	if necessary)				
clude pri	vate employme		t work) Description	n of duties should b	e indicated in the attache	ed Work Exp			
INCL (r From	LUSIVE DATES mm/dd/yyyy)	POSITION T (Write in full/Do not			ENCY / OFFICE / COMPANY //Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV" SERVIO (Y/ N)
15/2019	9/27/2020	Pulp Inspe	ctor	Quality Control De	partment/ GGC Services/ Manufacturing Inc	12000.00			No
				Openially 1 un	Thanalactaring inc				
									_
									_
									
_									
			<u></u>						

	(Continue on separate sheet if necessary)							
SIGNATUI	IRE	mclajabillo		DATE	June 18, 2021			

CS FORM 212 (Revised 2017), Page 2 of 4

VI. VO	DLUNTARY WORK OR INVOLVEMENT	IN CIVIC / NON-GOVERNMEN	/ PEOPLE / \	/OLUNTARY	ORGANIZATI	ON/S	
29.	NAME & ADDRESS OF OF (Write in full)			/E DATES d/yyyy) To	NUMBER OF HOURS		POSITION / NATURE OF WORK
N/A			N/A			N/A	
			tinue on separate :				
	EARNING AND DEVELOPMENT (L&D) om the most recent L&D/training program and include				ef/Executive/Mana	gerial positions)	
30.	TITLE OF LEARNING AND DEVELOPMENT INTE (Write in full)		ATTEN	DATES OF DANCE d/yyyy)	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
ISO 900	01: 2015 AWARENESS SEMINAR		8/16/2019	8/23/2019	8 hrs		Mr.Darwin Clark Cabeltis
	Mandatory 8 Hour Safety and Health	Seminar for Workers	9/25/2019	9/25/2019	8hrs		Mr. Dominador B. Balagon Jr
	_						
	_						
		(Con	tinue on separate :	sheet if necessary)			
VIII. C	OTHER INFORMATION						
31.	SPECIAL SKILLS and HOBBIES	32. NON	-ACADEMIC DISTIN (Write	NCTIONS / RECOG	NITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)

(Continue on separate sheet if necessary)					
SIGNATURE	mclajabillo	DATE	June 18,2021		

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 immediate Bureau or Department where you will be apppointed, a. within the third degree?	•				
	b. within the fourth degree (for Local Government Unit - Care	eer Employees)?	If YES, give details:			
35.	a. Have you ever been found guilty of any administrative offe	If YES, give details:				
	b. Have you been criminally charged before any court?	If YES, give details: Date Filed: Status of Case/s:				
36.	Have you ever been convicted of any crime or violation of arby any court or tribunal?	If YES, give detai	ls:			
37.	Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, en out (abolition) in the public or private sector?	If YES, give detai	ls:	_		
38.	A. Have you ever been a candidate in a national or local electron and a section are section.	If YES, give details:				
	b. Have you resigned from the government service during the election to promote/actively campaign for a national or local	If YES, give details:				
39.	Have you acquired the status of an immigrant or permanent	If YES, give details (country):				
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972),	`				
a.	Are you a member of any indigenous group?	3	If YES, please specify:			
b.	Are you a person with disability?		If YES, please specify ID No: No			
C.	Are you a solo parent?		If YES, please specify ID No: No			
41	REFERENCES (Person not related by consanguinity or affinity to applicant	t /annointee)		.,		
	NAME	ADDRESS	TEL. NO.			
	Lionel Taripe	Salvacion Albuera Leyte	N/A	4		
	Darwin Clark Cabeltis	Brgy. Hilapnitan Baybay City	N/A			
	Ma.Rowena G. Milla	Poblacion, Albuera Leyte				
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 doc administrative/criminal case/s against me.					
P	Sovernment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance	Mclajabillo				
Ιŀ	overnment Issued ID:					
	0/License/Passport No.:	Signature (Sign inside the	box)			
D	ate/Place of Issuance:	Date Accomplished			Right Thumbmark	

SUBSCRIBED AND SWORN to before me this	, affiant exhibiting his/her validly issued government ID as indicated above.				
	Person Administering Oath				

CS FORM 212 (Revised 2017), Page 4 of 4