CS Form No. 212

Revised 2017

## PERSONAL DATA SHEET

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 boxe ) and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. (Do not fill up. For CSC use only 2. SURNAME MATIOM NAME EXTENSION (JR., SR) JECIMAE FIRST NAME LIBRES MIDDLE NAME 3. DATE OF BIRTH 8/19/1997 16. CITIZENSHIP ▼ Filipino ☐ Dual Citizenship ☐ by birth ☐ by naturalization 4. PLACE OF BIRTH BAYBAY CITY, LEYTE If holder of dual citizenship, Pls. indicate country: please indicate the details. 5. SEX ☐ Male ▼ Female ☐ Single ✓ Married 17. RESIDENTIAL ADDRESS MARCOS ILANG-ILANG 6 CIVIL STATUS House/Block/Lot No Street ☐ Widowed ☐ Separated ☐ Other/s: Subdivision/Village Barangay BAYBAY CITY LEYTE 7. HEIGHT (m) City/Municipality 47 8. WEIGHT (kg) ZIP CODE 18. PERMANENT ADDRESS MARCOS ILANG-ILANG 9. BLOOD TYPE AB+ House/Block/Lot No Street 10. GSIS ID NO. N/A Subdivision/Village Barangay BAYBAY CITY LEYTE 11. PAG-IBIG ID NO. 121358258859 City/Municipality Province 12. PHILHEALTH NO. 132503598772 ZIP CODE 13. SSS NO N/A 19. TELEPHONE NO. N/A 6679900200000 09359481229 20. MOBILE NO. 15. AGENCY EMPLOYEE NO. N/A 21. E-MAIL ADDRESS (if any) jecimae.matiom@vsu.edu.ph II. FAMILY BACKGROUN 22. SPOUSE'S SURNAME MATIOM 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) FIRST NAME **JOMAR** 10/5/2022 MIDDLE NAME ALAO CARPENTER OCCUPATION EMPLOYER/BUSINESS NAME **VISAYAS STATE UNIVERSITY** BUSINESS ADDRESS PANGASUGAN BAYBAY CITY LEYTE TELEPHONE NO N/A LIBRES 24 FATHER'S SURNAME IAME EXTENSION (JR., SR) FIRST NAME **CIPRIANO** APURA MIDDLE NAME 25. MOTHER'S MAIDEN NAME SURNAME **NGOHO** FIRST NAME MATILDE MIDDLE NAME TANZA (Continue on separate sheet if necessary) EDUCATIONAL BACKGROUND SCHOLARSHIP/ HIGHEST LEVEL UNITS EARNED (if not graduated) PERIOD OF ATTENDANCE BASIC EDUCATION/DEGREE/COURSE NAME OF SCHOOL ACADEMIC LEVEL HONORS RECEIVED GRADUATED From To CARIDAD, ELEM.SCHOOL ELEMENTARY ELEM.GRADUATE 2008 2011 2011 N/A SECONDARY CARIDAD NATIONAL HIGH SCHOOL IIGHSCHOOL GRADUATE 2011 2014 2014 N/A N/A N/A N/A N/A N/A N/A TRADE COURSE COLLEGE VISAYAS STATE UNIVERSITY COLLEGE GRADUATE 2014 2019 2019 N/A GRADUATE STUDIES N/A N/A حجملية SIGNATURE DATE November 12, 2025

IV. CIVIL S	SERVICE ELI	GIBILITY							
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER		RATING	DATE OF				LICENSE (if a	pplicable)	
SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE		(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINA	TION / CONFERMENT		NUMBER	Date of Validity	
	EXPERIENCI	E eent. Start from your red		tinue on separate sheet		ottached Wo	ork Experienc	e sheet.	
28. INCLU	USIVE DATES				ENCY / OFFICE / COMPANY	MONTHLY	SALARY/ JOB/ PAY GRADE (if	STATUS OF	GOV'T
From	(mm/dd/yyyy) POSITION TITLE (Write in full/Do not abbrevi			(Write in ful	SALARY	applicable)& STEP (Format "00-0")/ INCREMENT	APPOINTMENT	SERVICE (Y/ N)	
			(Con	tinue on separate sheet	t if necessary)				
SIGN	ATURE				DATE				

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S								
	NAME & ADDRESS OF O		INCLUSIVE DATES		IKT OKGANI	ZATION/3		
29.	(Write in full)		(mm/d	d/yyyy)	NUMBER OF HOURS		POSITION / NATURE OF WORK	
			From	То				
VII. LEARI	NING AND DEVELOPMENT (L&		nue on separate s			_		
	DEVELOT INC. (1 C.)	5, 1112111 2111 2111 211 211 111 111		DATES OF		Time of LD		
30. TITLI	E OF LEARNING AND DEVELOPMENT INTE (Write in full)		ATTENDANCE		NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/	CONDUCTED/ SPONSORED BY (Write in full)	
	(Write in Idii)	)	From	То		Technical/etc)	(Wite iii tuii)	
		(Conti	nue on separate s	sheet if necessary	)	_		
VIII. OTHE	R INFORMATION							
31.	SPECIAL SKILLS and HOBBIES	32. NON-A	ACADEMIC DISTIN	ICTIONS / RECO	GNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
			(*****				(**************************************	
				ahaat if	4			
	SIGNATURE	(Conti	nue on separate s	sneet if necessary		ATE		
	SIGNATURE				DA	A <i>TE</i>		

34.	Are you related by consanguinity or affinity to the appoin	nting or recommending authority or to					
	chief of bureau or office or to the person who has immed						
	Bureau or Department where you will be apppointed,	and cape. House,					
	a. within the third degree?		☐ YES ☐ NO				
	b. within the fourth degree (for Local Government Unit -	Career Employees)?	☐ YES	□ NO			
		, , , , , ,	If YES, give de	<del>_</del>			
			= , g = ==				
25	a. Have you ever been found guilty of any administrative	offense?					
35.	a. Have you ever been found guilty of any administrative	YES NO					
			If YES, give de	etails:			
		-					
	b. Have you been criminally charged before any court?		☐ YES ☐ NO				
			If YES, give details:				
		Date Filed	d:				
			Status of Case/s	s:			
36.	Have you ever been convicted of any crime or violation	of any law, decree, ordinance or	☐ YES ☐ NO				
	regulation by any court or tribunal?		If YES, give details:				
27	Have you aver been consisted from the conice in any	of the following modes: regionation					
37.	Have you ever been separated from the service in any or retirement, dropped from the rolls, dismissal, termination		☐ YES ☐ NO If YES, give details:				
	phased out (abolition) in the public or private sector?	,, 6.1.2 6. (6.1.1), 111.6.1.6.2 66.11.2.6( 6.	give de	etalis.			
38	a. Have you ever been a candidate in a national or local	election held within the last vear	☐ YES ☐ NO				
50.	(except Barangay election)?		If YES, give det	☐ NO			
	b. Have you resigned from the government service during last election to promote/actively campaign for a national			☐ NO			
			If YES, give details:				
39.	Have you acquired the status of an immigrant or permar	nent resident of another country?	☐ YES ☐ NO				
			If YES, give details (country):				
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b)						
	7277); and (c) Solo Parents Welfare Act of 2000 (RA 89	72), please answer the following items:					
a.	Are you a member of any indigenous group?		☐ YES	□ NO			
			If YES, please specify:				
b.	Are you a person with disability?	☐ YES ☐ NO If YES, please specify ID No:					
C.	Are you a cale negation						
0.	Are you a solo parent?		☐ YES ☐ NO If YES, please specify ID No:				
41.	REFERENCES (Person not related by consanguinity or affinity to appli	cant /appointee)		<u></u>			
	NAME	ADDRESS	TEL. NO.	ID picture taken within			
				the last 6 months			
				4.5 cm. X 3.5 cm (passport size)			
				Computer generated or photocopied picture			
42	I de clare viadan actio total la comancialità accomalicha	d this Descend Data Chapt which is a to		is not acceptable			
42.	I declare under oath that I have personally accomplishe complete statement pursuant to the provisions of pertin						
	Philippines. I authorize the agency head/authorized repr						
	I agree that any misrepresentation made in this doc		РНОТО				
	administrative/criminal case/s against me.						
				-			
G	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, b)  PLEASE INDICATE ID Number and Date						
ΙĦ	,						
G	overnment Issued ID:						
ID	/License/Passport No.:	Signature (Sign inside the b	oox)	11			
Da	Date/Place of Issuance:  Date Accomplished			Pids The should			
L		Date Accomplished		Right Thumbmark			
	SUBSCRIBED AND SWORN to before me this	. affiant exhib	oiting his/her validly is	ssued government ID as indicated above.			
			<u> </u>	<b>7</b>			
1							
1							
		Person Administering Oa	th				