CS Form No. 212												
Revised 2017	PERSO	NAL DAT	'A SI	HEE	Т							
WARNING: Any misrepresenta concerned.	ation made in the Personal Data Sheet and th	he Work Experience Sheet s	hall cause the	filing of ad	ministrativ	e/criminal case/s ag	ainst the per	son				
READ THE ATTACHED GUIDE	E TO FILLING OUT THE PERSONAL DATA SH	· ·			1. CS ID No.	1	(Do not fill up F	or CSC use only				
I. PERSONAL INFORMATION	es) and use separate sheet if necessary. Indicate  ON	e N/A II not applicable. DO NOT	ADDREVIATE		1. C3 ID NO.		(DO HOT HIII Up. 1	or coo use orily				
2. SURNAME	GREGANA											
FIRST NAME	MICHAEL JHON					NAME EXTENSION (JR., S	R) <b>N/A</b>					
MIDDLE NAME	PABE											
DATE OF BIRTH     (mm/dd/yyyy)	OCTOBER 27, 1998	16. CITIZENSHIP		☑ Filipi	no 🗆	Dual Citizenship						
4. PLACE OF BIRTH	BACOOR CAVITE	If holder of dual citizenship,			☐ by birth ☐ by naturalization Pls. indicate country:			on				
5. SEX	✓ Male ☐ Female	please indicate the de					▼					
6 CIVIL STATUS	✓ Single	17. RESIDENTIAL ADDRESS	N/A		P	•						
0 CIVIL STATUS	☐ Widowed ☐ Separated		House/Block/Lot No.		0.	Street MASLUG						
	Other/s:			bdivision/Villag			Barangay					
7. HEIGHT (m)	160 CM		BAYBAY CITY City/Municipality		LEYTE Province							
8. WEIGHT (kg)	77 KG	ZIP CODE				6521						
9. BLOOD TYPE	AB	18. PERMANENT ADDRESS	Цан	N/A House/Block/Lot No.			PUROK 3					
10. GSIS ID NO.	N/A	-		N/A		Street MASLUG						
11. PAG-IBIG ID NO.	121266852437			Subdivision/Village BAYBAY CITY			Barangay  LEYTE					
12. PHILHEALTH NO.	12 - 025886317 - 3	ZIP CODE	Ci	ity/Municipality 6521			Province					
13. SSS NO.	352195442	19. TELEPHONE NO.			N/A							
14. TIN NO.	763 - 934 - 608	20. MOBILE NO.	09483603890 / 09949697			/804						
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	michaeljhongregana@gmail.com / gregana.michaeljhon@g				gmail.com					
II. FAMILY BACKGROUND	)							-				
22. SPOUSE'S SURNAME	N/A		23. NAME of CH	HILDREN (Writ	e full name and	d list all)	DATE OF BIR	TH (mm/dd/yyyy)				
FIRST NAME	N/A	N/A NAME EXTENSION (JR., SR) N/A			N/A			N/A				
MIDDLE NAME	N/A	•	N/A				N/A					
OCCUPATION	N/A		N/A				N/A					
EMPLOYER/BUSINESS NAME	N/A		N/A				N/A					
BUSINESS ADDRESS	N/A		N/A				N/A					
TELEPHONE NO.	N/A		N/A				N/A					
24. FATHER'S SURNAME	RENANTE	RENANTE			N/A							
FIRST NAME	GREGANA	NAME EXTENSION (JR., SR) N/A		N/A			N/A					
MIDDLE NAME	TORCINO	TORCINO			N/A							
25. MOTHER'S MAIDEN NAME					N/A							
SURNAME	PABE		N/A				N/A					
FIRST NAME	GERMA			N/A				N/A				
MIDDLE NAME	COTACTE	COTACTE					(Continue on separate sheet if necessary)					
III. EDUCATIONAL BACKO	GROUND											
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGRE (Write in full)	EE/COURSE		ATTENDANCE	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED				
EL EMENTA DV	MASLUG ELEMENTARY SCHOOL	. PRIMARY EDUC	ATION	From	To 2044	CDADUATED	2044	WITH				
ELEMENTARY	PLARIDEL NATIONAL HIGH			2006	2011	GRADUATED	2011	HONORS WITH				
SECONDARY  VOCATIONAL /	SCHOOL	HIGH SCHOO	JL	2012	2015	GRADUATED	2015	HONORS				
TRADE COURSE	N/A	N/A	IENCE IN	N/A	N/A	N/A	N/A	N/A				
COLLEGE	VISAYAS STATE UNIVERSITY	AGRIBUSINESS		2016	2019	GRADUATED	2019	N/A				
	FRANCISCAN COLLEGE OF THE IMMACULATE CONCEPTION			2022	2023	27 UNITS	2022	N/A				
GRADUATE STUDIES	N/A	N/A		N/A	N/A	N/A	N/A	N/A				
SIGNATURE	×m/9/W	(Continue on separate sheet if ne	ecessary)	D4	\TE	lı	ıly 6,2025					
J. 5777 17 577E	/ \'^ /\ /	( )			_		, -,					

n/ 00/// 05	:D\								
	RVICE ELIGI			DATE OF				LICENSE (if a	nnlicable)
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE  RATING SPANGAY LICENUM: OPPUMENT LICENUM: (If Applicable)			DATE OF  EXAMINATION / PLACE OF EXAMINATION / CO			IT	NUMBER	Date of	
BARANGAY ELIGIBILITY / DRIVER'S LICENSE  LICENSED PROFESSIONAL TEACHER 79.8%			09/03/2023	TACLOR	AN CITY		2107655	Validity	
LICEIN	SED PROFESS	DIONAL TEACHER	19.0%	09/03/2023	09/03/2023 TACLOBAN CITY			2107033	09/04/2023
			(Continu	ue on separate sheet if ne	ecessary)				
V. WORK EX									
	te employmen SIVE DATES	t. Start from your recen	t work) Description of duties si	hould be indicated in	n the attached Work Experie	nce sheet.	SALARY/ JOB/ PAY		
	n/dd/yyyy)		SITION TITLE II/Do not abbreviate)		GENCY / OFFICE / COMPANY full/Do not abbreviate)	MONTHLY SALARY	GRADE (if applicable) & STEP (Format "00-0")/	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/N)
From	То		•	`	,		INCREMENT		
05/08/2023			/ICE REPRESENTATIVE		TY PHILIPPINES	P18,000.00	N/A	FULL TIME	N
05/08/2021			HERO TUTOR		ERO, LEARNEO INC.	P7,000.00	N/A	FULL TIME CONTRACT	N
10/01/2021			ATIVE ASSISTANT		TATE UNIVERSITY	P14,000.00	N/A	SERVICE CONTRACT	N
09/01/2020			SUPERVISOR		TATISTICS AUTHORITY	P16,000.00 P14,000.00	N/A	SERVICE	Y
01/16/2020	07/30/2020	DATA	AANALYST	VISAYAS S	VISAYAS STATE UNIVERSITY			SERVICE	N
2017	2017	STUDE	NT ASSISTANT	VISAYAS	STATE UNIVERSITY	P25.00/HOUR	N/A	CONTRACT SERVICE	N
			,	ue on separate sheet if ne					•
SIGNA	TURE	(	Sygugana		DATE		July 6,	<b>2025</b> FORM 212 (Revised 2)	017) Page 2 of /

VI. VOLUNTARY WORK OR INVOLVEMENT IN	CIVIC / NON	-GOVERNME	ENT / PEOPLE	/ VOLUNTARY	ORGANIZATION/S		
29. NAME & ADDRESS OF ORGANIZATION (Write in full)			/E DATES d/yyyy)	NUMBER OF HOURS		POSITION / NATURE OF WORK	
PARISH PASTORAL COUNCIL FOR RESP	PONSIBLE	From	To	24 HOURS		POLL WATCHERS	
VOTING (PPCRV)		05/09/2022	05/09/2022	24 HOURS		FOLL WATCHERS	
AND DEVICE ORDER TO BE AND DEVICE ORDER TO A DEVICE ORDER	ITED /ENTIO			sheet if necessary)			
VII. LEARNING AND DEVELOPMENT (L&D) IN	TERVENTIO		DATES OF	SATTENDED			
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIC PROGRAMS (Write in full)		ATTENDANCE (mm/dd/yyyy)  From To		NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
BASIC COMPUTER LITERACY		01/03/2025		80 HOURS	TECHNICAL	ELTECH LEARNING HUB	
TEACHERS METHODOLGY 1: SUPERV WORK - BASED LEARNING	VISING	01/14/2025	01/15/2025	16 HOURS	SUPERVISORY	TECHNICAL EDUCATION AND SKILL DEVELOPMENT AUTHORITY (TESDA)	
LINE FOUNDATION TRAINING (LIFT) PR	OGRAM (	03/03/2024	03/03/2024	8 HOURS	MANAGERIAL	SAGILITY PHILIPPINES	
VIII. OTHER INFORMATION		(Cont	linue on separate s	sheet if necessary)			
	00	NON-A	CADEMIC DISTINC	TIONS / RECOGNITION	DN	MEMBERSHIP IN ASSOCIATION/ORGANIZATION	
	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)					33. (Write in full)  Philippine Association for Teachers and	
VERBAL COMMUNICATION	CERTIFIED LINE TRAINOR					Educators (PAFTE)	
ACTIVE LISTENING							
PROBLEM SOLVING							
COMPUTER SKILLS							
BAKING							
VOLLEYBALL							
SINGING		(Cont	inue on separate	sheet if necessary)			
SIGNATURE	×	m gagan			DATE	July 6, 2025	

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,						
a. within the third degree?	☐ YES	✓ NO				
b. within the fourth degree (for Local Government Unit - Can	eer Employees\?	☐ YES	✓ NO			
b. Within the fourth degree (for 200th overhinding of the out-	cor Employees):	If YES, give deta				
35. a. Have you ever been found guilty of any administrative offe	ense?	☐ YES	☑ NO			
		If YES, give deta				
b. Have you been criminally charged before any court?		☐ YES	✓ NO			
b. Have you been climinary 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 ar	ny law, decree, ordinance or regulation by	☐ YES	☑ NO			
any court or tribunal?		If YES, give details:				
37. Have you ever been separated from the service in any of the		☐ YES	✓ NO			
retirement, dropped from the rolls, dismissal, termination, er out (abolition) in the public or private sector?	nd of term, finished contract or phased	If YES, give deta	lls:			
38. a. Have you ever been a candidate in a national or local elec	ction held within the last year (except	□ VEC	[] NO			
Barangay election)?	,	☐ YES ☑ NO If YES, give details:				
b. Have you resigned from the government service during th	e three (3)-month period before the last	☐ YES ☑ NO				
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	resident of another country?	☐ YES	✓ NO			
		If YES, give deta	<del>_</del>			
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?						
a. Are you a member of any indigenous group?	☐ YES If YES, please speci	✓ NO fv:				
b. Are you a person with disability?		☐ YES ☑ NO				
	If YES, please speci	fy ID No:				
c. Are you a solo parent?	c. Are you a solo parent?					
41. REFERENCES (Person not related by consanguinity or affinity to applican	t /appointee)					
NAME	ADDRESS	TEL. NO.				
Terelyn llo Licardo	Plaridel, Baybay City, Leyte	9657020712				
Arlyn C. Tapado	Plaridel, Baybay City, Leyte	9357874082				
Joyce Anne Leizle Pañares	Plaridel, Baybay City, Leyte	9502255680				
42. I declare under oath that I have personally accomplished		rue, correct and				
complete statement pursuant to the provisions of pertine	ent laws, rules and regulations of the	Republic of the				
Philippines. I authorize the agency head/authorized represer agree that any misrepresentation made in this docur			of ann			
administrative/criminal case/s against me.	ment and its attachments shall caus	e the ining of	MICHAEL THON PABE GREGANA			
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)  PLEASE INDICATE ID Number and Date of Issuance						
Government Issued ID: PHILIPPINE PASSPORT	my gream					
ID/License/Passport No.: P2048203C						
	ox)					
Date/Place of Issuance: TACLOBAN		Right Thumbmark				
SUBSCRIBED AND SWORN to before me this	affiant exhibit	ting his/her validly issue	d government ID as indicated above.			
<b>-</b>	,	J 22				
I –	h					
	Person Administering Oat					