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 concerned 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 CSID No (Do not fill up. For CSC use only) 2. SURNAME PELARE NAME EXTENSION (JR., SR) FIRST NAME RUTHCHEL MIDDLE NAME ALVARADO 3. DATE OF BIRTH MAY 06, 1996 16. CITIZENSHIP (mm/dd/yyyy) Filipino Dual Citizenship by birth by naturalization 4. PLACE OF BIRTH GUIWANG ALCOY, CEBU Pls. indicate country: If holder of dual citizenship, please indicate the details 5. SEX Male Female **☑** Single 8 CIVIL STATUS Married 17. RESIDENTIAL ADDRESS Widowed House/Block/Lot No. Separated MAYBOG Other/s: Subdivision/Village Barangay 7. HEIGHT (m) 160 LEYTE City/Municipality Province 8 WEIGHT (kg) 47 kg ZIP CODE 6521 9. BLOOD TYPE 18. PERMANENT ADDRESS House/Block/Lot No to GSIS ID NO ATABAY Subdivision/Village Barangay 11. PAG-IBIG ID NO. ALCOY CEBU 919250973989 City/Municipality Province 12 PHILHEALTH NO. 12-025849006-7 ZIP CODE 6000 13. SSS NO. 06-4352240-8 19. TELEPHONE NO. 14. TIN NO. 773-178-592 20. MOBILE NO. 09630510641 15 AGENCY EMPLOYEE NO 21. E-MAIL ADDRESS (if any) pelareruthchel18@gmail.com **FAMILY BACKGROUND** 22. SPOUSE'S SURNAME 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO. PELARE 24 FATHER'S SURNAME MAY 11, 1963 NAME EXTENSION (JR., SR) GERONDIO FIRST NAME MIDDLE NAME ANORE 25. MOTHER'S MAIDEN NAME JULY 25, 1971 ALVARADO SURNAME **AMPILA** FIRST NAME

MIDDLF NAME	GAMBOA			(Continue on separate sheet if necessary)				
III EDUCATIONAL BAC	KGROUND							
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE		HIGHEST LEVEL/ UNITS EARNED	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS	
			From	To	(if not graduated)		RECEIVED	
ELEMENTARY	GUIWANG ELEMENTARY SCHOOL	ELEMENTARY GRADUATE	2003 2009			2009	WITH HONOR	
SECONDARY	ALCOY NATIONAL HIGH SCHOOL	HIGH SCHOOL GRADUATE	2009	2013		2013	SPECIAL AWARDS	
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
COLLEGE	CEBU TECHNOLOGICAL UNIVERSITY	BACHELOR OF SCIENCE IN INFORMATION AND COMMUNICATION TECHNOLOGY	2015	2019		2019	CUM LAUDE	
GRADUATE STUDIES N/A		N/A	N/A	N/A	N/A	N/A	N/A	
		(Continue on separate sheet if necessary)						
SIGNATURE	Ata	Ator			January 31, 2022			

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

-	ERVICE ELIC								
	SPECIAL LA	1080 (BOARD/BAR) UNDER WS/CES/CSEE	RATING (If Applicable)	DATE OF EXAMINATION /			ERMENT	LICENSE (II a	
BARANGAY ELIGIBILITY / DRIVER'S LICENSE			(If Applicable)	CONFERMENT		PEACE OF EXAMINATION CONFERENCE			Date of Validity
С	ERTIFICATE O	F ELIGIBILITY	CUM LAUDE		HONOR GRADUATE			100107191305	8/10/201
				FACTOR A			SLEET SE		
	- 1144								
	EXPERIENCE			ntinue on separate sheet					
Include pri	vate employme	ent. Start from your rece	nt work) Descriptio	on of duties should	be indicated in the attac	hed Work E	xperience she	et.	
A MINE	USIVE DATES nm/dd/yyyy)	POSITION T	TILE	DEPARTMENT / AG	ENCY / OFFICE / COMPANY	MONTHLY	GALARY/ JOB/ PAY GRADE (If		GOVT
From	То	(Write in full/Do not	abbreviate)	(Write in ful	//Do not abbreviate)	SALARY	applicable) A STEP (Format 100-01) INCREMENT	APPOINTMENT	SERVICE (Y/N)
3/26/2018	1/21/2019	PHOTO ED	ITOR	IND	AGO INC.	3,000.00		INTERNSHIP	
/26/2019	5/18/2019	PROGRAM	IMER	SUGBUANON R	EALTY BROKERAGE	N/A	2.2	INTERNSHIP	
3/19/2021	6/7/2021	REGISTRATION KI	T OPERATOR	PHILIPPINE STA	ATISTICS AUTHORITY	16000.00		CONTRACTUAL	
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				New York					
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Mary Inc.									
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SIGNA	TURE		Cont	tinue on separate sheet		TO STATE OF	/*****	V 04 0	
J.J.IA		July	re		DATE			Y 31,2022 ORM 212 (Revised 2017,	

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT	r/PEOPLE/	VOLUNTAR	Y ORGANIZATI	ION/S	
29. NAME & ADDRESS OF ORGANIZATION (Write in full)		SIVE DATES Vdd/yyyy)	NUMBER OF HOURS		POSITION / NATURE OF WORK
	From			The state	
			1 25		
(Con	tinue on second	e sheet if necessa	n/)		
VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING P	ROGRAMS	ATTENDED			
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)		INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy) From To		Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
OJT ORIENTATION WORK ETHICS AND VALUES SEMINAR-WORKSHOP	6/3/2018	6/3/2018		EDUCATIONAL	CEBU TECHNOLOGICAL UNIVERSITY
IT CONGRESS 2016 SEMINAR ON STUDENT DECORUM AND CYBERCRIME AWARENESS	11/16/2016	11/16/2016		EDUCATIONAL	CEBU TECHNOLOGICAL UNIVERSITY
SCIENCE SYMPOSIUM ON TECHNOLOGY	12/11/2015	12/11/2015	· Control	EDUCATIONAL	CEBU TECHNOLOGICAL UNIVERSITY
SCHOOL OF LEADERS 1				SPIRITUAL	4th FLOOR CEBU LEESONS BLDG, P. DEL ROSARIO ST., CEBU CITY
SCHOOL OF LEADERS 2				SPIRITUAL	4th FLOOR CEBU LEESONS BLDG, P. DEL ROSARIO ST., CEBU CITY
SCHOOL OF LEADERS 3				SPIRITUAL	4th FLOOR CEBU LEESONS BLDG, P. DEL
PROVINCIAL LEVEL TRAINING ON PHILSYS STEP 2 REGISTRATION	11/24/2020	11/26/2020		PROFESSIONAL	ROSARIO ST., CEBU CITY SABIN HOTEL RESORT, ORMOC CITY LEYTE
				110	
	Total Cons				
(Con	ntinue on separat	to sheet if nocessa	ry)	The state of	
VIII. OTHER INFORMATION			4		
31. SPECIAL SKILLS and HOBBIES 32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)					33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
PHOTO EDITING USING (ADOBE PHOTOSHOP, LIGHTROOM, BRIDGE	DOM, BRIDGE				
BASIC PROGRAMMING (jquery,javascript,java,turbo c++, mysql, php)	GATE KEEPERS GLOBAL GOSPEL MINISTRY INC.				
ORIENTED IN MICROSOFT OFFICES			100		
LAPTOP/COMPUTER RESETTING AND REFORMATTING					
SINGING					
COOKING					
(Coi	ntinue on separa	te sheet if necess.	sry)		
SIGNATURE THE THE TALL THE TAL				DATE	JANUARY 31, 2022
411					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 - Can	YES YES If YES, give detail	☑ NO ☑ NO Is:				
35.	a. Have you ever been found guilty of any administrative offer	YES NO 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:					
36.	Have you ever been convicted of any crime or violation of an by any court or tribunal?	☐ YES ☑ NO If YES, give details:					
	Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, er out (abolition) in the public or private sector?	YES NO If YES, give details: 1ST JOB RESIGNATION/2ND JOB END OF TERM					
38.	a. Have you ever been a candidate in a national or local ele Barangay election)? b. Have you resigned from the government service during the election to promote/actively campaign for a national or local.						
39.	Have you acquired the status of an immigrant or permanent	If YES, give details: YES NO If YES, give details (country):					
a. b.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) May 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), Are you a member of any indigenous group? Are you a person with disability? Are you a solo parent?	If YES, please specify: YES V NO If YES, please specify ID No: YES NO If YES, please specify ID No: YES NO If YES, please specify ID No:					
41.	REFERENCES (Person not related by consanguinity or affinity to applicant	/appointee)					
	NAME	ADDRESS	TEL. NO.				
	SALAM IBRA MOLATO	COGON ORMOC, CITY	9452580261				
	JENNY ANN M. GALO	POBALCION ALCOY, CEBU	9263182737				
	JECONIAH JEZREEL MOLATO	COGON ORMOC, CITY	9166801971				
42.	42. I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I authorize the agency head/authorized representative to verify/validate the contents stated herein. I agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me.						
Government Issued ID (i.e Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: PHILHEALTH ID ID/License/Passport No.: 12-025849006-7 Signat for (Sign inside the total Control of the Control o							
D	ate/Place of Issuance: CEBU CITY		Right Thumbmark				
	SUBSCRIBED AND SWORN to before me this	, affiant exhibition of the second of the se		d government ID as indicated above,			