CS Form No. 212 Revised 2017	DERSO	NAL DAT	A SH	IEET	-				
	PERSO	NAL DAT	A JI						
WARNING: Any misrepresentat concerned.	ion made in the Personal Data Sheet and the	Work Experience Sheet sha	all cause the f	iling of admi	inistrative/c	riminal case/s ag	ainst the per	son	
READ THE ATTACHED GUIDE 1	TO FILLING OUT THE PERSONAL DATA SHE					1	(5)		
Print legibly. Tick appropriate boxes (I. PERSONAL INFORMATION	() and use separate sheet if necessary. Indicate I	N/A if not applicable. DO NOT A	BBREVIATE.		1. CS ID No.		(Do not fill up. I	For CSC use only	
	PALO								
	RIANEL APRIL					NAME EXTENSION (JR	t., SR)		
MIDDLE NAME 3. DATE OF BIRTH	ASID			1					
(mm/dd/yyyy)	4/29/1992	16. CITIZENSHIP		☑ Filipi	ino	Dual Citizenship			
4 DI AGE OF DIDTH	LIII ONCOC LEVTE	المراطعة	k:-			-	•	by naturalization	
4. PLACE OF BIRTH	HILONGOS, LEYTE	If holder of dual citizer				ountry.			
5. SEX	☐ Male ☐ Female	·	T						
6 CIVIL STATUS	✓ Single	17. RESIDENTIAL ADDRESS	Ног	247 ise/Block/Lot No	D.		MABINI ST Street		
	☐ Widowed ☐ Separated ☐ Other/s:						EASTERN		
7. HEIGHT (m)	1.57		50	bdivision/Village HILONGOS	?		Barangay LEYTE		
8. WEIGHT (kg)		ZIP CODE	C	ity/Municipality		6504	Province		
	60	18. PERMANENT ADDRESS		247		6524	524 MABINI ST		
9. BLOOD TYPE	0	10. PERIMANENT ADDRESS	Ног	use/Block/Lot No	0.		Street		
10. GSIS ID NO.	N/A		Su	bdivision/Village	9		EASTERN Barangay		
11. PAG-IBIG ID NO.	121131387980			HILONGOS			LEYTE Province		
12. PHILHEALTH NO.	03-051212910-9	ZIP CODE		City/Municipality 6524			Trovince		
13. SSS NO.	34-4849266-2	19. TELEPHONE NO.			N/A				
14. TIN NO.	460-067-413	20. MOBILE NO.		09206367149					
15. AGENCY EMPLOYEE NO.	N/A 21. E-MAIL ADDRESS (if any)			rianelapriltatapalo@gmail.com					
II. FAMILY BACKGROUND									
22. SPOUSE'S SURNAME	N/A		23. NAME of CHILDREN (Write full name and list all)				DATE OF BIRTH (mm/dd/yyyy)		
FIRST NAME	N/A	NAME EXTENSION (JR., SR)		N/A			N/A		
MIDDLE NAME	N/A	ı							
OCCUPATION	N/A								
EMPLOYER/BUSINESS NAME	N/A								
BUSINESS ADDRESS	N/A								
TELEPHONE NO.	N/A								
24. FATHER'S SURNAME	PALO							_	
FIRST NAME	NELSON	NAME EXTENSION (JR., SR)							
MIDDLE NAME	ROMA								
25. MOTHER'S MAIDEN NAME									
SURNAME	ASID								
FIRST NAME	MA. LOURDES								
MIDDLE NAME				(Continue on separate sheet if necessary)					
MIDDLE NAME CABILOGAN (Continue on separate sheet if necessary) III. EDUCATIONAL BACKGROUND									
						HIGHEST LEVEL/		SCHOLARSHIP/	
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGRE (Write in full)	E/COURSE		To	UNITS EARNED (if not graduated)	YEAR GRADUATED	ACADEMIC HONORS RECEIVED	
ELEMENTARY	HILONGOS SOUTH CENTRAL SCHOOL	PRIMARY EDUCAT	ION	From 6/1/1999	3/31/2005		2005		
SECONDARY	VISAYAS STATE UNIVERSITY LABORATORY HIGH	HIGH SCHOOL		6/1/2005	3/31/2009		2009		
VOCATIONAL /	SCHOOL N/A								
TRADE COURSE COLLEGE	VISAYAS STATE UNIVERSTY	BS IN GEODETIC ENGIN	IFFRING	6/1/2009	3/31/2014		2014		
				1		20 111170	4U 14		
GRADUATE STUDIES	UNIVERSITY OF THE PHILIPPINES - DILIMAN	MS IN GEOMATICS ENGI	NEEKING	8/1/2017	PRESENT	30 UNITS			
		Continue on separate sheet if nece	essary)						

	ERVICE ELIG							LICENCE (if a	nnliachla)
	SPECIAL LA	1080 (BOARD/ BAR) UNDER WS/ CES/ CSEE	RATING (If Applicable)	DATE OF EXAMINATION /	PLACE OF EXAMINA	TION / CONFER	RMENT	LICENSE (if a	Date of
BARANGAY ELIGIBILITY / DRIVER'S LICENSE			83.8	CONFERMENT				NUMBER	Validity
	GEODETIC ENGINEER			8/22/2014	METRO MANILA			0009237	4/29/2024
			(Co.	ntinue on separate sheet	if necessary)				
	XPERIENCE								
	ate employmei JSIVE DATES	nt. Start from your recent	work) Description	of duties should be	indicated in the attached	Work Exper	SALARY/JOB/PAY		
	m/dd/yyyy)	POSITION TITLE (Write in full/Do not abbreviate)		DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)		MONTHLY SALARY	GRADE (if applicable)& STEP (Format "00-0")/	STATUS OF APPOINTMENT	GOV'T SERVICE
From	То	,	,				(Format "00-0")/ INCREMENT		(Y/ N)
10/1/2021	12/31/2021	Geodetic Enç	jineer	PROVIN	OF AGRARIAN REFORM ICE OF SOGOD	P50000		JOB ORDER	YES
3/1/2021	8/31/2021	Geodetic Enç	jineer		OF AGRARIAN REFORM OF LEYTE-BILIRAN	P50000		JOB ORDER	YES
3/1/2015	5/31/2017	Science Research	Specialist II	PHIL-LIDAR 2- VISA	AYAS STATE UNIVERSITY	P34000		JOB ORDER	YES
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SICAL	ATURE	X:1 1		ntinue on separate sheet			February 23, 20	122	
SIGNA	TURE	Juapi Gal.	-		DATE			022 S FORM 212 (Revised 2	017) Page 2 of 4

VI. VOL	LUNTARY WORK OR INVOLVEMENT	IN CIVIC / NON-GOVERNMENT	/ PEOPLE / V	OLUNTARY O	RGANIZATIO	N/S		
29.	NAME & ADDRESS OF O							
	(Write in full)	(mm/d From	d/yyyy) To	NUMBER OF HOURS		POSITION / NATURE OF WORK	
V/II 1.5	ARNING AND DEVELOPMENT (L&D)			sheet if necessary)				
VII. LE	ARNING AND DEVELOPMENT (L&D)	INTERVENTIONS/TRAINING PR	l .					
30.	TITLE OF LEARNING AND DEVELOPMENT INTE		INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy) From To		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY	
	(Write in full)					(Write in full)	
10TH PH	IILIPPINE PROFESSIONAL SUMMIT: REIMAG IN VUCA WORLI		10/22/2021	10/23/2021	16.0	TECHNICAL	PHILIPPINE ASSOCIATION OF THE PROFESSIONAL REGULATORY BOARD MEMBERS	
E-SI	URVEY SEMINAR AND DENR NCR UPDATES		9/3/2021	9/3/2021	8.0	TECHNICAL	GEODETIC ENGINEERS OF THE PHILIPPINES, INC	
							<u>'</u>	
		(Cont	tinue on separate :	sheet if necessary)				
VIII. O	THER INFORMATION	1						
31.	SPECIAL SKILLS and HOBBIES	32. NON-		NCTIONS / RECOG e in full)	NITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
	N/A		N/A				GEODETIC ENGINEERS OF THE PHILIPPINES	
	<u> </u>						MEMBER	
			tinue on separate :	sheet if necessary			l I	
	SIGNATURE	Juapilpul.			Di	A <i>TE</i>	February 23, 2022	

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?	☐ YES ☐	☑ NO					
	b. within the fourth degree (for Local Government Unit - Care		☑ NO					
			If YES, give details:					
35.	a. Have you ever been found guilty of any administrative offe	ense?	☐ YES [NO NO				
		If YES, give details:						
	In the control of the							
	b. Have you been criminally charged before any court?		☐ YES If YES, give details:	NO				
			Date Filed:					
			Status of Case/s:					
36.	Have you ever been convicted of any crime or violation of an	y law, decree, ordinance or regulation by	YES					
	any court or tribunal?		If YES, give details:					
			1,0					
37	Have you ever been separated from the service in any of the	following modes: resignation, retirement		П				
07.	dropped from the rolls, dismissal, termination, end of term, fir		✓ YES If YES, give details:	NO				
	in the public or private sector?	·		FINISHED CONTRACT				
38.	a. Have you ever been a candidate in a national or local elec	tion held within the last year (except	YES	✓ NO				
	Barangay election)?		If YES, give details					
	b. Have you resigned from the government service during the	e three (3)-month period before the last	YES	✓ NO				
	election to promote/actively campaign for a national or local of	candidate?	If YES, give details:					
39.	Have you acquired the status of an immigrant or permanent	resident of another country?	☐ YES	√ NO				
			If YES, give details					
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag							
	7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972),	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 VO					
	The year a percent that alload they.		If YES, please specify ID No:					
C.	Are you a solo parent?							
			If YES, please specify	ID No:				
41.	REFERENCES (Person not related by consanguinity or affinity to applicant /	appointee)						
	NAME	ADDRESS	TEL. NO.					
	REY MARK L. ALFANTE	HILONGOS, LEYTE	9613399108					
	ILLI MARK E. ALI ARTE	THEONGOS, ELTTE	9013399100	6				
42.	I declare under oath that I have personally accomplished	Lithis Personal Data Sheet which is a tr	rue correct and					
	complete statement pursuant to the provisions of pertine			RIANEL Maniforth BALO				
	Philippines. I authorize the agency head/authorized represe	•						
	agree that any misrepresentation made in this docur administrative/criminal case/s against me.	ment and its attachments shall cause	e the filing of	PHOTO				
	administrative/orininal saccife against me.							
G	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)							
Ρ	LEASE INDICATE ID Number and Date of Issuance	Thiapilpalo						
G	overnment Issued ID: PRC	0 0 0						
IC)/License/Passport No.: 0009237	ox)						
D	ate/Place of Issuance: Sept 1, 2014		D					
			Right Thumbmark					
	SUBSCRIBED AND SWORN to before me this	, affiant exhibiti	ng his/her validly issued q	overnment ID as indicated above.				
		,						
	I							
	 							
Ī		Person Administering Oat	h					