

PERSONAL DATA SHEET

WARNING: Any misinterpretation 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. CS ID No.

(Do not fill up. For CSC use only)

I. PERSONAL INFORMATION

2. SURNAME	OSTIA		
FIRST NAME	KIMBERLY	N/A	
MIDDLE NAME	MONGAYA		
3. DATE OF BIRTH (mm/dd/yyyy)	04/13/1995	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:
4. PLACE OF BIRTH	SAN ANTONIO, NORTHERN SAMAR	If holder of dual citizenship, please indicate the details.	Philippines ▼
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		
6 CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	N/A SAINT NICHOL House/Block/Lot No. Street N/A SAN NICOLAS Subdivision/Village Barangay SAN ANTONIO NORTHERN SAMAR City/Municipality Province
7. HEIGHT (m)	1.58	ZIP CODE	6407
8. WEIGHT (kg)	51kg	18. PERMANENT ADDRESS	N/A RAMON MAGSAYSAY House/Block/Lot No. Street N/A ZONE 23 Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
9. BLOOD TYPE	"O+"	ZIP CODE	
10. GSIS ID NO.	N/A	19. TELEPHONE NO.	NONE
11. PAG-IBIG ID NO.	N/A	20. MOBILE NO.	09517995897
12. PHILHEALTH NO.	13-025326431-5	21. E-MAIL ADDRESS (if any)	kimberlyostia@gmail.com
13. SSS NO.	N/A		
14. TIN NO.	472-499-466-000		
15. AGENCY EMPLOYEE NO.			

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)	AUBRIANA KAIRA OSTIA GALLEGO	03/12/2023
MIDDLE NAME	N/A	N/A		
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	OSTIA			
FIRST NAME	DANILO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	SERATO	N/A		
25 MOTHER'S MAIDEN NAME				
SURNAME	MONGAYA			
FIRST NAME	MARIA FE			
MIDDLE NAME	ABENIR			

(Continue on separate sheet if necessary)

III. EDUCATIONAL BACKGROUND

26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE		HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	DALUPIRIT ELEM. SCHOOL	PRIMARY EDUCATION	2001	2007	N/A	2007	N/A
SECONDARY	SAN ANTONIO AGRICULTURAL AND VOCATIONAL SCHOOL	HIGH SCHOOL	2007	2011	N/A	2011	N/A
VOCATIONAL / TRADE COURSE	TESDA-BALICUATRO COLLEGE OF ARTS AND TRADES	TRAINERS METHODOLOGY 1	2017	2017	N/A	2017	N/A
COLLEGE	UNIVERSITY OF EASTERN PHILIPPINES	BACHELOR OF SCIENCE IN INFORMATION TECHNOLOGY	2011	2015	N/A	2015	BEST IN THESIS AWARDEE
COLLEGE	NORTHERN SAMAR COLLEGES	BACHELOR OF SCIENCE IN SECONDARY EDUCATION	2018	2019	N/A	2019	WITH HONORS
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)


SIGNATURE		DATE	MARCH 25, 2025	CSC FORM 212 (Revised 2017), Page 1 of 4
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27.	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
					NUMBER	Date of Validity
	LICENSURE EXAMINATION FOR PROFESSIONAL TEACHERS	81.80	MARCH 2019	UEP, CATARMAN, NORTHERN SAMAR	1090934	4/13/2022

V. WORK EXPERIENCE
(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.

(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.

[illegible]

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for 8th

MARCH 25, 2025

[illegible]










VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED
(List L&D interventions and L&D training programs and include only the relevant L&D/training taken for the last five (5) years for Division Chief/Executive/Managerial positions)

[illegible]

VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
COMPUTER LITERATE	N/A	N/A
READING		
BAKING		
COOKING		
DRIVING		
SWIMMING		
PAINTING		

SIGNATURE	<i>K. G. G. G.</i>	DATE	MARCH 25, 2025	CS FORM 212 (Revised 2017), Page 3 of 4
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34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to the chief of bureau or office or to the person who has immediate supervision over you in the Office, Bureau or Department where you will be appointed. a. within the third degree? b. within the fourth degree (for Local Government Unit - Career Employees)?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____												
35. a. Have you ever been found guilty of any administrative offense? b. Have you been criminally charged before any court?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ Date Filed: _____ Status of Case/s: _____												
36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____												
37. Have you ever been separated from the service in any of the following modes: resignation, retirement, dropped from the rolls, dismissal, termination, end of term, finished contract or phased out (abolition) in the public or private sector?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____												
38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)? b. Have you resigned from the government service during the three (3)-month period before the last election to promote/actively campaign for a national or local candidate?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____												
39. Have you acquired the status of an immigrant or permanent resident of another country?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details (country): _____												
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 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? b. Are you a person with disability? c. Are you a solo parent?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____												
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)													
<table><thead><tr><th>NAME</th><th>ADDRESS</th><th>TEL. NO.</th></tr></thead><tbody><tr><td>BRYAN JAY B. BALLETA, Ph.D</td><td>SAAVS, San Antonio, Northern Samar</td><td>09086318861</td></tr><tr><td>MAY OPEÑA</td><td>BALICUATRO COLLEGE OF ARTS AND TRADES, Allen, Northern Samar</td><td>09395805690</td></tr><tr><td>ALEXANDER A. GALLEGO</td><td>Baybay City, Leyte</td><td>09632658688</td></tr></tbody></table>		NAME	ADDRESS	TEL. NO.	BRYAN JAY B. BALLETA, Ph.D	SAAVS, San Antonio, Northern Samar	09086318861	MAY OPEÑA	BALICUATRO COLLEGE OF ARTS AND TRADES, Allen, Northern Samar	09395805690	ALEXANDER A. GALLEGO	Baybay City, Leyte	09632658688
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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.													
<table><tr><td>Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</td></tr><tr><td>Government Issued ID: PRC</td></tr><tr><td>ID/License/Passport No.: 1790934</td></tr><tr><td>Date/Place of Issuance: JULY 03, 2019/ PRC Tacloban</td></tr></table>	Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance	Government Issued ID: PRC	ID/License/Passport No.: 1790934	Date/Place of Issuance: JULY 03, 2019/ PRC Tacloban	<table><tr><td></td></tr><tr><td>Signature (Sign inside the box)</td></tr><tr><td>March 25, 2025</td></tr><tr><td>Date Accomplished</td></tr></table>		Signature (Sign inside the box)	March 25, 2025	Date Accomplished				
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SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.													
<table><tr><td>_____ Person Administering Oath</td></tr></table>		_____ Person Administering Oath											
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