## CS Form No. 212

Revised 2017

## **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 necess	ary. Indicate N/A if not applicable	le. DO NOT A	ABBREVIATE.	1. CS ID No.	(Do r	not fill up. Fo	r CSC use only)
I. PERSONAL INFORMATIO	N							
2. SURNAME	COBICO							
FIRST NAME	EDGARDO					NAME EXTE	NSION (JR., S	SR)
MIDDLE NAME	GUMBA					JR		
3. DATE OF BIRTH (mm/dd/yyyy)	April 19,1986	16. CITIZENSHIP			Fi	lipino		
4. PLACE OF BIRTH	Baybay City Leyte	If holder of dual citizens	hip,			Pls. indica	ate countr	y:
5. SEX	Male	please indicate the deta	ils.					
6 CIVIL STATUS	Single	17. RESIDENTIAL ADDRESS						
				House/Block/Lot No. Tipay			Street Sta.Cruz	Z
				Subdivision/Village Baybay City			Baranga Leyte	у
7. HEIGHT (m)	5'9			City/Municipality			Province	9
8. WEIGHT (kg)	79	ZIP CODE			6521			
9. BLOOD TYPE	B+	18. PERMANENT ADDRESS		House/Block/Lot No.			Street	
10. GSIS ID NO.	N/A			Tipay			Sta.Cruz	?
				Subdivision/Village Baybay City			Baranga Leyte	у
11. PAG-IBIG ID NO.	121205641017			City/Municipality			Province	)
12. PHILHEALTH NO.	130251598208	ZIP CODE			6521			
13. SSS NO.	N/A	19. TELEPHONE NO.			N/A			
14. TIN NO.	265880328000	20. MOBILE NO.			0931971442	<u>1</u> 9		
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)		<u>jerrygu</u>	mba19@g	<u>ımail.cor</u>	<u>m</u>	
II. FAMILY BACKGROUND								
22. SPOUSE'S SURNAME	N/A		23. NAME of C	CHILDREN (Write full	name and list a	dl)		OF BIRTH /dd/yyyy)
FIRST NAME	N/A	NAME EXTENSION (JR., SR)		N/A				N/A
MIDDLE NAME	N/A							
OCCUPATION	N/A							
EMPLOYER/BUSINESS NAME	N/A							
BUSINESS ADDRESS	N/A							
TELEPHONE NO.	N/A							
24. FATHER'S SURNAME	COBICO							
FIRST NAME	EDGARDO	NAME EXTENSION (JR., SR)						
MIDDLE NAME	LORETO							
25. MOTHER'S MAIDEN NAME								
SURNAME	GUMBA							
FIRST NAME	BELINDA							
MIDDLE NAME	URDANETA		<u> </u>	(Continue of	n separate she	et if necess	ary)	
III. EDUCATIONAL BACKG	ROUND					HIGHEST		SCHOLARSHIP/
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE (Write in full)	/COURSE	PERIOD OF ATTE	ENDANCE To	LEVEL/ UNITS EARNED (if not	YEAR GRADUA TED	ACADEMIC HONORS RECEIVED
ELEMENTARY	Sta.Cruz Elementary School	PRINARY EDUCATION	1	1993	1999		1999	N/A
SECONDARY	Baybay National High School	SECONADARY EDUCATI	ION	2001	2005		2005	N/A
VOCATIONAL / TRADE COURSE	TESDA NC II						2013	N/A
COLLEGE	N/A							
GRADUATE STUDIES		(O4i						
		Continue on separate sheet if nec	essary)					
SIGNATURE	ı	•		DATE	_			

IV. CIVIL S	SERVICE ELI	IGIBILITY							
	ER SERVICE/ RA	1080 (BOARD/ BAR) UNDER	DATING	DATE OF				LICENSE (if a	applicable)
	SPECIAL LA	AWS/ CES/ CSEE LITY / DRIVER'S LICENSE	RATING (If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINATI	ON / CONFE	RMENT	NUMBER	Date of Validity
V WORK	EVDEDIENO		(Cont	tinue on separate sheet it	necessary)				
	EXPERIENC vate employn		ent work) Descript	tion of duties should	d be indicated in the attac	ched Work	Experience	sheet.	
28. INCLU	JSIVE DATES	POSITION T			ENCY / OFFICE / COMPANY	MONTHLY	SALARY/ JOB/ PAY GRADE (if	STATUS OF	GOV'T
From	m/dd/yyyy) To	(Write in full/Do not			I/Do not abbreviate)	SALARY	applicable)& STEP (Format "00-0")/ INCREMENT	APPOINTMENT	SERVICE (Y/N)
01/01/2014	05/31/2023	Electrician and So	und Operator	DE	PO-PPES	12386.00	IIIO LEILEITI	J.O	Y
06/01/2023	PRESENT	ELECTRONIC TECHNIC	CIAN AND SOUND		O-ILFMU	17552.92	GRADE 6-	CASUAL	Y
00/01/2023	FILOLINI	OPERATO	OR	.,	O-ILI IIIO	17 002.02	STEP 1	OAUUAL	'
			(Cont	tinue on separate sheet it					
SIGNA	ATURE				DATE				

VI. VOLUNTARY WORK OR INVOLVEMENT I	N CIVIC / NO	N-GOVERNM	ENT / PEOPLE	E/VOLUNTAR	ORGANIZATION/S
29. NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIV (mm/do		NUMBER OF HOURS	1	POSITION / NATURE OF WORK
N/A	N/A	N/A	N/A		N/A
	<u> </u>	nue on separate s	• /		
VII. LEARNING AND DEVELOPMENT (L&D)					
(Start from the most recent L&D/training program and include	only the relevant		n for the last five (5)		hief/Executive/Managerial positions)
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	ATTENI (mm/do	DANCE	NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
FIRE FIGHTING AND RESCUE TRAINING	11/05/2018	11/09/2018	72 hrs	Technical	VISAYAS STATE UNIVERSITY-MAIN
OVPAF STRATEGIC PLANNING WORSHOP	2/15/2017	2/16/2017	16 hrs	Foundation	VISAYAS STATE UNIVERSITY-MAIN
CONSUMER ELECTRONICS NCII	06/10/2010	12/17/2010	800 hrs	FOUNDATION	ORMOC CITY TECHNOLOGICAL AND MANPOWER TRAINING AND RESEARCH
ELECTRICAL INSTALLATION MAINTENANCE	01/22/2013	06/18/2013	603 hrs	Technical	ORMOC CITY TECHNOLOGICAL AND MANPOWER TRAINING AND RESEARCH
INTRODUCTION TO METROLOGY AND INDUSTRIAL CALIBRATION	07/12/2022	07/13/2022	16 hrs	Technical	VISAYAS STATE UNIVERSITY-MAIN
DISATER RISK REDUCTION AND MANAGEMENT(DRRM)	04/04/2022	04/04/2022	8 hrs	TECHNICAL	KOICA(KOREA INTERNATIONAL COOPERATION AGENCY
USER'S TRAINING OF FLUKE 1625-2,FLUKE-1630- 2,FLUKE-II910,FLUKE-1777,FLUKETIS60+9Hz,FLUKE-	03/19/24	03/20/24	16hrs	TECHNICAL	PRESIDIUM.PH CORPORATION
	(Conti	nue on separate s	heet if necessary)		
VIII. OTHER INFORMATION					
31. SPECIAL SKILLS and HOBBIES	NON		INCTIONS / RECOG ite in full)	SNITION	MEMBERSHIP IN  33. ASSOCIATION/ORGANIZATION (Write in full)
ELECTRICIAN			N/A		N/A
ELECTRONICS TECHNICIAN					
DRIVER					
	(Conti	nue on separate s	heet if necessary)		
SIGNATURE			D	ATE	

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 - Care	eer Employees)?			
		If YES, give details:		
			NO	
35. a. Have you ever been found guilty of any administrative offe	ense?	10/50		
		If YES, give details:	NO	
b. Have you been criminally charged before any court?		If VEC give detaile:		
		If YES, give details:  Date Filed:	NO	
		Status of Case/s:	· · ·	
36. Have you ever been convicted of any crime or violation of an	y law, decree, ordinance or			
regulation by any court or tribunal?	If YES, give details:			
			NO	
37. Have you ever been separated from the service in any of the				
retirement, dropped from the rolls, dismissal, termination, eno phased out (abolition) in the public or private sector?	If YES, give details:			
38. a. Have you ever been a candidate in a national or local elec	ction held within the last vear			
(except Barangay election)?	,	If YES, give details:	NO	
b. Have you resigned from the government service during the				
the last election to promote/actively campaign for a national	If YES, give details: NO			
39. Have you acquired the status of an immigrant or permanent				
	If YES, give details (cour			
			NO	
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag (RA 7277); and (c) Solo Parents Welfare Act of 2000 (RA 89				
a. Are you a member of any indigenous group?	72), ploase allower the lollowing			
		If YES, please specify:	NO	
b. Are you a person with disability?		If YES, please specify ID No: NO		
		III 1 Lo, piease specify ib ivi	J. NO	
c. Are you a solo parent?				
c. Are you a solo parent?		If YES, please specify ID No	o: <u>NO</u>	
c. Are you a solo parent?  41. REFERENCES (Person not related by consanguinity or affinity to applicant /a	appointee)	If YES, please specify ID No	D: <u>NO</u>	
	appointee)  ADDRESS	If YES, please specify ID No	D: <u>NO</u>	
41. REFERENCES (Person not related by consanguinity or affinity to applicant /a	ī		o: NO	
41. REFERENCES (Person not related by consanguinity or affinity to applicant /a  NAME  ENGR. MARLON BURLAS	ADDRESS  ORMOC CITY	TEL. NO. 9176341520	o: NO	
41. REFERENCES (Person not related by consanguinity or affinity to applicant /a  NAME  ENGR. MARLON BURLAS  ENGR. MARIO LILIO VALENZONA	ADDRESS	TEL. NO. 9176341520 9176341514	o: NO	
41. REFERENCES (Person not related by consanguinity or affinity to applicant /a  NAME  ENGR. MARLON BURLAS  ENGR. MARIO LILIO VALENZONA  MR. CLAUDIO ABABAT JR.	ADDRESS  ORMOC CITY	TEL. NO. 9176341520	o: NO	
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