

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. CS ID No.

(Do not fill up. For CSC use only)


I. PERSONAL INFORMATION

2. SURNAME FIRST NAME MIDDLE NAME	MOLATO				
	LO ANTONETTE		NAME EXTENSION (JR., SR) N/A		
	DADULO				
3. DATE OF BIRTH (mm/dd/yyyy)	09/22/2000	16. CITIZENSHIP If holder of dual citizenship, please indicate the details.	<input checked="" type="checkbox"/> Filipino	<input type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:	
4. PLACE OF BIRTH	INOPACAN, LEYTE				
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 ZIP CODE	NO. 001 House/Block/Lot No. N/A Subdivision/Village INOPACAN City/Municipality 6522	PUROK 4 Street ESPERANZA Barangay LEYTE Province		
7. HEIGHT (m)	1.52 m	18. PERMANENT ADDRESS ZIP CODE	NO. 001 House/Block/Lot No. N/A Subdivision/Village INOPACAN City/Municipality 6522	PUROK 4 Street ESPERANZA Barangay LEYTE Province	
8. WEIGHT (kg)	43 kg				
9. BLOOD TYPE	B+				
10. GSIS ID NO.	N/A				
11. PAG-IBIG ID NO.	N/A				
12. PHILHEALTH NO.	N/A	19. TELEPHONE NO.	N/A		
13. SSS NO.	N/A		N/A		
14. TIN NO.	635-876-197-00000		09098698104		
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	LOANTONETTEMOLATO0922@GMAIL.COM		

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME FIRST NAME MIDDLE NAME	N/A		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
	N/A	NAME EXTENSION (JR., SR) N/A		
	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME FIRST NAME MIDDLE NAME	MOLATO			
	ANTONIO	NAME EXTENSION (JR., SR) N/A		
	GOZON			
25. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME	LOLITA BISNAR DADULO			
	DADULO			
	LOLITA			
	BISNAR			
(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)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	ESPERANZA ELEMENTARY SCHOOL	ELEMENTARY	2006	2013	GRADUATED	2013	THIRD HONOR
SECONDARY	CONALUM NATIONAL HIGH SCHOOL EAST VISAYAN ADVENTIST ACADEMY	HIGHSCHOOL	2013 2017	2017 2019	GRADUATED	2017 2019	THIRD HONOR SILVER AWARD
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF ELEMENTARY EDUCATION	2019	2023	GRADUATED	2023	CUMLAUDE
GRADUATE STUDIES	N/A	N/A	N/A	N/A		N/A	N/A
(Continue on separate sheet if necessary)							
SIGNATURE				DATE		JANUARY 7, 2024	

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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		
	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

(Start from the most recent L&D/training program and include only the relevant L&D/training taken for the last five (5) years for Division Chief/Executive/Managerial positions)

30.	TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
		From	To			
	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31.	SPECIAL SKILLS and HOBBIES	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	DRAWING	NA		ADVENTIST MINISTRY TO COLLEGE AND UNIVERSITY STUDENTS
	VLOGGING			
	SINGING			
	BASIC PHOTOGRAPHY			
	TRAVELLING			
	CALLIGRAPHY			

(Continue on separate sheet if necessary)

SIGNATURE		DATE	JANUARY 7, 2024
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34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to chief of bureau or office or to the person who has immediate supervision over you in the Bureau or Department where you will be appointed,
a. within the third degree?
b. within the fourth degree (for Local Government Unit - Career Employees)?

☐ YES☒ NO

☐ YES☒ NO

If YES, give details:

35. a. Have you ever been found guilty of any administrative offense?

☐ 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 any law, decree, ordinance or regulation by any court or tribunal?

☐ YES☒ 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?

☐ YES☒ 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)?

☐ YES☒ NO

If YES, give details: _____

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?

☐ YES☒ NO

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 (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

a. Are you a member of any indigenous group?

☐ YES☒ NO

If YES, please specify: _____

b. Are you a person with disability?

☐ YES☒ NO

If YES, please specify ID No: _____

c. Are you a solo parent?

☐ YES☒ NO

If YES, please specify ID No: _____

41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)

NAME	ADDRESS	TEL. NO.
ARLEE JEN AVELLANA	TOLOSA, LEYTE	N/A
AZUCENA P. MIRAMBEL, MD., FPOGS	INOPACAN, LEYTE	9178263130
NICKO M. APOSTOL	INOPACAN, LEYTE	N/A

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.

ID picture taken within the last 6 months
3.5 cm. X 4.5 cm
(passport size)

With full and handwritten name tag and signature over printed name

Computer generated or photocopied picture is not acceptable


PHOTO

Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)
PLEASE INDICATE ID Number and Date of Issuance

Government Issued ID: TAXPAYER IDENTIFICATION CARD

ID/License/Passport No.: 635-876-197-00000

Date/Place of Issuance: OCTOBER 10, 2023



Signature (Sign inside the box)

JANUARY 7, 2023

Date Accomplished

Right Thumbmark

SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.

Person Administering Oath

