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									
	E TO FILLING OUT THE PERSONAL DATA :								
Print legibly. Tick appropris I. PERSONAL INFOR	boxes () and use separate sheet MATION	if necessary. Indicate N	I/A if not ar	oplicable.	n.csidn	(Do not	fill up. For C	SCuse only)	
2. SURNAME	LECCIONES								
FIRST NAME	ELSON	-	-			JR	-	-	
MIDDLE NAME	ITABLE								
G. DATE OF BIRTH (mm/dd/yyyy)	8/17/1994	16. CITIZENSHIP							
4. PLACE OF BIRTH	BAYBAY CITY, LEYTE	If holder of dual citi	nolder of dual citizenship, Pls. indicate country			y:			
5. SEX		please indicate the				-			
6 CIVIL STATUS		17. RESIDENTIAL ADDRE		424	-	-	-	-	
o aveanus			House/Block/Lot No. RIVERSIDE		-	Street GA-AS			
- UEWT/)	165		Subdivision/Village BAYBAY				Barangay LEYTE		
7. HEIGHT (m)	1.65		Citv/Municipalitv		Province				
8. WEIGHT (kg)	56.9	ZIP CODE 18. PERMANENT ADDRE		424					
9. BLOOD TYPE	0	16. PERIVANENT ADDRE	House/Block		ock/Lot No.		Street		
I O. GSIS ID NO.	N/A			RIVERSIDE Subdivision/Village			GA-AS Barangay		
11. PAGIBIGIDNO	N/A		Cit)	BAYBAY City/Municipality			LEYTE Province		
2. PHILHEALTH NO.	13-202526429-4	ZIP CODE		6521			•		
3. SSSNQ	N/A	19. TELEPHONE NO.	5			63-0834			
14. TIN NQ	N/A	20. MOBILE NO.	BILE NO. 090			066371621			
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if a	elsonlecc@gmail.com						
II. FAMILY BACKGRO	OUND								
22 SPOUSE'S SURNAME	N/A		23. NAME of list all)	of CHILDRE	N (Write f	ull name and		RTH (mm/dd yy)	
FIRST NAME	N/A	NAMEEXTENSION (JR, SR)			NA.	-	٨	VA.	
MIDDLE NAME	N/A					_			
OCCUPATION	N/A	-				_			
EMPLOYER/BUSINESS NA	N/A								
BUSINESS ADDRESS	N/A								
TELEPHONE NO.	N/A								
24ATHER'S SURNAME	LECCIONES	SR .							
FIRST NAME	ELSON	an .							
MIDDLE NAME	TULOD								
25 MOTHER'S MAIDEN NAME									
SURNAME	ITABLE				-	-			
FIRST NAME	PABLITA	-		(Continue on separate sheet if n			L		
MIDDLE NAME I. EDUCATIO VAL B	TALATAYOD PACKGROUND			(Conti	nue on sep	arate sneet if n	ecessary)	_	
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGR	EE/COURSE PERIOD OF ATTENDANCE		HIGHEST LEVEL/ UNITS EARNED	YEAR SRADUATED	SCHOLARSHIF / ACADEMIC HONORS		
	BAYBAY ADVENTIST ELEMENTARY			From	То	(if not graduated)		RECEIVED	
ELEMENTARY	SCHOOL			#####	##### 4/1/200		2007		
SECONDARY	EAST VISAYAN ADVENTIST ACADEMY			#####	11		2011		
VOCATIONAL / TRADE COURSE									
COLLEGE	SOUTHERN LEYTE STATE UNIVERSITY- TOMAS OPPUS			#####	#####		2018		
GRADUATE STUDIES									
(Continue on separate sheet if necessary)									
SIGNATURE				DA	ATE				

S FORM 212 (Revised 2017). Page 1 of

IV. CIVIL SERVICE ELIGIBILITY									
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 EXAMINA	TION / CONFE	RMENT	LICENSE (if ap	plicable) Date of Validity	
LET (LICENSURE EXAMINATION FOR TEACHERS)		85.6	9/30/2018	CE	CEBU			1/14/2019	
						-	-		
-	-					-	-		
-	-			-					
-				-			-		
						-	-		
						-			
			(Con	tinue on separate sheet	t if necessary)				
	XPERIENCE	ent. Start from your rec				taahad War	k Evperience		
28. INCLUSIV	E DATES (mm/				:NCY / OFFICE / COMPANY				COVET SERVICE
From	dd/yyyy) POSITION TITLE (Write in full/Do not abbreviate)				/Do not abbreviate)	SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0") / INCREMENT	STATUS OF APPOINTMENT	GOVT SERVICE (Y/ N)
		,							
,									
		,							
				-					
				-					
				Al-	116				
SIGNA	ATURE		(Con	tinue on separate shee	t if necessary) DATE				
								DNA 212 (Davised 20)	

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S							
29. NAME& ADDRESS OF ORGANIZATION in full)	(Write	INCLUSI (mm/d	VEDATES d/yyyy) To	NUMBEROFHOURS			
Baybay Adventist Youth Organization			7/13/1905		Vice President		
Voice of Hope Baybay Media Ministry					Vice Chairman		
	(Contin	iue on separate	sheet if necess	ary)			
VII. LEARNING AND DEVELOPMENT ((L&D) INTERVENTIONS/TRA	I		TENDED			
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)			EDATES OF NDANCE Id/yyyy) To	NUMBEROFHOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
BASIC OPERATIONS OF MICROSOFT OFFICE POWERPOINT)	CE 2018 (WORD,EXCEL,	1/4/2021	1/22/2021			ENGR. JOSE A. MORA, JR.	
MULTIMEDIA TRAINING -	WORKSHOP	8/21/2019	8/23/2019			MR. BERDANDINO C. MANIEGO	
·							
	-						
	-						
(Continue on separate sheet if necessary) VIII. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES	32. NON-AC	ADEMIC DISTIN		OGNITION		MEMBERSHIP IN ASSOCIATION/ 33. ORGANIZATION	
Singing	32 (Write in full) TEENGOG Version 2 Songwriting- SLSU Banner Song 2021, Champion					(Write inful) SLSU-CTE Culture Performing Arts Guild - Singing Minstrels	
Songwriting	TEENGOG Version 1 Sc	SLSU-CTE Euphonix Band					
Photography	PASUC Region VIII Culture a						
Videography	PASUC Region VIII Culture a						
Hosting	PASUC Region VIII Culture a						
Voice overs/ Dubbing	Competitor SCUAA 2016 - Lawn Tennis Qualifier						
Play Basketball, Lawn Tennis, Table Tennis Badminton, Volleyball (Continue on separate sheet if necessary)							
SIGNATURE	CONUI	.uc on ocparate	s.recen necess	D.	ATE		

CS FORM 212 (Revised 2017), Page 3 of 4

34. Are you related by consanguinity or affinity to the chief of bureau or office or to the person who he Bureau or Department where you will be apppoint a. within the third degree?						
b. within the fourth degree (for Local Governme	If YES, give details:					
_{35.} a. Have you ever been found guilty of any admir	If YES, give details:					
b. Have you been criminally charged before any	If YES, give details: Date Filed: tatus of Case/s:					
36. Have you ever been convicted of any crime or v ordinance or regulation by any court or tribunal	If YES, give details:					
37. Have you ever been separated from the service resignation, retirement, dropped from the rolls, term, finished contract or phased out (abolition	dismissal, termination, end of) in the public or private sector?	If YES, give details:				
a. Have you ever been a candidate in a national last year (except Barangay election)?b. Have you resigned from the government server	If YES, give details:					
period before the last election to promote/acti	If YES, give details:					
country?	If YES, give details (country):					
40. Pursuant to: (a) Indigenous People's Act (RA 83 Disabled Persons (RA 7277); and (c) Solo Parer Are you a member of any indigenous group?	If YES, please specify:					
Are you a person with disability?						
Are you a solo parent?		If YES, please specify ID No:				
41. REFERENCES (Person not related by consanguinity or affinity to a	applicant /appointee)					
NAME	ADDRESS	TEL. NO.	ID picture taken within the last 6 months			
Dr. Pritzel Lee Guasa Yepes	Southern Leyte, Tomas-Oppus	9208014021	4.5 cm. X 3.5 cm (passport size)			
Dr. Criselyn Saure Sescon	Southern Leyte, Tomas-Oppus	9501525763	Computer generated or photocopied picture is not acceptable			
Pstr. Emmanuel Barrientos	Isabel Leyte	9175690229				
42. I declare under oath that I have personally according true, correct and complete statement pursuant regulations of the Republic of the Philippines. I representative to verify/validate the contents s misrepresentation made in this document and administrative/oriminal cose/s against me.	to the provisions of pertinent law authorize the agency head/authorize that a tated herein. I agree that a	ws, rules and orized ny	РНОТО			
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance. Government Issued ID: 1722899						
ID/License/Passport Nc	Signature (Sign inside the	box)				
Date/Place of Issuance: 1/4/2019 PRC, Robinson Ormoc		Right Thumbmark				
SUBSCRIBED AND SWORN to before me this	<u>,</u> affiant exhibiting	g his/her validly issued go	overnment ID as indicated above.			
	Dath					

Yes/No Cstat Gender Yes Single Male No Married Female

Separated Widowed