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.								
	TO FILLING OUT THE PERSONAL DATA SHEE and use separate sheet if necessary. Indicate N/A				1. CS ID No.	Ι	(Do not fill up. F	or CSC use only)
I. PERSONAL INFORMATION		A IT HOL Applicable. DO NOT ADD	SKEVIA I L.		1. 00 10 110.		(DO HOL IIII Sp	01 000 400 0,
2. SURNAME	MAHINLO							
FIRST NAME	REYMOND					NAME EXTENSION (JR	, SR)	
MIDDLE NAME	VILLAMOR							
3. DATE OF BIRTH	10/22/1993	16. CITIZENSHIP		□ Silini		1 Dual Citizonchin		
(mm/dd/yyyy)				✓ Filipi	ino L	Dual Citizenship by birth	by naturali	zation
4. PLACE OF BIRTH	BAYBAY LEYTE	If holder of dual citizen	ship,			Pls. indicate of		
5. SEX	✓ Male ☐ Female	please indicate the de	tails.	Philippines				•
6 CIVIL STATUS	☑ Single ☐ Married	17. RESIDENTIAL ADDRESS) KANDUMANHU	G
	☐ Widowed ☐ Separated ☐ Other/s:		Hou				Street HIBUNAWAN	
7. HEIGHT (m)	1.575		Sul	bdivision/Village BAYBAY			Barangay LEYTE	
		710 0005	Ci	ty/Municipality		Province		
8. WEIGHT (kg)	58	ZIP CODE 18. PERMANENT ADDRESS				6521	TIO MANDUNAANI IIIO	
9. BLOOD TYPE	0	18. PERMANENT ADDRESS	Нои	se/Block/Lot No).	SITIO KANDUMANHUG Street		
10. GSIS ID NO.			Sul	bdivision/Village		HIBUNAWAN Barangay		
11. PAG-IBIG ID NO.	121218543681		Ci	BAYBAY ity/Municipality		LEYTE Province		
12. PHILHEALTH NO.	13-050198824-4	ZIP CODE		6521				
13. SSS NO.	06-37942544	19. TELEPHONE NO.						
14. TIN NO.	358515643	20. MOBILE NO.		09914363559				
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)		RMAI	HINLO10	2293@GMA	L.COM	
II. FAMILY BACKGROUND								
22. SPOUSE'S SURNAME			23. NAME of CH	LDREN (Write	full name and	list all)	DATE OF BIRT	H (mm/dd/yyyy)
FIRST NAME		NAME EXTENSION (JR., SR)						
MIDDLE NAME								
OCCUPATION								
EMPLOYER/BUSINESS NAME								
BUSINESS ADDRESS								
TELEPHONE NO.								
24. FATHER'S SURNAME	MAHINLO	NAME EXTENSION (JR., SR)						
FIRST NAME	RENATO	INAME EXTENSION (JR., 5R)						
MIDDLE NAME	ROLUNA							
25. MOTHER'S MAIDEN NAME								
SURNAME	VILLAMOR							
FIRST NAME	LERINA							
III. EDUCATIONAL BACKGR	BELTRAN		_	(Co	ontinue on se	parate sheet if neces	sary)	
	COND					HIGHEST LEVEL/		SCHOLARSHIP/
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGRE (Write in full)	E/COURSE	From	To	UNITS EARNED (if not graduated)	YEAR GRADUATED	ACADEMIC HONORS RECEIVED
ELEMENTARY	FRANCISCAN COLLEGE OF THE IMMACULATE CONCEPTION			6/23/2001	4/28/2006	Graduated	2006	
SECONDARY	FRANCISCAN COLLEGE OF THE IMMACULATE CONCEPTION			6/11/2006	4/15/2009	3rd Year HighSchool	2009	
VOCATIONAL / TRADE COURSE	ALTERNATIVE LEARNING SYSTEM			10/11/2011		Alternative Learning System Passer	2011	
COLLEGE	FRANCISCAN COLLEGE OF THE IMMACULATE CONCEPTION	BACHELOR OF SCIENCE IN INFORMA TECHNOLOGY		6/19/2014	5/19/2018	Graduated	2018	
GRADUATE STUDIES								
		I Continue on separate sheet if nece	ssary)					
SIGNATURE	Malil			DA	TE		March/22/2025	

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IV. CIVIL SERVICE ELIGIBILITY									
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE		RATING (If Applicable)	DATE OF EXAMINATION /	PLACE OF EXAMINA	TION / CONFERMENT		LICENSE (if a	oplicable) Date of	
BARANGAY ELIGIBILITY / DRIVER'S LICENSE		, , , ,	CONFERMENT	7101001110			NUMBER	Validity	
CAREER SERVICE PROFESSIONAL		81.4	3/26/2023	TACLOBAN C	ITY, REGION 8				
			(Coi	ntinue on separate sheet	if necessary)				
	XPERIENCE ate employme	nt. Start from your recen	t work) Descriptio	n of duties should b	oe indicated in the attache	ed Work Exp	perience shee	t.	
28. INCLU	JSIVE DATES m/dd/yyyy)	POSITION T		DEPARTMENT / AGENCY / OFFICE / COMPANY		MONTHLY	SALARY/ JOB/ PAY GRADE (if	STATUS OF	GOV'T
From	То	(Write in full/Do not		(Write in full/Do not abbreviate)		SALARY	applicable)& STEP (Format "00-0")/ INCREMENT	APPOINTMENT	SERVICE (Y/ N)
7/8/2016	Present	On-Call Computer	Technician	Home Base	e / Home Service	1000-2000			
8/1/2024	2/15/2024	IT Support	Staff	L'Asuncio	on Hotel Baybay	10000.00			
2/1/2024	4/1/2024	Scanner Op	erator	VSU Li	ibrary (UBIX)	10000.00			
7/1/2023	11/1/2023	Scanner Op	erator	VSU Li	brary (DOST)	17000.00			
4/1/2021	2/1/2023	Appointment Setter/ C Entry	old Caller/ Data	RentOwn.net	- Work from Home	15000.00			
6/1/2021	12/1/2022	Data Entry Specialis	st - Part Time	Colourcom.com - Work from Home		10000.00			
5/9/2022	5/9/2022	Ventureslink Transm Technician (Elec		Legislative Office, Baybay Leyte		7000.00			
3/1/2020	12/1/2020	Lead Generation Data S	Specialist/Sytem	Fisrt Innovate Solu	10000.00				
5/1/2018	5/1/2019	Internet Cafe Attenda		Outsourcing (BPO) Renzo Cybernet Cafe, Baybay Leyte		9000.00			
5/9/2016	5/9/2016	Smartmatic Vote Cou Technician (Elec		Brgy. Talisay, Bato Leyte Precinct		7000.00			
		·	•						
			16	ntinuo en concreta de la	if necessary				
SIGNATURE (Continue on separate sheet if necessary) DATE Mai						March	/22/2025		
		77/2					С	S FORM 212 (Revised 2	017), Page 2 of 4

VI. VOLUNTART WORK OR INVOLVEWENT I	N CIVIC / NON-GOVERNINEN I /	PEOPLE / VC	LUNIARIU	RGANIZATION	// 3		
29. NAME & ADDRESS OF OR (Write in full)		INCLUSIVE DATES (mm/dd/yyyy) From To		NUMBER OF HOURS	POSITION / NATURE OF WORK		
		tinue on separate s					
VII. LEARNING AND DEVELOPMENT (L&D) I	INTERVENTIONS/TRAINING PR					I	
30. TITLE OF LEARNING AND DEVELOPMENT INTER (Write in full)		INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/	CONDUCTED/ SPONSORED BY (Write in full)	
(Title III lair)		From	To		Technical/etc)	(Tino III Iuli)	
P's Computer Literacy and Basic Troubleshooting Tr	aining	8/1/2017	10/1/2017	120.0	Technical	Department of Social Welfare and Development	
	(Con	tinue on separate s	sheet if necessary)				
VIII. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES	32. NON	-ACADEMIC DISTIN (Write	ICTIONS / RECOGN in full)	NITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
Data Entry Precission and Accuracy							
Microsoft Office Proficient							
Computer Troubleshooting							
Printer Troubleshooting							
Mobile Phone Troubleshooting							
CCTV Install, Troubleshoot, Repairs							
Computer Literate		tinua	phoet if access				
SIGNATURE	Malil	tinue on separate s	ыеес II necessary)	DA	ATE	March/22/2025	
	-					CS FORM 212 (Revised 2017), Page 3 of 4	

LUNTARY MORK OR INVOLVEMENT IN CIVIC / NON COVERNMENT / RECRUE / VOLUNTARY ORGANIZATIO

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 - Car	☐ YES ☑ NO ☐ YES ☑ NO If YES, give details:					
35.	a. Have you ever been found guilty of any administrative offe	☐ 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 an any court or tribunal?	☐ YES ☑ NO If YES, give details:					
	Have you ever been separated from the service in any of the dropped from the rolls, dismissal, termination, end of term, f in the public or private sector?	inished contract or phased out (abolition)	YES If YES, give details	s:			
38.	a. Have you ever been a candidate in a national or local election)?	ction held within the last year (except	☐ YES If YES, give detai	✓ NO ils:			
	b. Have you resigned from the government service during the election to promote/actively campaign for a national or local	☐ YES ☑ NO If YES, give details:					
39.	Have you acquired the status of an immigrant or permanent	☐ YES ☑ NO If YES, give details (country):					
a. b.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag and (c) Solo Parents Welfare Act of 2000 (RA 8972), please Are you a member of any indigenous group? Are you a person with disability? Are you a solo parent?	yes ✓ NO If Yes, please specify: ☐ Yes ✓ NO If Yes, please specify ID No: ☐ Yes ✓ NO If Yes, please specify ID No:					
41.	REFERENCES (Person not related by consanguinity or affinity to applican	t /appointee)					
	NAME	ADDRESS	TEL. NO.				
	JAKE MARVIN VILLEGAS	BAYBAY LEYTE	9651333005				
	ROBERTO IBAÑEZ	BAYBAY LEYTE	9510220518	66			
	ALLAN BULAWAN	BAYBAY LEYTE	9555445073				
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. agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me.							
	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) LEASE INDICATE ID Number and Date of Issuance	Malila					
-	overnment Issued ID: Driver's License						
Н	/License/Passport No.: H12-16-001479	ox)					
Da	ate/Place of Issuance: 10/22/2019		Right Thumbmark				
	SUBSCRIBED AND SWORN to before me this Ma	arch/22/2025 , affiant exhibiting	g his/her validly issued go	overnment ID as indicated above.			
		h					