CS Form No. 212 Revised 2017	PERS	ONAL DA	TA :	SHEE	T				
person concerned. READ THE ATTACHED GUIDE	ation made in the Personal Data Si	L BATA SHEET (BBS) BEF	GBE AGGGME	BLIBHING THE	BBS EBBM.		ninal case/s aga	31	
Film legicay, ikk appropriate boke 	es 🗍) and use separate sheet if neces	Bary, Indicale IVA II not approx	MS, DO NO!	ABBREVIALE.	n call and	Same	(Tat tak im th' . re	GRO FEE WAY	
2. SURNAME	Gonzaga	ATTENDED TO STATE OF THE STATE			127 / 20	7 36			
FIRST NAME						NAME EXTENSI	ON (JR., SR)		
MIDDLE NAME	Cheryl Mae								
3. DATE OF BIRTH	Not applicable								
(mm/dd/yyyy)	05/02/1997	16. CITIZENSHIP		∏ Filipino	nship by naturaliz	by naturalization			
4. PLACE OF BIRTH	Toledo City Cebu	If holder of dual citizenship,		-		Pls. indic	ate country:		
5. SEX	Male Female	please indicate the details.					- 1		
6 CTVIL STATUS	☐ Single ☐ Married ☐ Widowed ☐ Separated ☐ Other/s:	17. RESIDENTIAL ADDRESS		House/Block/Lot No. Street Patag Subdivision/Village Barengay					
7. HEIGHT (m)	5.3						Province		
8. WEIGHT (kg)	45	ZIP CODE		Baybay city Leyte City/Municipality Province					
9. BLOOD TYPE	0+	18. PERMANENT ADDRESS		Marina Blanch I of Ala Stront Jures 1 1000 and 1					
10. GSIS ID NO.	NONE			Subdivision/Village	9	******************	Patag Barangay		
11. PAG-IBIG ID NO.	NONE			Baybay Clty Leyte					
12. PHILHEALTH NO.	13-025519127-7	ZIP CODE	6521	City/Municipality			Province		
13, SSS NO,	NONE	19, TELEPHONE NO,							
14. TIN NO.	NIA	20. MOBILE NO.	09126	09126006567			1		
15. AGENCY EMPLOYEE NO.	NONE	21. E-MAIL ADDRESS (if any)	cherylmaegonzaga8@gmail.com						
IL FAMILY BANKAROUN	8)								
22. SPOUSE'S SURNAME	NONE		23, NAME of C	23. NAME of CHILDREN (Write full name and list all)		all)	DATE OF BIRTH (mm/dd/yyyy		
FIRST NAME		NAME EXTENSION (JR., SR)	Deciely	nn Audriey Gonzaga Balaresia			Dec.8 2	2018	
MIDDLE NAME						4			
OCCUPATION									
EMPLOYER/BUSINESS NAME						1			
BUSINESS ADDRESS					,		 		
TELEPHONE NO:									
24: FATHER'S SURNAME	Peniente						-		
FIRST NAME	Alvin	NAME EXTENSION (JR., SR)						0.7 8	
MIDDLE NAME	Elahas						-		
25, MOTHER'S MAIDEN NAME	Maria Teresa Gonzaga					7			
SURNAME	Gonzaga		 				-		
FIRST NAME	Maria Teresa	-					-		
MIDBLE NAME	Jurisna			(Continue on separate sheet if necessary)				-51	
III TEDUGATIONAL EAGK				COIL	nue on separat	e sneet it nece	ssary)	10 A	
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGRE (Write in full)	E/COURSE	PERIOD OF AT	TTENDANCE To	LEVEL/ UNITS EARNED	YEAR GRADUATED	SCHOLARSHI ACADEMIC HONORS RECEIVED	
ELEMENTARY	Patag Elementary School	PRIMARY EDUCATION		2004	2010	(if not	2010	REGISTES	
SECONDARY	Baybay National Highschool			2010	2014		2014	- Marata	
VOCATIONAL / TRADE COURSE	TESDA	THOMESTICSE							
COLLEGE	Visayas State University	BATCHELOR OF SECONDARY MAJOR IN MAPEH	EDUCATION	2014	2018		2018	varsity	
GRADUATE STUDIES		i E gë				1		145 .9901	
	T	(Continue on separate sheet	if necessary)						
SIGNATURE	Stories.		rés - I	DAT	ΓE	AUGUS	ST 22,2022	2	



	V/GE ELC	80 (BOARD/ BAR) UNDER S/ CES/ CSEE	DATING	DATE OF				LICENSE (if a	pplicable)
BARANG	SPECIAL LAWS	S/ CES/ CSEE Y / DRIVER'S LICENSE	RATING (If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT		NUMBER	Date of Validity	
PROFESSIO	NAL REGU ROFESSION	LATION COMMISION IAL TEACHER	76.20%	March 2022	Tacloban Cit	Tacloban City		1914783	05/02/202
				1					
									1
Work∈≥x	(PERIENGE			nue on separate sheet if r	The second secon	Angel Con Street			
lude privat	e emplovme	ent. Start from your rec	en Ward Descr	iption of duties show	d be indicated in the a	lachet (SALARY/ JOB/	nce sheet	GOV
INCLUSIVE DATES (mm/dd/yyyy)		POSITION TITLE (Write in full/Do not abbreviate)			DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)		PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	SERVICE (Y/ N)
From	То	NA			a daga garan karan da sahi kemenda di sahira d	g fjjurnisker-			
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			//-	ontinue on separate sheet	if necessary)		PATO MEN		
8/0	NATURE		SADATTSA	William Wil Store de Silve	DATE		AUGU	ST 22, 202	2

VI. VOLUNTARY WORK OR INVOLVEMENT	IN CIVIC //NO	N-GOVERNI	MENT/PEOP	E / VOLUNTA	RY ORGANIZATION/S	
29. NAME & ADDRESS OF ORGANIZATION	INCLUSIVE DATES			POSITION / NATURE OF WORK		
(Write in full)	(mm/dd/yyyy) From To		NUMBER OF HOURS			
NA	T TOIN	10				
						
					7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
						
	(Contin	nue on separate si	ent if necessary)			
VII. LEARNING AND DEVELOPMENT (LAD)	liniaryalni	elik Gadelalik II.	ie Waleiel. [4]	l-VandNejde		
blant from the most recent Lebytraining program and history	(a fili Albando, an	en (elementaria).	nicky the last has	d years fol Division	s Chiadi Ceandar Albai giardi pasillere).	
30. TITLE OF LEARNING AND DEVELOPMENT	ATTENDANCE			Type of LD (Managerial/	CONDUCTED/ SPONSORED BY	
INTERVENTIONS/TRAINING PROGRAMS (Write in full)	/mm/de From		NUMBER OF HOURS	Supervisory/ Technical/etc)	(Write in full)	
TRAINOR DURING THE SKILL TRAINING ON CROCHETING WOMEN ASSOCIATION OF	03/10/2022		72	TRAINOR	HON. MANUEL VINCENTE M. TORRES	
MUNICIPALITY OF KANANGGA CITY LEYTE	03/10/2022	03/13/2022		11021011		
					CARMELINO P. BERNADAS, Ph.D.,CESO V	
FACILITATOR IN COMPUTER LETERATURE ALS	AUGUST 1 2022	AUGUST 3 2022	72 HOURS	FACILITATOR	Schools Division Superintendent	
TRAINED FIRST AID AND BASIC LIFE SUPPORT	JULY 28 2022	1	8 HOURS	PARTICIPANT	RENMIR JAN D. MAALA , RN,DHCM S	
	2		_			
				*** V	Marie Committee	
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M						
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1 29						
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	(Continu	ie on separate she	et if necessary)	NAC CONTRACTOR		
VIII. OTHER INFORMATION					MEMBERSHIP IN	
31. SPECIAL SKILLS and HOBBIES	HANDY CRAFT	33. ASSOCIATION/ORGANIZATION (Write in full)				
ACTIVE IN ANY SPORTS ACTIVITIES	OTOP HUB BAYBAY CITY LETE					
AS SPORT FACILITATOR / ORGANIZER		PHILLIPINE TAEKWONDO ASSOCIATION				
LEABERSHIP AND MANAGEMENT SKILL						
COMPUTER LITERATE						
CROCHETING HANDYCRAFT						
DRIVING						
FIRST AIDER						
	(Bentiny)	e on separate she		F.F.	AUGUST 33 gags	
SIGNATURE	Spatz		DATE		AUGUST ## "#0## US FORM #12 (Hevised #017), Page 4 el #	

04.	Are you related by consensulate						
	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?	or recommending authority, or to e supervision over you in the					
	a. within the third degree?	☐ YES [☑ NO				
Žª,	b. within the fourth dozen (f.	". <u>-</u>		V NO			
la.	b. within the fourth degree (for Local Government Unit - Car	If YES, give details					
		II TEST STORES					
35.	a. Have you ever been found guilty of any administrative off	YES	V NO				
	you over been found guilty of any administrative off	ense?	If YES, give details				
		1					
			57.10				
1/2	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	ny law, decree, ordinance or	YES	₩ NO			
	regulation by any court or tribunal?		If YES, give details:				
37.	Have you ever been separated from the service in any of the	following modes: resignation,	YES V NO				
	retirement, dropped from the rolls, dismissal, termination, er	d of term, finished contract or	If YES, give details:				
	phased out (abolition) in the public or private sector?	The second second	□ YES ☑ NO				
38.	a. Have you ever been a candidate in a national or local elec-	ction held within the last year	YES NO NO If YES, give details:				
1	(except Barangay election)?						
1	b. Have you resigned from the government service during th	e three (3)-month period before	☐ YES - ItZ NO If YES, give details:				
	the last election to promote/actively campaign for a national						
39.	Have you acquired the status of an immigrant or permanent	resident of another country?	YES V NO				
1			If YES, give details (country):				
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag	na Carta for Disabled Persons					
1	(RA 7277); and (c) Solo Parents Welfare Act of 2000 (RA 85	172), please answer the following	☐ YES ☐ NO				
a.	Are you a member of any indigenous group?		If YES, please specify:				
b.	Are you a person with disability?		YES (7) NO If YES, please specify ID No:				
1	Ale you a person with alexand						
c.	Are you a solo parent?		If YES, please specify ID No:				
41.	REFERENCES (Person not related by consanguinity or affinity to applicant	(appointee)					
-	NAME	ADDRESS	TEL. NO.				
-		PATAG BAYBAY CITY LEYTE	09171489485				
L	DONNA M, BALARESIA SCHOOL HEAD		09086276236				
	DARLYN B.MABALATAN SCHOOL HEAD	PATAG BAYBAY CITY LEYTE	00000550007				
\vdash	CHILLIAMU D CAHLADA	MARCOS BAYBAY	09606559327				
	United this	Personal Data Sheet which is a t	true, correct and				
42	I declare under oath that I have personally accomplished that complete statement pursuant to the provisions of pertinent	laws, rules and regulations of the	Republic of the				
	complete statement pursuant to the provisions of pertinent Philippines. I authorize the agency head/authorized reprinerein. I agree that any misrepresentation made in the	esentative to verify/validate the	shall cause the	CHERYL MAE GONZAGA			
	harrin I agree that any misrepresentation made in a						
1	filing of administrative/criminal case/s against me.						
	Sovernment Issued ID (.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)						
	PLEASE INDICATE ID Number and Date of Issuance	AUTHOR.	1				
	Government Issued ID: 6134-2532-6387-2805		Walter Rate				
	D/License/Passport No.: 1914783	he box)					
1 7	Date/Place of Issuance: TACLOBAN BAYBAY CITY LEYTE	AAIGUST O.L., Date Accomplishe		Right Thumbmark			
	1110 0 7 7	77.0					
SUBSCRIBED AND SWORN to before me this AUG 2 2 2022 affiant exhibiting his/her validly issued government ID as indicated above.							
	ATTY. DECYPOSE P. PAPA						
	OOK NO. III	E P. PAPA					
	OOK NO. III A	Oath					
i	Publid Attorney II Person Adminsterino Orth (Pursuan) to R.A. 9406)						