CS Form No. 212 Revised 2017	PERSO	NAL DATA	\ SH	IEE.	т		1000-9-5	
WARNING: Any misrepresenta	ation made in the Personal Data Sheet and the	Work Experience Sheet shall o	ause the fil	ing of admir	nistrative/cri	minal case/s agai	inst the perso	n concerned
	TO FILLING OUT THE PERSONAL DATA SHEE				1. CS ID No.		(Do not fill up	For CCC upo or
Print legibly. Tick appropriate boxe  I. PERSONAL INFORMATI	es ) and use separate sheet if necessary. Indicate	N/A if not applicable. DO NOT At	SBREVIATE.		1. CS ID No.		(Do not iiii up.	For CSC use of
2 SURNAME	MAZO							
FIRST NAME	ERLIE JEAN					N/A		
MIDDLE NAME	PEREZ							
3. DATE OF BIRTH	9/20/1996	16. CITIZENSHIP	No. of the second		-	,		
(mm/dd/yyyy)	9/20/1990	16. GHZENSHIP		<b>V</b> Filip	prompt pr		The naturali	zation
4. PLACE OF BIRTH	WESTERN LEYTE PROVINCIAL HOSPITAL	If holder of dual citizensi	izenship,					Zucion
5. SEX	Tale * Vemale	please indicate the deta	letails.					
	✓single   Itarried	17. RESIDENTIAL ADDRESS						
6 CIVIL STATUS	Vidowed Separated	-	Но	use/Block/Lot h	Vo.		cate country:  Street GACAT Barangay LEYTE Province  Street GACAT Barangay LEYTE Province  DATE OF BIRTH (mm/d	
	other/s:		Si	ubdivision/Ville	ре			
7. HEIGHT (m)	1.52			BAYBAY City/Municipality	,			
8. WEIGHT (kg)	46	ZIP CODE	#650 NO	Oityrmunicipany	Page 1	6521	Tioning	100
9. BLOOD TYPE	0	18. PERMANENT ADDRESS				- T.		
			Но	use/Block/Lot I	Vo.			
10. GSIS ID NO.	N/A		St	ubdivision/Villeg			Barangay	
11. PAG-IBIG ID NO.	12-119949279-3		(	BAYBA' City/Municipality		LEYTE		
12. PHILHEALTH NO.	12-025626476-0	ZIP CODE		6521				
13. SSS NO.	06-3878375-7	19. TELEPHONE NO.				N/A		
14. TIN NO.	334-336-602-000	20. MOBILE NO.			0	9425021987		
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)			ejperezma	azo@gmail.c	<u>om</u>	
II. FAMILY BACKGROUNI		l.						
22. SPOUSE'S SURNAME	N/A	N/A	5. NAME OF CH	ILDREN (WITE	e full name and li	st all)		
FIRST NAME	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	MAZO	N/A						
FIRST NAME	ERNESTO							
MIDDLE NAME	BALDEVIA							
25. MOTHER'S MAIDEN NAME		*						
SURNAME	PEREZ			are personal and				
FIRST NAME	ERLINDA							
MIDDLE NAME	DAMPIOS	de la		- (	Continue on se	parate sheet if neces	sary)	
III. EDUCATIONAL BACK	GROUND							00101100
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/ (Write in full)	COURSE	UNITS E/		HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIF ACADEMIC HONORS RECEIVED
ELEMENTARY	GACAT ELEMENTARY SCHOOL	NIA		From 6/3/2002	To 3/25/2008	PRIMARY EDUCATION	2008	WITH

MIDDLE NAME	DAMPIOS		(Continue on separate sheet if necessary)				
II. EDUCATIONAL BAC	CKGROUND						
6. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF	ATTENDANCE	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSH ACADEMIC HONORS
			From	То	(a not graduated)		RECEIVED
ELEMENTARY	GACAT ELEMENTARY SCHOOL	NIA	6/3/2002	3/25/2008	PRIMARY EDUCATION	2008	WITH HONORS
SECONDARY	BAYBAY NATIONAL HIGH SCHOOL	NIA	6/2/2008	3/28/2012	HIGH SCHOOL	2012	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	SAINT PAUL SCHOOL OF PROFESSIONAL STUDIES	BS COMMERCE	6/4/2012	5/30/2016	GRADUATED	2016	DEAN'S LIST
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	No.	Continue on separate sheet if necessary)	Walter Str.				
SIGNATURE	Likes		D.	ATE	April 18, 2211	April 14, 2021	

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CARE	SPECIAL LAWS/	(BOARD/ BAR) UNDER CES/ CSEE	RATING (If Applicable)	DATE OF EXAMINATION /	PLACE OF EXAMINA	TION / CONFE	RMENT	LICENSE (if a	Date of
B/	ARANGAY ELIGIBILITY		(If Applicable)	CONFERMENT				NUMBER	Validity
CAF	REER SERVICE PR	OFESSIONAL	81.77	10/23/2016	LEYTE NORMAL UNIVE	RSITY, TAC	LOBAN CITY	325304	10/23/20
		x							
		T i							
		t'				. 42			
			•						
	EXPERIENCE			ntinue on separate shee					
	usive DATES	Start from your recent w	ork) Description	of duties should be	indicated in the attached	Work Experi	SALARY/ JOB/ PAY		
	nm/dd/yyyy)	POSITION TIT (Write in full/Do not al			GENCY / OFFICE / COMPANY  uWDo not abbreviate)	MONTHLY SALARY	GRADE (if applicable) & STEP (Format "00-0") INCREMENT	STATUS OF APPOINTMENT	GOVT SERVIC (Y/ N)
16/2016	11/28/2017	ACCOUNTING (	CLERK	MCD CREE	OIT CORPORATION	P12,410	N/A	PERMANENT	NO
/29/2017	9/18/2020	CASHIER		MCD CREE	DIT CORPORATION	P14,440	N/A	PERMANENT	NO
							1500 140	0,000,000,00	
						POLICE TO A STATE OF THE PARTY	Est a		
,									
				1					
				100.00					
		NY STATE OF THE ST		34					
168			1						
781.51									
1838		tor Town							
			(Cor	ntinue on separate shee	t if necessary)				
SIGN	ATURE	Gib	de		DATE		April 14, 202	1	

29 NAME & ADDRESS OF OR	GANIZATION	INCLU	SIVE DATES				
29. NAME & ADDRESS OF OF (Write in full)			n/dd/yyyy) To	NUMBER OF HOURS		POSITION / NATURE OF WORK	
A	Secretary Constitution	N/A	N/A	N/A	N/A	7.8	
					Nes Nes	1/80	
			-				
	, .					50-2	
	d .				A phas	also and a second	
I. LEARNING AND DEVELOPMENT (L&D)		THE RESERVE OF THE PERSON NAMED IN	to sheet if necessa TETENDED	ry)			
TEANING AND DEVELOPMENT (ESS)		ALIES ES ESTATION	VE DATES OF		Type of LD		
<ol> <li>TITLE OF LEARNING AND DEVELOPMENT INTE (Write in full)</li> </ol>			ENDANCE n/dd/yyyy)	NUMBER OF HOURS	( Managerial/ Supervisory/	CONDUCTED/ SPONSORED BY (Write in full)	
		From	То		Technical/etc)		
C (KNOW YOUR CUSTOMER)/AML (ANTI-MONEY L		6/16/2017	6/16/2017	1 hour	TECHNICAL	CARLO F. CRISTOBAL SAINT PAUL SCHOOL OF PROFESSIONAL	
DEVELOPING THE GLOBAL LEADE	R OF TOMORROW	3/11/2016	3/11/2016	8 hours	TECHNICAL	STUDIES	
ATTLING THE COMMON INTERFERENCES TO EFFE	ECTIVE AND EFFICIENT TEAMWORK	3/5/2016	3/5/2016	3 hours	TECHNICAL	STUDIES  SAINT PAUL SCHOOL OF PROFESSION, STUDIES  SAINT PAUL SCHOOL OF PROFESSION, STUDIES	
WINNING CYCLE OF A BRAND AND D	NIGITAL MARKETING	1/22/2016	1/22/2016	4 hours	TECHNICAL	(Write in full)  CARLO F. CRISTOBAL  SAINT PAUL SCHOOL OF PROFESSION/ STUDIES  SAINT PAUL SCHOOL OF PROFESSION/ STUDIES  SAINT PAUL SCHOOL OF PROFESSION/ STUDIES	
CIA EXAMINATION FO	RUM	1/16/2016	1/16/2016	3 hours	TECHNICAL	PROF. ALBERT B. BALEA-AN, CIA, CPA	
						1.74	
		Easte the					
					18 P		
						1327	
AUGULTANA III			1230	92	12/19/19/5		
Million County No.				1 10			
Comments of the contractions.	THE RESERVE OF			Silver 16			
	(Con	tinue on separat	le sheet if necessa	(ער			
III. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES	32. NON		TINCTIONS / RECO	GNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATI (Write in full)	
FLUENT IN WARAY-WARAY		N	/A			N/A	
KEEN TO DETAILS AND ACCURACY OF				eprin las			
WORK RESPONSIBILITIES COMPUTER LITERATE (WORD, EXCEL, PPT)						G. C.	
NOWLEDGEABLE IN BASIC ACCOUNTING,							
FINANCE, AND MANAGEMENT CAN TYPE UP TO 51 WORDS PER MINUTE	posturence	- Mikhasa coma					
WORKS WELL IN A GROUP OR							
MPROPHALLY							
INDIVIDUALLY READING BOOKS WITH LIFE LESSONS							
	(Con	finue on separat	le sheet if necessa	ry)			

34.	Are you related by consanguinity or affinity to the appointin chief of bureau or office or to the person who has immedia Bureau or Department where you will be apppointed, a. within the third degree?  b. within the fourth degree (for Local Government Unit - Ca	te supervision over you in the Office,	YES NO YES NO If YES, give details:	
35.	a. Have you ever been found guilty of any administrative of	ffense?	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 a by any court or tribunal?	☐YES ☑NO If YES, give details:	ŭ.	
37.	Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, exout (abolition) in the public or private sector?		YES NO If YES, give details: Resignation, due to skeletal workforce system	n
38.	a. Have you ever been a candidate in a national or local elementary election)?      b. Have you resigned from the government service during the election to promote/actively campaign for a national or local.	YES If YES, give details:  YES If YES, give details:	central contral contra	
39.	Have you acquired the status of an immigrant or permanen	it resident of another country?	YES NO If YES, give details (country):	
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972)			
a.	Are you a member of any indigenous group?	If YES, please specify:		
b. c.	Are you a person with disability?  Are you a solo parent?	If YES, please specify ID No:  YES  YES  NO  If YES, please specify ID No:	S.	
41.	REFERENCES (Person not related by consanguinity or affinity to applicant	/appointee)		
	NAME	ADDRESS	TEL. NO.	
	INGRID DE LIMA	DAVAO CITY	9423758261	
	RUZIL MAGPAYO	MANDAUE CITY, CEBU	9222970165	
	SHEENA CASANDRA BATON	MAMBALING CEBU CITY, CEBU	9616328006	
42.	I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertin. Philippines. I authorize the agency head/authorized reprint agree that any misrepresentation made in this doc administrative/criminal case/s against me.	ent laws, rules and regulations of the esentative to verify/validate the content	Republic of the s stated herein.	0
PI	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)  LEASE INDICATE ID Number and Date of Issuance	Lite or	(Cignatur   ser Printed Name	
F	vernment Issued ID: N/A //License/Passport No.: N/A	700	of £m; to salApplicant)	
H	ate/Place of Issuance: N/A	Signature (Sign inside the b		
L		Date Accomplished	Right Thumbmark	

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

## **WORK EXPERIENCE SHEET**

Instructions: 1. Include only the work experiences relevant to the position being applied to.

 The duration should include start and finish dates, if known, month in abbreviated form, if known, and year in full. For the current position, use the word Present, e.g., 1998-Present. Work experience should be listed from most recent first.

## Applying to Administrative Aide VI (Clerk)

- Duration: November 29, 2017- September 18, 2020
- · Position: Cashier
- · Name of Office/Unit: Accounting Department
- · Immediate Supervisor: Arlyn R. Dampios
- · Name of Agency/Organization and Location: MCD Credit Corporation, Cebu City, Cebu
  - · List of Accomplishments and Contributions (if any)
  - Summary of Actual Duties
    - Responsible for the management of company's funds, and other financial records.
       Monitoring returned and signed vouchers for every loan renewals, receiving of collections from collectors, supervisors, credit investigators and management.

       Preparation of daily cash positions to be audited by the manager or the accounting officer as per mandate. Vouchering company disbursements.
- Duration: September 16, 2016- November 28, 2017
- Position: Accounting Clerk
- Name of Office/Unit: Accounting Department
- Immediate Supervisor: Arlyn R. Dampios
- Name of Agency/Organization and Location: MCD Credit Corporation, Cebu City, Cebu
  - List of Accomplishments and Contributions (if any)
  - Summary of Actual Duties
    - Responsible in monthly payroll, monthly remittance (SSS, Pag-ibig, Philhealth, BIR), checking of daily collection receipts (actual list vs. computer input), handled petty cash fund, preparation of reports e.g. employee's statement of account, and other documents as requested by the management and controller of employees' records.

(Signature over Printed Name of Employee/Applicant)

Date: 04/14/2021