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 Print legibly. Tick appropriate boxes						1. CS ID No.		(Do not fill	up. For CSC use only	
I. PERSONAL INFORMATIO		ii necessary. indicate	N/A il Hot applicable. Bo No I	ADDICEVIA	<u>L.</u>	1. 00 ID No.		(DO HOT IIII	up. 1 of COC use only	
2. SURNAME	САВО									
FIRST NAME	SHENA RAMYR				NAME EXTENSION (JR., SR) N/A					
MIDDLE NAME	SIMBAJON									
3. DATE OF BIRTH (mm/dd/yyyy)	11/07/1998		16. CITIZENSHIP	✓ Filipino ☐ Dual Citizenship☐ by birth				□ by nativalia	ation	
4. PLACE OF BIRTH	MANDAUE CITY, CEBU		If holder of dual citizenship,				□ by birth □ by naturalization Pls. indicate country:			
5. SEX	☐ Male	✓ Female	please indicate the details.				•			
6 CIVIL STATUS	✓ Single	Married	17. RESIDENTIAL ADDRESS PUROK MADASIGON House/Block/Lot No.			Street				
	☐ Widowed ☐ Other/s:	☐ Separated					BARA	NGAY MANI	NGCOL	
7. HEIGHT (m)	1.52				OZAMIZ CI	TY	MIS	Barangay AMIS OCCID	ENTAL	
8. WEIGHT (kg)	43.50		ZIP CODE	7200	City/Municipal	ity		Province		
9. BLOOD TYPE	B+		18. PERMANENT ADDRESS		ROK PARPA					
10. GSIS ID NO.	2006126227			-	House/Block/Lot	No.	Street NGAY EASTERN LOOC			
					Subdivision/Villa PLARIDEI		MIS	Barangay AMIS OCCID	ENTAL	
11. PAG-IBIG ID NO.	121294948615			PLARIDEL MISAMIS OCCIDENTAL City/Municipality Province						
12. PHILHEALTH NO.	150256049866		ZIP CODE	7204						
13. SSS NO.	0830145960		19. TELEPHONE NO.	N/A						
14. TIN NO.	765-067-061	20. MOBILE NO.	09639221	39221678						
15. AGENCY EMPLOYEE NO.			21. E-MAIL ADDRESS (if any)	shenara	ımyr.cabo	@gmail.co	om			
II. FAMILY BACKGROUND										
22. SPOUSE'S SURNAME	N/A			23. NAME of	CHILDREN (Wr	ite full name and	list all)	DATE OF B	IRTH (mm/dd/yyyy)	
FIRST NAME	N/A		NAME EXTENSION (JR., SR) N/A	N/A				N/A		
MIDDLE NAME	N/A									
OCCUPATION	N/A									
EMPLOYER/BUSINESSNAME	N/A									
BUSINESS ADDRESS	N/A									
TELEPHONE NO.	N/A									
24. FATHER'S SURNAME	САВО									
FIRST NAME	RAMER		NAME EXTENSION (JR., SR) N/A							
MIDDLE NAME	MAURING									
25. MOTHER'S MAIDEN NAME										
SURNAME	SIMBAJON									
FIRST NAME	MARY FRANCIS									
MIDDLE NAME	DELUVIO					(Continue on	separate sheet if nec	essary)		
III. EDUCATIONAL BACKG	ROUND				T		ı	I		
26. LEVEL	NAME OF SC (Write in fi		BASIC EDUCATION/DEGREI (Write in full)	E/COURSE	PERIOD OF	ATTENDANCE To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED	
ELEMENTARY	OZAMIZ CITY SEVENTH		ELEMENTARY			03/25/2011	GRADUATED	2011	CLASS SALUTATORIAN	
SECONDARY	OZAMIZ CITY NATIONAL I SPECIAL SCIENCE CURRIC		HIGH SCHOOL		06/06/2011	03/31/2015	GRADUATED	2015	HONORABLE MENTION	
VOCATIONAL / TRADE COURSE	N/A		N/A		N/A	N/A	N/A	N/A	N/A	
COLLEGE	MINDANAO STATE UN INSTITUTE OF TECHNO		BACHELOR OF SCIENCE IN CHEMISTRY		05/05/2015	06/13/2019	GRADUATED	2019	DOST RA 10612/ CUM LAUDE	
GRADUATE STUDIES	N/A		N/A		N/A	N/A	N/A	N/A	N/A	
SIGNATURE	Stanfaryst		(Continue on separate sheet if n	ecessary)	DA	ATE		07/07/2023		

IV. CIVIL SERVICE ELIGIBILITY									
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE				DATE OF EXAMINATION /	PLACE OF EXAMINA	ATION / CONFE	LICENSE (if a		
UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE (If Applicable)			CONFERMENT	I DIOL OF EXAMINA			NUMBER	Date of Validity	
CHEMIST LICENSURE EXAMINATION 71.65			22/10/2019	CAGAYAN	DE ORO CIT	Υ	0014892	11/07/2022	
CHEMICAL TECHNICIAN LICENSURE 81.50			22/10/2019	CAGAYAN	DE ORO CIT	Υ	0004301	11/07/2022	
EXAMINATION									
				(Continue on separa	ate sheet if necessary)				
	XPERIENCE						M		
	SIVE DATES	nt. Start from Vo	ur recent work) De	escription of duties	should be indicated in th	e attached	SALARY/ JOB/ PAY	e sneet.	
28. INCLUSIVE DATES (mm/dd/yyyy) POSITION TITLE (Write in full/Do not abbre				ENCY / OFFICE / COMPANY II/Do not abbreviate)	MONTHLY SALARY	GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)	
08/22/2022	PRESENT	SPECIAL SCIENCE TEACH	ER 1 (SENIOR HIGH SCHOOL)		N/ DIVISION OF OZAMIZ CITY/ OZAMIZ L OF ARTS AND TRADES	29,798.00	13	PROVISIONAL	Y
					ONDENSED MATTER LABORATORY /				
03/08/2021	08/09/2022	SCIENCE RESEA	ARCH ASSISTANT	MINDANAO STATE UI	URE OF SCIENCE AND MATHEMATICS/ NIVERSITY - ILIGAN INSTITUTE OF ECHNOLOGY	23462.40	11	JOB ORDER	N
02/21/2022	06/30/2022	INSTRI	UCTOR 1		IT/ COLLEGE OF MATHEMATICS AND 6/ CARAGA STATE UNIVERSITY	31262.40	13	JOB ORDER	N
02/01/2020	01/31/2021	SCIENCE RESE	ARCH ANALYST	PREMIER RESEARCH INSTIT MINDANAO STATE UI	ONDENSED MATTER LABORATORY / URE OF SCIENCE AND MATHEMATICS/ NIVERSITY - ILIGAN INSTITUTE OF	20967.60	10	JOB ORDER	N
06/25/2018	08/01/2018	LABORATOR	RY ASSISTANT	LABORATORY SERVICES	ECHNOLOGY 5 DEPARTMENT/ Dole PHILIPPINES CORPORATED	4800.00	N/A	TRAINEE	N
					COM ONATED				
OVOLVATI/DE			(Continue on separa	ete sheet if necessarv)					
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1								55. Stun 212 (NOVISE	2011), i age 2 014

VI. VOLUNTARY WORK OR INVOLVENIEN	I IN CIVIC / NON-GOVERNINEN I .	/ PEUPLE / V	JLUNIARY OF	RGANIZATION	//3		
29. NAME & ADDRESS OF ORGANIZATION (Write in full)			INCLUSIVE DATES (mm/dd/yyyy) NUMBER OF HOUR:		POSITION / NATURE OF WORK		
MORAL RECOVERY PROGRAM (CITY OF ILIGAN), BUHANGIN HILLS, PALA-O, ILIGAN CITY			03/23/2018	48.0	YOUTH VOLUM	ITEER	
KID'S MINISTRY			01/08/2022	1000.0	TEACHER VOLU	JNTEER	
	(Con	tinue on separate	sheet if necessary)				
VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PR	ROGRAMS AT	TENDED				
(Start from the most recent L&D/training program and incl 30. TITLE OF LEARNING AND DEVELOPMENT IN (Write in f	TERVENTIONS/TRAINING PROGRAMS	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
XRD REFINEMENT CRYSTAL VISUALIZATION		From 11/24/2021	To 11/24/2021	2.0	TECHNICAL	MINDANAO STATE UNIVERSITY - ILIGAN	
INTERACTION OF HIGH INTENSITY LASER PU	LSE WITH MATERIALS:		11/24/2021	2.0	TECHNICAL	INSTITUTE OF TECHNOLOGY MINDANAO STATE UNIVERSITY - ILIGAN	
COMPUTATION AND APPLICATIONS THE EXCITABLE DYNAMICS IN THE DIRECTED	MIGRATION OF Physarum	10/06/2021	10/06/2021	1.0	TECHNICAL	INSTITUTE OF TECHNOLOGY MINDANAO STATE UNIVERSITY - ILIGAN	
polycephalum FOOD SAFETY IN THE FOOD SERVICE INDUST	· DV		08/27/2021	2.0	TECHNICAL	INSTITUTE OF TECHNOLOGY DEPARTMENT OF SCIENCE AND TECHNOLOGY -	
						INDUSTRIAL DEVELOPMENT INSTITUTE	
ASSESSING LEARNERS IN FLEXIBLE AND DIGI			08/27/2021	3.0	TECHNICAL	RIZAL TECHNOLOGICAL UNIVERSITY	
BUILDING COMMUNITY OF INVOLVEMENT F			08/26/2021	3.0	TECHNICAL	RIZAL TECHNOLOGICAL UNIVERSITY	
HUMANIZING FLEXIBLE AND DIGITAL LEARN DOST-CARAGA REGIONAL INVENTION CONT		08/25/2021		3.0	TECHNICAL	RIZAL TECHNOLOGICAL UNIVERSITY DEPARTMENT OF SCIENCE AND	
START UP 101 WEBINAR	EST AND EXISTS WEBINAIN	1 .	07/28/2021	2.0	TECHNICAL	TECHNOLOGY - CARAGA INTERNATIONAL CENTER FOR THEORETICAL	
LITTLE PARTICLES IN A BIG UNIVERSE		1	07/24/2021	2.0	TECHNICAL	PHYSICS - PHILIPPINES DEPARTMENT OF SCIENCE AND	
DESIGN THINKING AND INNOVATION		1	07/21/2021	1.0	TECHNICAL	TECHNOLOGY - CARAGA DEPARTMENT OF SCIENCE AND TECHNOLOGY -	
EMERGENCY REMOTE TEACHING EXPERIENCE INTRODUCTION TO SHELF LIFE TESTING: THE			07/21/2021		TECHNICAL	NATIONAL RESEARCH COUNCIL OF THE PHILIPPINES DEPARTMENT OF SCIENCE AND	
CALCULATIONS EXPLORING LABORATORY INSTRUMENTATION		07/13/2021		2.0	TECHNICAL	TECHNOLOGY - CARAGA	
RESEARCH	TON SOSTAINABILITY	07/09/2021	07/09/2021	3.0	TECHNICAL	DE LA SALLE UNIVERSITY DEPARTMENT OF SCIENCE AND	
STRATEGIC MARKETING FOR INNOVATIVE P	RODUCTS	07/07/2021	07/07/2021	2.0	TECHNICAL	TECHNOLOGY - CARAGA	
PRIOR ART SEARCH		06/09/2021	06/11/2021	16.0	TECHNICAL	DEPARTMENT OF SCIENCE AND TECHNOLOGY REGIONAL OFFICE X	
SAMPLE PREPARATION, INFLUENCING FACT MEASUREMENT	ORS + HOW TO SETUP AN STA	11/17/2020	11/17/2020	3.0	TECHNICAL	NETZSCH	
TRENDS AND APPROACHES IN ANALYTICAL	SCIENCES II	09/12/2020	09/12/2020	2.5	TECHNICAL	DE LA SALLE UNIVERSITY	
Teacher Induction Program/Orientation		10/21/2022	11/01/2022	32.0	MANAGERIAL	DEPARTMENT OF EDUCATION DIVISION OF OZAMIZ CITY	
VIII. OTHER INFORMATION	(Con	tinue on separate	sheet if necessary)	_	_		
			NCTIONS / RECOGN	NITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
SONG WRITING	ILIGAN POP SONGWRITING COMPETITION 2020 FINALIST - TOP 7					N/A	
PLAYING GUITAR AND SINGING	ILIGAN POP SONGWRITING COMPETITION 2021 FINALIST - TOP 4						
CAN OPERATE UV-VIS SPECTROPHOTOMETER HIMIG HANDOG 2019 TOP 500							
CAN OPERATE DTA-TG INSTRUMENT							
KNOWLEADGEABLE IN FT-IR, RHEOMETER AND HPLC INSTRUMENTS							
AND HPLC INSTRUMENTS KNOWLEADGEABLE IN MAUD SOFTWARE							
(Con			sheet if necessary)				
SIGNATURE	SIGNATURE Stuffings				ATE	07/07/2023	
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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 appointed,						
	a. within the third degree?b. within the fourth degree (for Local Government Unit - Car		☑ NO ☑ NO s:				
35.	a. Have you ever been found guilty of any administrative of	fense?	☐ YES E	☑ NO s:			
	b. Have you been criminally charged before any court?	☐ YES If YES, give detail: Date Filed: Status of Case/s:	NO S:				
36.	Have you ever been convicted of any crime or violation of a by any court or tribunal?	ny law, decree, ordinance or regulation	☐ YES ☑ NO If YES, give details:				
	Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, e out (abolition) in the public or private sector?	nd of term, finished contract or phased	✓ YES ☐ NO If YES, give details: FINISHED CONTRACT				
38.	a. Have you ever been a candidate in a national or local ele Barangay election)?b. Have you resigned from the government service during the		☐ YES ☑ NO If YES, give details:				
	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.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972) Are you a member of any indigenous group? Are you a person with disability? Are you a solo parent?	☐ YES If YES, please specify ☐ YES If YES, please specify ☐ YES If YES. please specify	✓ NO y ID No: ✓ NO				
41.	REFERENCES (Person not related by consanguinity or affinity to applicar	nt /appointee)					
	NAME	ADDRESS	TEL. NO.				
ROL	ANDO T. CANDIDATO JR., Ph.D	DEL CARMEN, ILIGAN CITY	09530423928				
RO	MNICK B. UNABIA, Ph.D	AMPAYON, BUTUAN CITY	09361777022				
OLIV	VERT M. SITOY, MSc	TIBANGA, ILIGAN CITY	09667322585				
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 repr I 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.	SHENA RAMYR S. CABO PHOTO			
PI	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) LEASE INDICATE ID Number and Date of Issuance overnment Issued ID: PASSPORT						
ID	/License/Passport No.: P4456903B	oox)					
Da	ate/Place of Issuance: JANUARY 29,2020 / CLARIN, MISAMIS OCCIDENTAL		Right Thumbmark				
	government ID as indicated above.						
		th					