CS Form No. 212 Revised 2017	PERSO	NAL DAT	'A SI	HEE	т.			
WARNING: Any microprocent								
	ation made in the Personal Data Sheet and th					e/criminal case/s	against the p	erson
First legibly. Lick appropriate boxe	es ( ) buse separate sheet if necessary. Indicate	N/A if not applicable. DO NOT	MPLISHING ABBREVIATE	THE PDS F	1 CS ID N	6	(Do not fill up	For CSC use of
I. PERSONAL INFORMATI								
2 SURNAME	JUMAMOY							
FIRST NAME	JONATHAN					NAME EXTENSION	JR , SR)	
MIDDLE NAME	VANZUELA							
3 DATE OF BIRTH (mm/dd/yyyy)	OCTOBER 2,1983	16. CITIZENSHIP		✓ Filipino Dual Citizenship ✓ by birth by natural			alization	
4 PLACE OF BIRTH	MAHAPLAG, LEYTE	If holder of dual citiz	Pls. indicate co		country:	country:		
5. SEX	✓ Male Female	please indicate the	details.	Philipp	ines			
6 CIVIL STATUS	Single	17 RESIDENTIAL ADDRESS		ouse/Block/Lo			Street MALINAO	
7 HEIGHT (m)	164M	1		Subdivision/Vii MAHAPLA			Barangay LEYTE	
8. WEIGHT (kg)	60KG	ZIP CODE		City/Municipa	lity	0540	Province	
9 BLOOD TYPE	0	18. PERMANENT ADDRESS				6512		
		- The state of the	Ho	ouse/Block/Lo	t No.		Street	
10. GSIS ID NO.	N/A		S	ubdivision/Vil	lage		MALINAO Barangay	
11. PAG-IBIG ID NO.	1211-5702-8555		-	MAHAPLAC City/Municipa			LEYTE Province	
12 PHILHEALTH NO.	13-200877586-2	ZIP CODE			6512			
3 SSS NO.	06-2236455-1	19. TELEPHONE NO.			N/A			
4. TIN NO.	258-591-471	20. MOBILE NO.				09632656224		
5. AGENCY EMPLOYEE NO.	N/A	21 E-MAIL ADDRESS (if any)	jumamoyjonathan01@gmail.co			ail com	LT Schools	
. FAMILY BACKGROUND				Juni 1	anno you	atriario raggir	idii.com	Contraction of the Contraction o
2 SPOUSE'S SURNAME	REMOLLENO		23. NAME of C	HILDREN (V	Vrite full name a	nd list all)	DATE OF BIE	RTH (mm/dd/yy)
FIRST NAME	MICHELLE	NAME EXTENSION (JR , SR)			1/1/2009			
MIDDLE NAME	EMPRON		PRINCESS JONAMAE R. JUMAMOY 9/		9/1/2013			
OCCUPATION	HOUSEWIFE	HOUSEWIFE		AJASHA MAE R. JUMAMOY			6/16/2017	
EMPLOYER/BUSINESS NAME	N/A						110000	all and the
BUSINESS ADDRESS	N/A						1000	
TELEPHONE NO.	N/A						4000	
4 FATHER'S SURNAME	JUMAMOY						000	ed and a
FIRST NAME	DOMINADOR	NAME EXTENSION (JR., SR)					3002	WHEN I
MIDDLE NAME	ORCULLO	•					10.00	
5. MOTHER'S MAIDEN NAME							7712	Tree la
SURNAME	VANZUELA						12 314	
FIRST NAME	EDITHA						11110	
MIDDLE NAME	PANAL		-Amoto	(	Continue on s	eparate sheet if nece	essary)	18000
I. EDUCATIONAL BACKG	ROUND							
LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)		PERIOD O	F ATTENDANCE To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP ACADEMIC HONORS RECEIVED
ELEMENTARY	MALINAO ELEMENTARY SCHOOL	ELEMENTARY GRADUATE		1991	1996	GRADUATED	1996	N/A
SECONDARY	MAHAPLAG NATIONAL HIGH SCHOOL	SECONDARY GRADUATE		1997	2000	GRADUATED	2000	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	- 12	N/A	N/A	N/A	N/A	N/A
COLLEGE	LEYTE COLLEGES TACLOBAN CITY	BACHELOR OF SCIENCE IN CRIMINOLOGY		2000	2006	GRADUATED	2006	N/A
GRADUATE STUDIES	N/A	N/A	. 123	N/A	N/A	N/A	N/A	N/A
SIGNATURE	an grown to	ontinue on separate sheet Il nece	ssary)	D	ATE	2/21/2	2023	

	SPECIAL LAW	080 (BOARD/BAR) UNDER VSV CES/ CSEE	RATING	DATE OF EXAMINATION /	PLACE OF EXAMINA	TION / CONFE	RMENT	LICENSE (if ap	plicable) Date of
	BARANGAY ELIGIBILIT	TY / DRIVER'S LICENSE	(If Applicable)	CONFERMENT				NUMBER	Validity
	N/A		N/A	N/A	N/A			N/A	N/A
			(Co	ntinue on separate sheet	if necessary)				
. WORK	EXPERIENCE		(0.0	number on separate sines	The county)				10 mg
nclude pr	CLUSIVE DATES	Start from your recent	work) Description	of duties should be	Indicated in the attached	Work Expe	SALARY/JOB/PAY	HOP IN THE	
	(mm/dd/yyyy)	POSITION TO (Write in full/Do not			NCY / OFFICE / COMPANY /Do not abbreviate)	MONTHLY SALARY	GPADE (if applicable)& STEP (Format '00-0')/	STATUS OF APPOINTMENT	SERVICE
From	То			,			NUCREMENT		(Y/N)
019	PRESENT	VSU SECURITY			ATE UNIVERSITY	12000.00	N/A	J.O CONTRACTUA	Y
1/2018	11/15/2019	PNB SECURITY		PHILMUSA	A AGENCY INC.	7000.00	N/A	L	N
1/2016	1/30/2017	LANDBANK SECUI	ACC. 154.00.000	COMMAND	ER AGENCY INC	8000.00	N/A	CONTRACTUA	N
1/2015	12/30/2015	ARMORED ESCO	RD GUARD	MANDARI	N AGENCY INC.	6000.00	N/A	CONTRACTUA L	N
/1/2010	12/30/2014	GSO STAFF/	CLERK	LGU MAHAPLAG, LEYTE		5000.00	N/A	J.0	Y
1/2009	6/30/2010	ADMINISTRATI	VE AIDE	PROVINCIAL GOVERNORS OFFICE		6000.00	N/A	J.0	Y
1/2008	12/30/2008	LINE CARETAKER	ASSISTANT	TRANS CO		3000.00	N/A	CONTRACTUA	N
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							1700		
						238		-	631
				- 2-0					ZIA
				14 -16 15			287	11000	Zies
		1 10		17/2/29			No.	2022150	16035
_		~ ^	/ (Cor	tiriue on separate sheet l	necessary)	2 21			

NAME & ADDRESS OF ORGANIZATION	INCLUS	SIVE DATES	1				
(Write in full)	(mm/dd/yyyy) From To		NAMER OF HOURS	POSITION / NATURE OF WORK			
YAP MAHAPLAG, LEYTE	9/1/2006	9/3/2006	18 HRS	OFFICER			
FC MAHAPLAG, LEYTE	4/10/1997	4/12/1997	18 HRS	MEMBER/ FACILITATOR			
FFI MAHAPLAG, LEYTE	7/27/2013	7/27/2013	8 HRS 8 HRS	MEMBER MEMBER			
UBAS BAYBAY CITY	12/31/2013						
ABALIKAT ASSISTANCE AT THE CEMETERY OF MAHAPLAG, LEYTE	11/1/2021	11/2/2021	16 HRS	MEMBER			
(ARANCHO RELIEF GOOD OPERATION AT LIMASAWA ISLAND	12/26/2021	12/26/2021	8 HRS	OFFICER			
(co VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PI Start from the most recent L&D training program and include only the relevant L&D training below for t	ntinue on separate ROGRAMS A1 the last five (3) year	TTENDED		rial positions)			
30 TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (With in full)		E DATES OF NDANCE (kd/yyyy)	NUMBER OF HOURS	Type of LD ( Managenal/ Supervisory/ Technical/etc)	CONDUCTED/SPONSORED BY (Write in full)		
PYAP LEADERSHIP TRAINING	9/1/2006	9/3/2006	18 HRS	TEHNICAL	DSWD MAHAPLAG, LEYTE		
SEMINAR/ LECTURE R.A. 4136	10/9/2007	10/9/2007	8 HRS	TEHNICAL	LTO BAYBAY CITY		
DRRM TRAINING /SEMINAR	7/30/2013	8/1/2013	18 HRS	TEHNICAL	MDRRM & LGU MAHAPLAG		
WELDING NC-I	1/26/2015	3/2/2015	268 HRS	TEHNICAL	TESDA TACLOBAN		
FIRE TRUCK OPERATOR SEMINAR	12/6/2019	12/6/2019	8 HRS	TEHNICAL	SSO AND BFP BAYBAY		
CYBER SECURITY TRAINING	12/18/2019	12/19/2019	16 HRS	TEHNICAL	VSU MIS TEAM		
BASIC LIFE SUPORT TRAINING/SEMINAR	3/7/2022	3/9/2022	24 HRS	TEHNICAL	VSU HOSPITAL-DOH R08		
STANDARD FIRT AID TRAINING/SEMINAR	3/10/2022	3/11/2022	16 HRS	TEHNICAL	VSU HOSPITAL-DOH ROB		
					- 2000 00000000000000000000000000000000		
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					1111 T 6010 (D)		
			F W (1-				
	tinue on separate :	sheet if necessary		/			
VIII. OTHER INFORMATION	-ACADEMIC DISTIN	VCTIONS / RECOG	NITION		MEMBERSHIP IN ASSOCIATION/ORGANIZATIO		
31. SPECIAL SKILLS BRO HOBBIES 32.		e in full)		7.53836	33. (Write in full)		
COMPUTER SKILLS	1	42		1,000	PYAP		
COMMUNICATION SKILLS							
WELDING		CFFI					
DRIVING	and the second s				KABALIKAT MAHAPLAG, LEYTE		
					KARANCHO BAYBAY CITY. LEYTE		
	10.00	14.24	2004				
Con	finue on separate s	neet if necessary)	SECTION AND PROPERTY.		THE RESERVE OF THE PARTY OF THE		

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34. Are you related by consanguinity or affinity to the appointing		1				
chief of bureau or office or to the person who has immedia	ate supervision over you in the Office,					
Bureau or Department where you will be apppointed,						
a. within the third degree?	☐ YES ☑	NO				
b. within the fourth degree (for Local Government Unit - Co	☐ YES ☑					
- Unit - O		NU				
		If YES, give details:				
35. a. Have you ever been found guilty of any administrative of	YES NO					
		If YES, give details:				
b. Have you been criminally charged before any court?	YES 2	NO				
	If YES, give details:					
		Date Filed:				
		Status of Case/s:				
36. Have you ever been convicted of any crime or violation of	36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by					
any court or tribunal?		TYES INO If YES, give details:				
		II 1E3, give details.				
37. Have you ever been separated from the service in any of the		☐ YES ☑	NO			
dropped from the rolls, dismissal, termination, end of term,	finished contract or phased out (abolition)	If YES, give details:	0.005			
in the public or private sector?						
38. a. Have you ever been a candidate in a national or local ele	ection held within the last year (except	☐ YES ☐	NO NO			
Barangay election)?		If YES, give details:	7 110			
F. Harris and J. Lindson		1 - 10 - 10 - 10	_			
b. Have you resigned from the government service during to		YES INO				
election to promote/actively campaign for a national or local	If YES, give details:					
39. Have you acquired the status of an immigrant or permanen	☐ YES ☑ NO					
		If YES, give details (country):				
		120, g.10 dotano (000				
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma	agna Carta for Disabled Persons (DA 7277)					
and (c) Solo Parents Welfare Act of 2000 (RA 8972), pleas	se answer the following items:					
Are you a member of any indigenous group?	and the same of th		_			
in a jet a member of any mengenede group.		If YES, please specify:	NO			
b. Are you a person with disability?			T us			
, no you a poroon muraisability:		YES If YES, please specify ID N	NO NO			
c. Are you a solo parent?						
, no year a colo paronti		If YES, please specify ID No	NO NO			
		II 1 LO, please specify ID IV	0,			
41. REFERENCES (Person not related by consanguinity or affinity to applica	ant /appointee)					
NAME	ADDRESS	TEL, NO.				
BB BANKELLERA BANK						
DR. DANIEL LESLIE S. TAN	VSU CAMPUS	932685396				
RONALDO T. LLEVE	MAHADI AC LEVTE	9265213177				
	MAHAPLAG, LEYTE	0200210177	-			
DR. DILBERTO O. FERRAREN	VSU CAMPUS	9266111455				
42. I declare under oath that I have personally accomplished	ed this Personal Data Sheet which is a tr	ue correct and				
complete statement pursuant to the provisions of perti	nent laws, rules and regulations of the	Republic of the				
Philippines. I authorize the agency head/authorized repres	entative to verify/validate the contents state	d herein.				
agree that any misrepresentation made in this doc	sument and its attachments shall cause	the filing of	PHOTO			
administrative/criminal case/s against me.		200				
	710 100 300 300 300 300		THE RESIDENCE OF THE PARTY OF T			
Government Issued ID (i.e Passport, GSIS, SSS, PRC, Driver's License, etc.)	~ ~	,	A CONTRACTOR OF THE PARTY OF TH			
PLEASE INDICATE ID Number and Date of Issuance	(my		A STATE OF THE STA			
Government Issued ID: DRIVER'S LICENSE	000	)				
ID/License/Passport No.: H12-20-000858	ix)	AND THE PERSON NAMED IN				
Date/Place of Issuance: 01/29/2020	····)	THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NA				
WHICH HAVE UT TOUGHTUP. UTLESTEVED	Only of the second second	Right Thumbmark				
SUBSCRIBED AND SWORN to before me this	_#	ing higher well door	amont ID as indicated at			
SODSCRIDED WAS SAACKA TO DRIGHT LIFE THIS	, amant exhibi	ing his/her validly issued gover	nment ID as indicated above.			
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