CS Form No. 212										
nevised 2017		NAL DAT				/criminal case/s	against the p	erson		
WARNING: Any misrepresenta concerned.	ition made in the Personal Data Sheet and th	s Work Experience Sheet S	MELISHING	THE POS FO	nn.		,,			
On a n	TO FILLING OUT THE PERSONAL DATA SH	WEET (PDS) BEFORE ACCOUNTS	ABROLVATE	ne roare	3 12 11 16	-	(Sin rost foliop	For CSC use ont		
And the state of t			and the same to							
2 SLEWAME	OMALAY					NAME EXTENSIONS	49 (00) A	uA .		
FIRST NAME	EXEL						-,,			
MODULE NAME	HERBOLINGO									
3 DATE OF BIRTH		16 CITIZENSHIP		₹ Filip	pino (Dual Otizenshi	p			
(mm/d3/yyy)	12/21/1995					by birth	by natura	lization		
4 PLACE OF BIRTH	BAYBAY, LEYTE		If holder of dual citizenship,			Pts. indicate	country			
5 SEX	☐ Male ☑ Female	please indicate the	t etals					-		
	✓ Single	17 RESIDENTIAL ADDRESS	· ·	use/Block/Lot	llo.		Street			
6 CIVIL STATUS	☐ Widowed ☐ Separated					BR	GY STO ROSA Barangay	RIO		
	Other/s:	-	SubdivisionVillage BAYBAY, CITY							
7 HEIGHT (m)	1.53	-		City/Municipalit	/	6521	Province			
8 WEIGHT (kg)	54	ZIP CODE				UJE!				
9. BLOOD TYPE	N/A	18 PERMANENT ADDRESS	Но	use/Block/Lot	Vo	po	Street SY STO ROSA	RIO		
10 GSIS ID NO	N/A		S	bdivisionVilla		Dri	Barangay			
11 FAG-IBIG ID NO	121224246995]		BAYBA' dy/Municipalit			Province			
12 PHILHEALTH NO.	130255179927	ZIP CODE		6521						
13 SSS NO	0641175967	19. TELEPHONE NO.		N/A						
14 TIN NO	355193115	20. MOBILE NO.			C	06657531961				
15 AGENCY EMPLOYEE NO	48020042	21 E-MAIL ADDRESS (if any)			exel.oma	lay@gmail.c	<u>om</u>			
D. FAMILY BACKCING UNIT			1		77 1 7	e de la marca				
22 SPOUSE'S SURNAME	N/A		23. NAME of CI	HILDREN (Wr	te full name an	(lis teil b	DATE OF BIR	RTH (mm/dd/yyyy)		
FIRST NAME		NAME EXTENSION (JR , SR)								
MIDDLE NAME										
OCCUPATION										
EMPLOYER/BUSINESS NAME										
BUSINESS ADDRESS										
TELEPHONE NO										
24. FATHER'S SURNAME	OMALAY									
FIRST NAME	NESTOR	NAME EXTENSION (JR., SR)								
MIDDLE NAME	LIMBO									
25 MOTHER'S MAIDEN NAME										
SURNAME	HERBOLINGO									
FIRST NAME	ADELAIDA									
MIDDLE NAME	DELA TORRE			(C	ontinue on se	parate sheet il noce	ssary)	-		
)	2(6) B ₁ (1)							SCHOLARSHIP/		
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGRE (Write in full)	E/COURSE	PERIOD OF ATTENDANCE		HIGHEST LEVEL/ UNITS EARNED (If not graduated)	YEAR GRADUATED	ACADEMIC		
ELEMENTARY	BAYBAY I CENTRAL SCHOOL	SPECIAL SCIENCE ELEMENTARY SE	CTION	06/08/2002	03/25/2008	N/A	2008	WITH		
SECONDARY	BAYBAY NATIONAL HIGH SCHOOL	ENGINEERING AND SCIENCE EDUCA	TION	06/07/2008	03/29/2012	N/A	2012	N/A		
VOCATIONAL / TRADE COURSE	N/A	N/A		N/A	N/A	N/A	N/A	N/A		
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN A	GRIBUSINESS	06/10/2014	06/15/18	N/A	2018	CUM LAUDE		
GRADUATE STUDIES	N/A	N/A		N/A	N/A	N/A	N/A	N/A		
		ontinue on separate sheet if nece	stery)			5 NF02		1 4 4 1		
SIGNATURE	Hanalay			DA	TE		20, 20			
						CS	FORM 212 (Revise	d 2017), Page 1 of 4		

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CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE			RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINAT	TION / CONF	ERMENT	LICENSE (if a	Date of Validity
BARANGAY ELIGIBILITY / DRIVER'S LICENSE CAREER SERVICE PROFESSIONAL (PD 907)			06/15/2018	CIVIL SERVICE COM			1 /1		
CAREER	SERVICE PROFE	SSIONAL (PD 907)		Q0/19/2010	OFFICE VIII I	ALO LEY	TE		
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Contract	de la sedi		6.50.71						
		a- jar her						1	
			(Conti	nue on separate sheet if	necessary)	27			
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	INCLUSIVE DATES (mm/dd/yyyy) (Write in full/Do not abbre			DEPARTMENT / AG (Write in ful	ENCY / OFFICE / COMPANY I/Do not abbreviate)	MONTHLY SALARY	PAY CRADE (I applicable) & STEP (Format *00-0") INCREMENT	STATUS OF APPOINTMENT	GOVT SERVICE (Y/N)
2/18/2019	To 02/28/2021	BANK TEL	LER	CHINA BANK	ING CORPORATION	PHP 11,850		REGULAR	NO
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		Cicar	()		1 2012			OFW 212 (Feedood 20	17), Page 2 of 4

9. NAME & ADDRESS OF ORGANIZATION		SIVE DATES n/dd/yyyy)	NUMBER OF HOURS		POSITION / NATURE OF WORK
(Write in full)	From	To			
	7 - 25 1				
			-		
				Line	r d
	-	1,2		- 1 -	
	(Cor	ntinue on separate	sheet if necessary)	Light Holds	
LEARNING AND DEVELOPMENT (LA		(O) EVIRAINU	ILIST BLAVEING IC	to Nacion	
ton in matrix all the insprint of the	INCLUSE	VE DATES OF	Colored Land Colored Co.	Type of LD	Control Contro
TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS	ATTE	ENDANCE	NUMBER OF HOURS	(Managerial/ Supervisory/	CONDUCTED/ SPONSORED BY (Write in full)
(Write in full)	From	То		Technical/etc)	
IC TELLERING COURSE	02/20/2019	02/21/2019	16 HRS	1,5	CHINA BANKING CORORATION
SIGNATURE VERIFICATION	05/25/2019	05/25/2019	8 HRS	1 1	CHINA BANKING CORORATION
NEGOTIABLE INSTRUMENTS	06/15/2019	06/15/2019	8 HRS		CHINA BANKING CORORATION
COUNTERFEIT DETECTION	05/26/2019	05/26/2019	8HRS		CHINA BANKING CORORATION
COUNTERFEIT DETECTION	03/20/2013	-			
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	(Con	tinue on separate	sheet if necessary)		
OTHER INFORMATION					
SPECIAL SKILLS and HOBBIES	NO		TINCTIONS / RECOGN rite in full)	mon	MEMBERSHIP IN 33. ASSOCIATION/ORGANIZATION (Write in full)
EXERCISING AND HEALTHCARE					
DANCING					
LEGE DAYS-TRACK AND FIELD) SPORTS	1				
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	17				
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CIONATURE	/Cont	ti di.	sheet if necessary:	**	meth = 10 = 0=11
SIGNATURE	EttCho	u uy	DA	I E	CS FORM 212 (Feward 2017), Pag

Series of 2021 Series of 2021 Michigan 12- Series of 2021 Michigan 13- Michigan 1	ATTA ATTA ATTA ATTA ATTA ATTA ATTA ATT	Government Issued (0 is house cost Sts. Int. Lown Lores, etc.) PLEASE AND AT E.D Humber and Date of Resiliance Government Issued (0: Disconse/Pargod No: Disapflus of Issuesors:	BRUAN BULAWAN P16143332 C I declare under cath that I have personally accomplished this Personal falls Sheet which is a frue, correct and complete statement pursuant to the provisions of pertnent laws, rules and regulations of the Republic of the Philippines. I authorize the agenty 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 cases against me.	JOSE ALVIN P. SUMALINOG	ATILO S. ACIDO	41. REFERENCES (Person not reased by consumptimely or among to alphanatic appointment. NAME	c. Are you a solo parent?	b. Are you a person with disability?	40 Pursuant to: (a) Indigenous People's Act [RA 8371); (b) Magna Carta for Disabled Persons (RA 7271); and (c) Solo Parents Weitze Act of 2000 (RA 8972), please answer the following items: a. Are you a member of any indigenous group?	 Have you acquired the status of an immigrant or permanent resident of another country 	b. Have you resigned from the government service during the three (3)-month period before the last election to promote/actively campaign for a national or local candidate?	39. a Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?	31. Have you ever been separated from the service in any of the following modes: resignation, retirement, dropped from the role, dismissal, termination, end of term, finished confract or phased out (abolition) in the public or private sector?	M. Have you ever been convioled of any crime or violation of any law, discree, ordinance or regulation by any court or tribuna??	b. Have you been criminally charged before any court?	 a. Have you ever been found guilty of any administrative offense? 	A veryour teleted by occasignately or attenty to the aproximity or recommending summers, or or or check of tempers of either or to the person who has immediate supervision over you in the Official Bureau or Department where you will be approximed. a within the third degree? b. within the builth degree (for Local Government Unit - Career Employees)?
Person demission Oath Turn 30, 2021 13-	TY. RENE ALLAN G. JERVOSO	CHOMOLOU Squarae (Sgn noise added) WWAY 29 - Lot. Date Assumptioned	BAYBAY CITY, LEYTE 9181433; Isibed this Personal Data Sheet which is a frue, correct, perhapent laws, rules and regulations of the Republic of presentative to verifylyralidate the contents stated herein, document, and its attachments shall cause the fling	ORMOC CITY, LEYTE	ORMOC CITY, LEYTE	ADDRESS			Carta for Disabled Persons (RA 7277); swer the following items:	ident of another country?	ree (3)-month period before the last adidate?	n held within the last year (except	lowing modes: resignation, retirement, hed contract or phased out (abolition) in	w, decree, ordinance or regulation by		77	ecommending authority, or to the extraction over you in the Office. Employees)?
CST-COLLETT Proper for CST-COLLETT Prope	, affant exhibiting his/her validy issued government ID as indicated above. # G. JERVOSO IV City.	Sept Tembrusk	set 433523 Tile, correct and the correct and the Republic of the block therein. EXCL the OMALAY ass the filing of the company of the comp	9177200149	9328753225	TEL NO.	If YES, please specify ID No:	☐ YES, please specify ID No:	If YES, please specify. ☑ NO	YES, give details (country):	☐ YES ☐ NO If YES, give details:	give details:	YES give details:	☐ YES. give details:	YES J HO If YES, give details Date Flect Status of Caresis:	☐ xes [] YES, give details:	□ YES □ 100 □ YES □ 100 If YES, gwa dataks