## CS Form No. 212 Revised 2017 concerned. PERSONAL INFORMATION 2. SURNAME **APOSTOL** FIRST NAME HAROLD EDGAR MIDDLE NAME CATUDAY 3. DATE OF BIRTH (mm/dd/yyyy) 4. PLACE OF BIRTH 5. SEX ✓ Male ✓ Single 6 CIVIL STATUS Widowed Other/s: 7. HEIGHT (m) 8. WEIGHT (kg) 9. BLOOD TYPE 10. GSIS ID NO. 11. PAG-IBIG ID NO.

## 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 READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM. 1. CS ID No. (Do not fill up. For CSC use only Print legibly. Tick appropriate boxes (

) and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. NAME EXTENSION (JR., SR) 12/23/1989 16. CITIZENSHIP √ Filipino Dual Citizenship by birth by naturalization TACLOBAN CITY If holder of dual citizenship, Pls. indicate country: please indicate the details. Female Married 17. RESIDENTIAL ADDRESS BLOCK 13 LOT 4 House/Block/Lot No Street Separated VILLA LOLITA SUBD Barangay 83-B Cogon San Jose Subdivision/Village Barangay TACLOBAN I FYTF 1.67 City/Municipality Province 72 kg. **ZIP CODE** 6500 18. PERMANENT ADDRESS 0+ House/Block/Lot No. Street Subdivision/Village Barangay 121066768315 City/Municipality Province 12. PHILHEALTH NO. 12-051084154-4 ZIP CODE 19. TELEPHONE NO. 13. SSS NO. 0111-6453887-3 14. TIN NO 310-701-299-000 20. MOBILE NO. 09367352934 APOSTOLHAROLDEDGAR@YAHOO.COM 15. AGENCY EMPLOYEE NO. N/A 21. E-MAIL ADDRESS (if any) **FAMILY BACKGROUND** 23. NAME of CHILDREN (Write full name and list all) 22. SPOUSE'S SURNAME N/A DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) N/A N/A N/A FIRST NAME N/A N/A MIDDLE NAME NA N/A N/A N/A OCCUPATION N/A EMPLOYER/BUSINESS NAME N/A N/A **BUSINESS ADDRESS** N/A TELEPHONE NO. N/A **APOSTOL** 24. FATHER'S SURNAME SR. **EDGARDO** FIRST NAME MIDDLE NAME **EMNAS** 25. MOTHER'S MAIDEN NAME SURNAME **CATUDAY CYNTHIA** FIRST NAME **VILLARAZO** MIDDLE NAME (Continue on separate sheet if necessary) **EDUCATIONAL BACKGROUND** HIGHEST LEVEL/ SCHOLARSHIP/ NAME OF SCHOOL PERIOD OF ATTENDANCE BASIC EDUCATION/DEGREE/COURSE UNITS YFAR ACADEMIC LEVEL EARNED GRADUATED HONORS (Write in full) (Write in full) (if not graduated) RECEIVED То From **BARUGO II CENTRAL SCHOOL ELEMENTARY ELEMENTARY** 6/1/1996 3/12/2002 2002

SIGNATURE				\TE			
	(Continue on separate sheet if necessary)						
GRADUATE STUDIES	DVOREF COLLEGE OF LAW	JURIS DOCTOR	6/6/2014	3/5/2018		2018	
COLLEGE	ST PAUL SCHOOL OF PROFESSIONAL STUDUES	BS ECONOMICS	6/3/2012	5/1/2014		2014	
COLLEGE	UNIVERSITY OF SAN CARLOS	BS ECONOMICS	6/4/2010	3/5/2012	80 units	N/A	
SECONDARY	SACRED HEART SEMINARY	SECONDARY	5/28/2002	3/8/2006		2006	

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IV. CIVIL SERVICE ELIGIBILITY									
			RATING	DATE OF EXAMINATION / PLACE OF EXAMINATION / CONFERMENT			LICENSE (if applicable)		
		ITY / DRIVER'S LICENSE	(If Applicable)	CONFERMENT	PLACE OF EXAMINA	TION / CONFER	KIVIEN I	NUMBER	Date of Validity
	R.A 108	0 BAR		FEBRUARY 4-6 2022	DVOREF COLLEGE OF LAW		81701	N/A	
V WARK	-VDEDIENOS		(Con	itinue on separate sheet	if necessary)				
	EXPERIENCE ate employme	nt. Start from your recent	work) Description	of duties should be	indicated in the attached	Work Expe	rience sheet.		
28. INCLU	JSIVE DATES m/dd/yyyy)	POSITION TITLE abbreviate	(Write in full/Do not	DEPARTMENT / AGENC		MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	SERVICE
8/29/2017	Present	Online Englis	h Tutor	Bibo Globa	I Opportunity Inc	10000.00	N/A	Independent	N
					,			Contractor	
-									
<u> </u>									

(Continue on separate sheet if necessary)							
SIGNA	TURE			DATE			

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VI. VOLUNTARY WORK OR INVOLVEMENT	IN CIVIC / NON-GOVERNMENT	/PEOPLE/V	OLUNTARY (	ORGANIZATIO	ON/S	
29. NAME & ADDRESS OF ORGANIZATION (Write in fu		INCLUSIVE DATE	(mm/dd/vvvv)	NUMBER OF HOURS		POSITION / NATURE OF WORK
N/A		N/A	To N/A	N/A	N/A	
		tinue on separate s				
VII. LEARNING AND DEVELOPMENT (L&D)						
(Start from the most recent L&D/training program and include	de only the relevant L&D/training taken for	the last five (5) yea		ief/Executive/Man	agerial positions)	
30. TITLE OF LEARNING AND DEVELOPMENT INTERVEN (Write in		ATTENDANCE	/dd/yyyy) To	NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
MANDATORY CLINICAL LEGAL EDUCATION PROGR	AM (MCLE)		6/1/2022	26 HOURS	N/A	CHAN ROBLES MCLE ONLINE
	(Con	tinue on separate s	sheet if necessary)			
VIII. OTHER INFORMATION						MEMBEROUID IN ACCOUNTION OF CONTRACTOR
31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RE	ECOGNITION	(Write in full)			MEMBERSHIP IN ASSOCIATION/ORGANIZATION  33. (Write in full)
BASKETBALL		N/A				PAISANOS
CHESS		· <u> </u>			·	INTEGRATED BAR OF THE PHILIPPINES

(Continue on separate sheet if necessary)					
SIGNATURE		DATE			

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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 apppointed, a. within the third degree?	☐ YES	☑ NO			
	b. within the fourth degree (for Local Government Unit - Car	<u> </u>	✓ NO			
35.	a. Have you ever been found guilty of any administrative off	YES If YES, give detail	✓ 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?	☐ YES If YES, give detail	✓ NO s:			
37.	Have you ever been separated from the service in any of th retirement, dropped from the rolls, dismissal, termination, er out (abolition) in the public or private sector?	YES If YES, give detail	V NO s:			
38.	A. Have you ever been a candidate in a national or local ele Barangay election)?	☐ YES ☑ NO If YES, give details:				
	b. Have you resigned from the government service during the last election to promote/actively campaign for a national or l	☐ YES ☑ NO If YES, give details:				
39.	Have you acquired the status of an immigrant or permanent	☐ YES ☑ NO If YES, give details (country): ————————————————————————————————————				
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972)					
a.	Are you a member of any indigenous group?		YES If YES, please specif	✓ NO		
b.	Are you a person with disability?		YES If YES, please specif	✓ NO		
C.	Are you a solo parent?		YES If YES, please specif	y ID No:		
41.	REFERENCES (Person not related by consanguinity or affinity to applican	t /appointee)				
	NAME	ADDRESS	TEL. NO.	ID picture taken within		
	CHRISTIAN CONDE	MARIPIPI BILIRAN	9171853155	the last 6 months 3.5 cm. X 4.5 cm (passport size)		
	JOHANN ARPON	TACLOBAN LEYTE	9171446680	With full and handwritten name tag and signature over		
	JOHNALD SALOMON	MAHAYAG ZAMBOANGA DEL SUR	9075698962	printed name		
42.	I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertine Philippines. I authorize the agency head/authorized represe I agree that any misrepresentation made in this doc administrative/criminal case/s against me.	ent laws, rules and regulations of the lentative to verify/validate the contents sta	Republic of the ated herein.	Computer generated or photocopied picture is not acceptable  PHOTO		
عل	PLEASE INDICATE ID Number and Date of					
Ιŀ	overnment Issued ID: UMID  U/License/Passport No.: 0111-6453887-3					
۱H	Intel®inance florings 2042	oox)				

Date/Flace of Issualice. 2012	Date Accomplished	Right Thumbmark
SUBSCRIBED AND SWORN to before me this	, affiant exhibiting his/her validly issued	government ID as indicated above.
	Person Administering Oath	

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