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 READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM (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. 1. CS ID No. . PERSONAL INFORMATION 2. SURNAME URDANETA AME EXTENSION (JR., SR) **CHERRY MAE** FIRST NAME MIDDLE NAME **BALAGOSA** 3. DATE OF BIRTH 11/21/1999 16. CITIZENSHIP ✓ Filipino Dual Citizenship (mm/dd/yyyy) 4. PLACE OF BIRTH **BAYBAY CITY, LEYTE** If holder of dual citizenship, Pls. indicate country: please indicate the details Male ✓ Female 5. SEX 17. RESIDENTIAL ADDRESS 200 B. RAMON MAGSAYSAY AVENUE ✓ Single Married 6 CIVIL STATUS Widowed House/Block/Lot N Separated ZONE 16 Other/s: Subdivision/Villag Barangay BAYBAY CITY LEYTE 7. HEIGHT (m) 1.6 m Citv/Municipalit 8. WEIGHT (kg) 63 kg ZIP CODE 6521 18. PERMANENT ADDRESS 200 B. RAMON MAGSAYSAY AVENUE 9. BLOOD TYPE N/A House/Block/Lot No ZONE 16 10. GSIS ID NO. N/A Subdivision/Village Barangay BAYBAY CITY LEYTE 11. PAG-IBIG ID NO. 1213-1841-5203 City/Municipality Province 12. PHILHEALTH NO. 18-250803060-7 ZIP CODE 6521 06-4571422-7 N/A 13. SSS NO. 19. TELEPHONE NO. 14. TIN NO. 634-380-291 20. MOBILE NO. 09700231563 15. AGENCY EMPLOYEE NO. N/A 21. E-MAIL ADDRESS (if any) cherrymaeurdaneta@gmail.com **FAMILY BACKGROUND** N/A 22. SPOUSE'S SURNAME 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) AME EXTENSION (JR., SR) FIRST NAME N/A N/A N/A N/A N/A N/A MIDDLE NAME N/A N/A N/A OCCUPATION EMPLOYER/BUSINESS NAME N/A N/A N/A N/A N/A N/A **BUSINESS ADDRESS** N/A N/A TELEPHONE NO. N/A 24. FATHER'S SURNAME URDANETA N/A N/A AME EXTENSION (JR., SR) DONALD N/A N/A FIRST NAME N/A MIDDLE NAME **ESTARDO** N/A 25. MOTHER'S MAIDEN NAME N/A N/A N/A BALAGOSA SURNAME N/A LESLY N/A N/A FIRST NAME MIDDLE NAME ORF.IUFI A (Continue on separate sheet if necessary) **EDUCATIONAL BACKGROUND** HIGHEST 26. PERIOD OF ATTENDANCE SCHOLARSHIP/ CADEMIC HONORS NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE YEAR LEVEL (Write in UNITS (Write in full) GRADUATED EARNED RECEIVED full) From То not gradu ELEMENTARY **BAYBAY II SOUTH CENTRAL SCHOOL ELEMENTARY** 2006 2012 GRADUATED 2012 N/A **BAYBAY NATIONAL HIGH SCHOOL** JUNIOR HIGH SCHOOL 2012 2016 **GRADUATED** 2018 N/A SECONDARY **BAYBAY CITY SENIOR HIGH SCHOOL** SENIOR HIGH SCHOOL GRADUATED 2018 2018 N/A 2016 OCATIONAL / N/A N/A N/A N/A N/A N/A N/A TERTIARY BACHELOR OF SECONDARY EDUCATION **VISAYAS STATE UNIVERSITY** COLLEGE GRADUATED 2018 2022 2022 **FDUCATION** MAJOR IN SCIENCE SUBSIDY (TES)

MASTER OF ARTS IN EDUCATION MAJOR

IN NATURAL SCIENCE

FRANCISCAN COLLEGE OF THE

IMMACULATE CONCEPTION, BAYBAY,

LEYTE, INCORPORATED

GRADUATE STUDIES

SIGNATURE

N/A

ONGOING

06/12/2025

27 UNITS

2023

DATE

ONGOING

	ICE ELIGIBILITY							LICENSE	(if applicable)
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE			RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT				NUMBER	Date of Validity
LICENSURE EXAM FOR TEACHERS			83.80	03/19/2023	/2023 TACLOBAN CITY			2061883	11/21/2026
V. WORK EXPE		from your recent work) D	escription of dutie	(Continue on separate	sheet if necessary) ed in the attached Work E	xperience shee	t.		
28.	DATES (mm/dd/yyyy)						SALARY/ JOB/ PAY		GOV'T SERVICE
From	To	POSITION TITLE (Write in full/Do not abbreviate)			Y / OFFICE / COMPANY (Write in o not abbreviate)	MONTHLY SALARY	GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	(Y/ N)
1/8/2024	5/31/2025	BASIC EDUCATIO	N FACULTY	IMMACULATE CO	I COLLEGE OF THE ONCEPTION, BAYBAY, NCORPORATED	13,600.00		PROBATION	N
8/16/2023	7/15/2024	BASIC EDUCATIO	N FACULTY	IMMACULATE CO	FRANCISCAN COLLEGE OF THE MACULATE CONCEPTION, BAYBAY, LEYTE, INCORPORATED			PROBATION	N
	(Continue on separate sheet if necessary)								
SIGNA	SIGNATURE				DATE			06/12/2025	
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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S								
29. NAME & ADDRESS OF ORGANIZATION (Write in full)		(mm/dd/	ywy) To	NUMBER OF HOURS		POSITION / NATURE OF WORK		
N/A	N/A	N/A	N/A		N/A			
N/A	N/A	N/A	N/A		N/A			
N/A	N/A	N/A	N/A		N/A			
N/A	N/A	N/A	N/A		N/A			
N/A	N/A	N/A	N/A		N/A			
N/A	N/A	N/A	N/A		N/A			
N/A		N/A (Continue on se	N/A eparate sheet if necess	N/A		N/A		
VII. LEARNING AND DEVELOPMENT (L&D)	GRAMS ATTENDED		<u>)</u>					
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)		INCLUSIVE DATES OF AT (mm/dd/		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)		
PILGRIMS AND AGENTS OF HOPE: EN	MBRACING SYNODALITY	11/13/2024	11/15/2024	24 HRS		CATHOLIC EDUCATIONAL ASSOCIATION OF THE PHILIPPINES (CEAP)		
IN-SERVICE TRAINING FOR SENIOR HI	GH SCHOOL TEACHERS	2/8/2024	4/8/2024	24 HRS		PRIVATE EDUCATION ASSISTANCE COMMITTEE (PEAC)		
EMBRACING ARTIFICIAL INTELLIGENCE IN RES	EARCH AND GRADUATE STUDIES	6/5/2024	6/5/2024	5 HRS		FRANSISCAN COLLEGE OF THE IMMACULATE CONCEPTION BAYBAY, LEYTE INCORPORATED		
BE ENGAGED AND BE (COUNTED	02/22/2024	02/22/2024	5 HRS		FRANSISCAN COLLEGE OF THE IMMACULATE CONCEPTION, BAYBAY, LEYTE INCORPORATED		
WRITING EDUCATIONAL RESEARCH USING QUALIT	01/26/2024	01/27/2024	16 HRS		FRANSISCAN COLLEGE OF THE IMMACULATE CONCEPTION, BAYBAY, LEYTE INCORPORATED			
BUILDING ESSENTIAL R'S (RESPECT, RELATIONSH FOR TEACHER'S COM	09/28/2023	09/28/2023	5 HRS		FRANSISCAN COLLEGE OF THE IMMACULATE CONCEPTION, BAYBAY, LEYTE INCORPORATED			
UTILIZATION FOR TEST	8/26/2023	8/26/2023	2 HRS		PHILIPPINE ASSOCATION FOR TEACHERS AND EDUCATORS (PAFTE)			
TEST CONSTRUCTION FOR CR	8/26/2023	8/26/2023	2 HRS		PHILIPPINE ASSOCATION FOR TEACHERS AND EDUCATORS (PAFTE)			
GUIDELINES ON RECRUITMENT, SELECTION,	8/19/2023	8/19/2023	2 HRS		PHILIPPINE ASSOCATION FOR TEACHERS AND EDUCATORS (PAFTE)			
HANDLING STUDENTS WITH S	08/17/2023	08/17/2023	5 HRS		FRANSISCAN COLLEGE OF THE IMMACULATE CONCEPTION, BAYBAY, LEYTE INCORPORATED			
INTEGRATING VALUES WITH S	UBJECT MATTER	12/8/2023	12/8/2023	2 HRS		PHILIPPINE ASSOCATION FOR TEACHERS AND EDUCATORS (PAFTE)		
WRITING HIGH IMPACT LEA	8/12/2023	12/8/2023	2 HRS		PHILIPPINE ASSOCATION FOR TEACHERS AND EDUCATORS (PAFTE)			
MANAGING ONES ANXIETY IN THE TI	EACHING PROFESSION	8/05/2023	8/05/2023	2 HRS		PHILIPPINE ASSOCATION FOR TEACHERS AND EDUCATORS (PAFTE)		
CLASS ADVISERS AS PARA-	8/05/2023	8/05/2023	2 HRS		PHILIPPINE ASSOCATION FOR TEACHERS AND EDUCATORS (PAFTE)			
TEACHING AS PROFESSION, MISS	7/29/2023	7/29/2023	2 HRS		PHILIPPINE ASSOCATION FOR TEACHERS AND EDUCATORS (PAFTE)			
CREATING AND DESIGNING LEARNING	RESOURCE MATERIALS	7/29/2023	7/29/2023	2 HRS		PHILIPPINE ASSOCATION FOR TEACHERS AND EDUCATORS (PAFTE)		
CHILD PROTECTION POLICY ORIENTATION, BULLYII COMMUNICATING EFFECTIVE		07/26/2023	07/26/2023	5 HRS		FRANSISCAN COLLEGE OF THE IMMACULATE CONCEPTION, BAYBAY, LEYTE INCORPORATED		
RACE AGAINST SU		07/24/2023	07/24/2023	5 HRS		FRANSISCAN COLLEGE OF THE IMMACULATE CONCEPTION, BAYBAY, LEYTE INCORPORATED		
2ND USC-VSU BIOPHYSICS	7/7/2023	7/7/2023	8 HRS		VISAYAS STATE UNIVERSITY			
I III OTI I PO II PODILI PODIL		(Continue on se	eparate sheet if necess	ary)				
VIII. OTHER INFORMATION	32. NON-ACADEMIC DISTINCTIONS / RECOG	GNITION			(Write	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION		
31. SPECIAL SKILLS and HOBBIES PHOTO EDITING		33. (Write in full) PHILIPPINE ASSOCIATION FOR TEACHERS AND						
CROCHETING		T PLACER (COACH) I & 10 SCIENTIFIC RES		EDUCATORS (PAFTE)				
		EVEMENT TEST FOR						
	SCIENCE INVENTION CONTEST BOARD OF JUDGES 2024							
	INVENTION CONTES	T BOARD OF JUD	GES 2023					
	(Continue on separate sheet if necessary)							
SIGNATURE	<u> </u>		DAT	E	06/12/2025 CS FORM 212 (Revised 2017), Page 3 of 4			

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? b. within the fourth degree (for Local Government Unit - Cal	e supervision over you in the Office,		☑ NO ☑ NO				
35. a. Have you ever been found guilty of any administrative off	ense?	☐ 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 regulation by any court or tribunal?	ny law, decree, ordinance or	☐ YES ☑ NO If YES, give details:					
37. Have you ever been separated from the service in any of th retirement, dropped from the rolls, dismissal, termination, el phased out (abolition) in the public or private sector?		☐ YES ☑ NO If YES, give details:					
a. Have you ever been a candidate in a national or local ele (except Barangay election)? b. Have you resigned from the government service during the local election of the local election.	ne three (3)-month period before	☐ YES ☑ NO If YES, give details: ☐ YES ☑ NO					
the last election to promote/actively campaign for a national 39. Have you acquired the status of an immigrant or permanent		If YES, give details:					
 40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma (RA 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8 a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? 	972), please answer the following	☐ YES ☑ NO If YES, please specify: ☐ YES ☑ NO If YES, please specify ID No: ☐ YES ☑ NO If YES, please specify ID No:					
41. REFERENCES (Person not related by consanguinity or affinity to applican	at /appointee)	l					
NAME	ADDRESS	TEL. NO.					
TRACIE R. PUNA	BAYBAY CITY, LEYTE	09510402806 / 09755322150					
KATHERINE S. POLINAR	BRGY. PUNTA, BAYBAY CITY, LEYTE	9614357772					
MICHELLE P. WENCESLAO	BRGY. MAYPATAG, BAYBAY CITY, LEYTE	9264049844					
42. I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I authorize the agency head/authorized representative to verify/validate the contents stated herein. I agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me. PHOTO							
PLEASE INDICATE ID Number and Date of	Ç						
Government Issued ID: PRC ID	X	M					
ID/License/Passport No.: 2061883	Signature (Sign in:	side the box)					
Date/Place of Issuance: 11/21/2026 / ORMOC CITY	06/12/2 Date Accom		Right Thumbmark				
SUBSCRIBED AND SWORN to before me this, affiant exhibiting his/her validly issued government ID as indicated above.							
_	Person Administer	ring Oath					