CS Form No. 212 Revised 2017									
Revisea 2017	PERSO	NAL DAT	A SH	IEET	ſ				
	tion made in the Personal Data Sheet and th	e Work Experience Sheet si	hall cause the	filing of ad	ministrative	/criminal case/s	against the p	erson	
	TO FILLING OUT THE PERSONAL DATA SH								
Print legibly. Tick appropriate boxes  PERSONAL INFORMATION	) and use separate sheet if necessary. Indicate	N/A if not applicable. DO NOT	ABBREVIATE.		1. CS ID No.		(Do not fill up. F	or CSC use only)	
2. SURNAME	MUNDA								
	MARY ANN			NAME EXTENSION (JR., SR)					
MIDDLE NAME	ALBA								
3. DATE OF BIRTH									
(mm/dd/yyyy)	11/6/1995	16. CITIZENSHIP	✓ Filipino □			Dual Citizenship by birth by naturalization			
4. PLACE OF BIRTH	MAASIN	If holder of dual citizenship,		Pls. indicate country:					
5. SEX	☐ Male ✓ Female	please indicate the de	etails.					•	
6 CIVIL STATUS	Single Married	17. RESIDENTIAL ADDRESS		GARDEN COM			Ctorest		
	Widowed Separated Other/s:		House/Block/Lot No.		BRGY.	Street BRGY. GUADALUPE (OTOD)			
7. HEIGHT (m)	_			bdivision/Village BAYBAY CITY	)		Barangay LEYTE		
	1.59		C	ity/Municipality			Province		
8. WEIGHT (kg)	47	ZIP CODE				6521	NO CORNER O	ANTANIOT	
9. BLOOD TYPE	A	18. PERMANENT ADDRESS	Hou	se/Block/Lot No	).	WALING-WAL	ING CORNER SA Street	ANTAN ST.	
0. GSIS ID NO.				MCOOP VILLA bdivision/Village		E	BRGY. IBARRA Barangay		
11. PAG-IBIG ID NO.				MAASIN			SOUTHER	RN LEYTE	
2. PHILHEALTH NO.	13-025552819-0	ZIP CODE	Ci	City/Municipality 6600			Province		
3. SSS NO.		19. TELEPHONE NO.							
4. TIN NO.	488-844-927	20. MOBILE NO.		09175029838					
5. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)		mamunda195@gmail.com					
I. FAMILY BACKGROUND									
2. SPOUSE'S SURNAME	N/A		23. NAME of CH	ILDREN (Write	full name and	list all)	DATE OF BIRT	ΓΗ (mm/dd/yyyy)	
FIRST NAME		NAME EXTENSION (JR., SR)							
MIDDLE NAME		1							
OCCUPATION									
EMPLOYER/BUSINESS NAME									
BUSINESS ADDRESS									
TELEPHONE NO.									
24. FATHER'S SURNAME	MUNDA								
FIRST NAME	ASISCLO	NAME EXTENSION (JR., SR) JR							
MIDDLE NAME	BIOL	1							
5. MOTHER'S MAIDEN NAME									
SURNAME	ALBA								
FIRST NAME	RUSTICA								
				(Continue on separate sheet if necessary)			ssary)		
MIDDLE NAME	NAMORO								
MIDDLE NAME  II. EDUCATIONAL BACKGI									
		BASIC EDUCATION/DEGRE	EE/COURSE		TENDANCE	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED	
II. EDUCATIONAL BACKG	ROUND NAME OF SCHOOL		EE/COURSE	PERIOD OF A	To 2008	UNITS EARNED		ACADEMIC HONORS RECEIVED 4TH HONORABLE	
II. EDUCATIONAL BACKG	NAME OF SCHOOL (Write in full)	(Write in full)	EE/COURSE	From <b>2002</b>	То	UNITS EARNED	GRADUATED	ACADEMIC HONORS RECEIVED	
II. EDUCATIONAL BACKGO  LEVEL  ELEMENTARY  SECONDARY  VOCATIONAL/	NAME OF SCHOOL (Write in full)  SAINT JOSEPH COLLEGE  PHILIPPINE SCIENCE HIGH SCHOOL - EASTERN	(Write in full)	E/COURSE	From <b>2002</b>	To 2008	UNITS EARNED	graduated 2008	ACADEMIC HONORS RECEIVED 4TH HONORABLE MENTION	
II. EDUCATIONAL BACKGI 26. LEVEL ELEMENTARY SECONDARY	NAME OF SCHOOL (Write in full)  SAINT JOSEPH COLLEGE  PHILIPPINE SCIENCE HIGH SCHOOL - EASTERN	(Write in full)		From 2002 2009	To 2008	UNITS EARNED	graduated 2008	ACADEMIC HONORS RECEIVED 4TH HONORABLE MENTION	
II. EDUCATIONAL BACKGO  16. LEVEL  ELEMENTARY  SECONDARY  VOCATIONAL / TRADE COURSE	NAME OF SCHOOL (Write in full)  SAINT JOSEPH COLLEGE  PHILIPPINE SCIENCE HIGH SCHOOL - EASTERN VISAYAS CAMPUS	(Write in full)  BASIC EDUCATION  BASIC EDUCATION  BS AGRICULTURE MAJOR		From 2002 2009	To 2008	UNITS EARNED	2008 2012	ACADEMIC HONORS HONORS 4TH HONORABLE MENTION NONE	
ELEMENTARY SECONDARY VOCATIONAL / TRADE COURSE COLLEGE	NAME OF SCHOOL (Write in full)  SAINT JOSEPH COLLEGE  PHILIPPINE SCIENCE HIGH SCHOOL - EASTERN VISAYAS CAMPUS  VISAYAS STATE UNIVERSITY MAIN CAMPUS	(Write in full)  BASIC EDUCATION  BASIC EDUCATION  BS AGRICULTURE MAJOR	R IN PLANT	From 2002 2009	To 2008	UNITS EARNED	2008 2012	ACADEMIC HONORS HONORS 4TH HONORABLE MENTION NONE	

IV. CIVIL S	SERVICE ELIG	GIBILITY							
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE		RATING DATE OF  (16 Applicable) EXAMINATION		PLACE OF EXAMINATION / CONFERMENT			LICENSE (if a	pplicable)  Date of	
BARANGAY ELIGIBILITY / DRIVER'S LICENSE		(If Applicable)	CONFERMENT	12.02 0. 2.01	ION / CONI ENWENT		NUMBER	Validity	
CIVIL SER	CIVIL SERVICE EXAMINATION PROFESSIONAL		89.5	10/23/2016	MAAS	IN CITY			
V. WORK	EXPERIENCE	_	(Co.	ntinue on separate sheet	if necessary)		-	_	
		nt. Start from your recer	nt work) Description	on of duties should	be indicated in the attach	ed Work Ex		et.	
	USIVE DATES nm/dd/yyyy)	POSITION T (Write in full/Do not			ENCY / OFFICE / COMPANY	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP	STATUS OF APPOINTMENT	GOV'T SERVICE
From	То	GRADUATE TRAC		(Write in full/Do not abbreviate) SALARY  DEPARTMENT OF PLANT BREEDING AND			(Format "00-0")/ INCREMENT		(Y/ N)
2/11/2020	3/11/2020	ENUMERA			ETICS, VSU				Υ
	ATURE		(Co.	ntinue on separate sheet	if necessary)  DATE				

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S								
29.	NAME & ADDRESS OF O	RGANIZATION	INCLUSIV	/E DATES ld/yyyy)	NUMBER OF HOURS		POSITION / NATURE OF WORK	
	(Write in full	)	From	To	NUMBER OF HOURS		POSITION / NATURE OF WORK	
VII I FAI	RNING AND DEVELOPMENT (L&D)		tinue on separate		)			
VII. LEAF	RNING AND DEVELOPMENT (L&D)	TINTERVENTIONS/TRAINING P		DATES OF		Time of LD		
30.	TITLE OF LEARNING AND DEVELOPMENT INTE (Write in full		ATTEN	DANCE d/yyyy)	NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
			110111	10				
			<u> </u>					
		(Con	tinue on separate :	sheet if necessary	)			
VIII. OTH	IER INFORMATION	1000			,			
31.	SPECIAL SKILLS and HOBBIES	32. NON	-ACADEMIC DISTIN (Write	NCTIONS / RECOG e in full)	INITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
		(Con	tinue on separate	sheet if necessary			<u> </u>	
	SIGNATURE	I			D.	ΔTF		

34.	Are you related by consanguinity or affinity to the appointin 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 - Ca	reer Employees)?	YES V NO				
			If YES, give details:				
35.	a. Have you ever been found guilty of any administrative of	ffense?	☐ YES ☑ NO				
			If YES, give details:				
			□ VEC □ NO				
	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	any law, decree, ordinance or regulation		·			
00.	by any court or tribunal?	,,,	☐ YES ☑ NO If YES, give details:				
			ii 120, give details.				
37.	Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, e		☐ YES ☑ NO				
	out (abolition) in the public or private sector?	and of term, finished contract of phased	If YES, give details:				
38	a. Have you ever been a candidate in a national or local ele	ection held within the last year (except	□ vec □ vo				
50.	Barangay election)?		☐ YES ☑ NO If YES, give details:				
	b. Have your residenced from the approximate and one in a desire of	the three (2) we suith a suited by afters the look					
	<ul> <li>b. Have you resigned from the government service during telection to promote/actively campaign for a national or local</li> </ul>		☐ YES ☑ NO If YES, give details:				
			ii 1 Lo, give details.				
39.	Have you acquired the status of an immigrant or permaner	it resident of another country?	☐ YES    ✓ NO				
			If YES, give details (country):				
40	D 11 ( ) 1 15 D 11 A 1 (DA 2074) (I) M	0 / ( 0) // // // // // // // // // // // // //	-	<u>-</u>			
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972						
a.	Are you a member of any indigenous group?	y, picase answer the following items.					
	Are you a member of any magerious group:						
b.	Are you a person with disability?		☐ YES ☑ NO				
			If YES, please specify ID No:				
C.	Are you a solo parent?		☐ YES ☑ NO				
			If YES, please specify ID No:				
41.	REFERENCES (Person not related by consanguinity or affinity to applicant	/appointee)					
	NAME	ADDRESS	TEL. NO.	15			
				ID picture taken within the last 6 months			
				4.5 cm. X 3.5 cm (passport size)			
				Computer accepted			
				Computer generated or photocopied picture			
42.	I declare under oath that I have personally accomplished	this Personal Data Sheet which is a tr	TIP correct and	is not acceptable			
	complete statement pursuant to the provisions of pertin						
	Philippines. I authorize the agency head/authorized repr	resentative to verify/validate the contents	s stated herein.				
	I agree that any misrepresentation made in this doc	cument and its attachments shall caus	se the filing of	РНОТО			
	administrative/criminal case/s against me.			1			
G	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)	F					
	EASE INDICATE ID Number and Date of Issuance						
Go	overnment Issued ID:			<b> </b>			
ID	/License/Passport No.: P8067434A	Signature (Sign inside the bo	nx)	<b>!</b>			
<u></u>	tte/Place of Issuance: 07/24/2018 DFA Tacloban	Signature (Sign inside the bo					
De	REFFIGUE OF ISSUANCE. U1/24/2010 DFA Tacionali	Date Accomplished		Right Thumbmark			
	SUBSCRIBED AND SWORN to before me this	affiant cybibit	ting his/her validly issued government	ID as indicated above			
	CODOCIADED VIAD CHACIAL TO DEIOLE HIE THIS	, anian exhibit	ang morner vallary issued governillent	. 15 as ilidioaled above.			
		h					