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. 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. 2. SURNAME CORMANES NAME EXTENSION (JR., SR) FIRST NAME MA. DENIELLE UMPAD MIDDLE NAME 3. DATE OF BIRTH 10/25/2002 16. CITIZENSHIP ✓ Filipino (mm/dd/yyyy) Dual Citizenship by birth by naturalization 4. PLACE OF BIRTH ORMOC CITY If holder of dual citizenship, Pls. indicate country: please indicate the details. Male √ Female 5. SEX N/A CONCEPTION ✓ Single Married 17. RESIDENTIAL ADDRESS 6 CIVIL STATUS Widowed Separated House/Block/Lot N CAN-ADIENG PUROK 4 Other/s: ubdivision/Village Barangay ORMOC CITY LEYTE 7. HEIGHT (m) 1.56 City/Municipality Province 45 8. WEIGHT (kg) ZIP CODE CONCEPTION 18. PERMANENT ADDRESS N/A 9. BLOOD TYPE UNKNOWN House/Block/Lot No PUROK 4 CAN-ADIENG 10. GSIS ID NO. N/A ubdivision/Village Barangay ORMOC CITY LEYTE 11. PAG-IBIG ID NO. N/A Citv/Municipality Province 12. PHILHEALTH NO. N/A ZIP CODE 6541 13. SSS NO. N/A 19. TELEPHONE NO. N/A 14. TIN NO. 604-759-809 09296006687 20. MOBILE NO. 15. AGENCY EMPLOYEE NO. N/A 21. E-MAIL ADDRESS (if any) ma.denielle.cormanes@gmail.com II. FAMILY BACKGROUND 22. SPOUSE'S SURNAME N/A 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) FIRST NAME N/A N/A N/A N/A MIDDLE NAME OCCUPATION N/A EMPLOYER/BUSINESS NAME N/A BUSINESS ADDRESS N/A N/A TELEPHONE NO. CORMANES 24. FATHER'S SURNAME NAME EXTENSION (JR., SR) FIRST NAME HERCULANO SAMILO MIDDLE NAME 25. MOTHER'S MAIDEN NAME UMPAD SURNAME LOURDES FIRST NAME TANEO MIDDLE NAME (Continue on separate sheet if necessary)

III. EDUCATIONAL BACKGROUND								
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE			YEAR GRADUATED		
			From	To	(if not graduated)		RECEIVED	
ELEMENTARY	CAN-ADIENG ELEMENTARY SCHOOL	BASIC EDUCATION	2008	2014	N/A	2014	WITH HONORS	
	IORMOC CITY SENIOR HIGH SCHOOL	ACCOUNTANCY, BUSINESS, AND MANAGEMENT	2014 2020		N/A	12020	WITH HONORS	
	VOCATIONAL / N/A							
COLLEGE	IVISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN ECONOMICS	2020	2024	N/A	2024	MAGNA CUM Laude	
GRADUATE STUDIES	N/A							
(Continue on separate sheet if necessary)								
SIGNATURE	SIGNATURE South			TE	January 5, 2025			

IV CIVIL	SERVICE ELIC	GIRII ITY							
				DATE OF				LICENSE (if a	pplicable)
SPECIA	27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE (If Applicable)			EXAMINATION / CONFERMENT	PLACE OF EXAMINA	PLACE OF EXAMINATION / CONFERMENT			Date of Validity
HONOR	R GRADUATE E	ELIGIBILITY (PD 907)	N/A	9/17/2024	CIVIL SERVICE COMMISSION REGIONAL OFFICE VIII		100108241794	9/17/2024	
			(Co)	ntinue on separate sheet	if necessary)				
	EXPERIENCE								
	vate employme USIVE DATES		nt work) Descriptio		be indicated in the attache	ed Work Exp	SALARY/JOB/PAY	t.	SERVICE
	mm/dd/yyyy)	POSITION TITLE abbreviate	(Write in full/Do not		CY / OFFICE / COMPANY (Write in not abbreviate)	MONTHLY SALARY	GRADE (if applicable)& STEP (Format "00-0")/	STATUS OF APPOINTMENT	SERVICE
From	То				TICS AUTHORITY – LEYTE		INCREMENT		
7/17/2023	8/25/2023	INTERN (BUDG		PROVINCIALS	STATISTICAL OFFICE	N/A	N/A	N/A	Υ
12/2/2019	12/16/2019	ACCOUNTING	INTERN	IMELDA CHU MEND	OZA ACCOUNTING OFFICE	N/A	N/A	N/A	N
			(Co.	ntinue on separate sheet	if necessary)				
SIGN	IATURE		Smile-4	- Coparate on our	DATE		January 5, 2	025	
			\cup					FORM 212 (Revised 20	17) Page 2 of

VI. VOLUNTARY WORK OR INVOLVEMENT I	N CIVIC / NON-GOVERNMENT	/ PEOPLE / V	OLUNTARY O	RGANIZATIO	N/S		
29. NAME & ADDRESS OF ORGANIZATION (Write in full)	From	(mm/dd/www) To	NUMBER OF HOURS		POSITION / NATURE OF WORK		
N/A							
VII. LEARNING AND DEVELOPMENT (L&D)			sheet if necessary				
TITLE OF LEARNING AND DEVELOPMENT INTERVENT (Write in 1)	IONS/TRAINING PROGRAMS	INCLUSIVE DATES OF ATTENDANCE		NUMBER OF HOURS	Type of LD (Managerial/		
		From	То		Technical/etc)	EASTERN VISAYAS STATE UNIVERSITY	
REGIONAL CONVENTION FOR VISAYAS (REGCON) 20		3/23/2024	3/23/2024	9.0	FOUNDATION	ECONOMICS SOCIETY	
PHILIPPINE ECONOMIC SOCIETY (PES) - VISAYAS EC	ONOMIC REGIONAL FORUM 2023	10/10/2023	10/10/2023	8.0	FOUNDATION	PHILIPPINE ECONOMICS SOCIETY UNIVERSITY OF THE PHILIPPINES TACLOBAN	
EASTERN VISAYAS REGIONAL ECONOMIC CONFERE		4/29/2023	4/29/2023	8.0	FOUNDATION	ECONOMICS SOCIETY	
MONETARY POLICY FORCED TO ACCOMMODATE UN STRATEGY	ICOMPETITIVE AGRICULTURAL	3/10/2023	3/10/2023	8.0	FOUNDATION	VISAYAS STATE UNIVERSITY COLLEGE OF MANAGEMENT AND ECONOMICS	
FINANCIAL LITERACY SEMINAR		3/8/2023	3/8/2023	8.0	FOUNDATION	VISAYAS STATE UNIVERSITY COLLEGE OF MANAGEMENT AND ECONOMICS	
	(Cor	ntinue on separate	sheet if necessary				
VIII. OTHER INFORMATION						MEMBERCHIR IN ACCOCIATION/ORGANIZATION	
31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RE	ECOGNITION	(Write in full)			MEMBERSHIP IN ASSOCIATION/ORGANIZATION 33. (Write i	
MICROSOFT OFFICE (WORD, EXCEL, POWERPOINT)	N/A					VISAYAS STATE UNIVERSITY ALUMNI ASSOCIATION, INC.	
DATA MANAGEMENT							
ACCOUNTING/FINANCIAL ANALYSIS							
ECONOMIC ANALYSIS							
PROBLEM-SOLVING SKILLS							
WRITTEN/VERBAL COMMUNICATION SKILLS							
ADAPTABILITY							
	(Cor	ntinue on separate	sheet if necessary				
SIGNATURE	Zomila-	·		D.	ATE	January 5, 2025	

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	eer Employees)?	☐ YES ✓ NO						
		If YES, give details:							
35.	a. Have you ever been found guilty of any administrative off	YES V NO							
			If YES, give details:						
	b. Have you been criminally charged before any court?		YES VO						
		If YES, give details:							
		Date Filed: Status of Case/s:							
36	Have you ever been convicted of any crime or violation of a	ny law decree ordinance or regulation							
30.	by any court or tribunal?	ny lan, assiss, siamanos si regulation	☐ YES ☑ NO If YES, give details:						
		= 5, 9.10 45465.							
37.	Have you ever been separated from the service in any of th	e following modes: resignation,	YES V NO						
	retirement, dropped from the rolls, dismissal, termination, er out (abolition) in the public or private sector?	nd of term, finished contract or phased	If YES, give details:						
38.	a. Have you ever been a candidate in a national or local ele	ction held within the last year (except							
	Barangay election)?		If YES, give details:						
	b. Have you resigned from the government service during the election to promote/actively campaign for a national or local	☐ 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	nna Carta for Disabled Persons (RA	·						
	7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972)								
a.	Are you a member of any indigenous group?		☐ YES ✓ NO						
h	Assume a second with disability O		If YES, please specify:						
b.	Are you a person with disability?		☐ YES ☑ NO If YES, please specify ID No:						
C.	Are you a solo parent?								
			If YES, please specify ID No:						
41.	REFERENCES (Person not related by consanguinity or affinity to applicant	/appointee)							
	NAME	ADDRESS	TEL. NO.						
	IAN DAVE B. CUSTODIO	VISAYAS STATE UNIVERSITY, BAYBAY CITY, LEYTE	053 563 7064 local 1121						
	BABYLYN C. LAMBERT	VISAYAS STATE UNIVERSITY, BAYBAY	0919 063 5211	00					
		CITY, LEYTE	<u> </u>	<u> </u>					
12	I declare under oath that I have personally accomplished	this Dorsonal Data Choot which is a tr	us sorrest and						
42.	complete statement pursuant to the provisions of pertine								
	Philippines. I authorize the agency head/authorized represe	•							
	I agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me.								
0	PLEASE INDICATE ID Number and Date of	>penile-	,						
	overnment Issued ID: PHILSYS ID								
l H	/License/Passport No.: 6207-8159-0148-7341								
۱H	ate/Place of Issuance: 5/7/2023 / ORMOC CITY	ox)							
L	Date Accomplished Right Thumbmark								
SUBSCRIBED AND SWORN to before me this, affiant exhibiting his/her validly issued government ID as indicated above.									
	Г								
1		h							