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. Print legibly. Tick appropriate boxes (and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. 1, CS ID No. (Do not fill up. For CSC use only 2 SURNAME **PALERMO** NAME EXTENSION (JR., SR) FIRST NAME **MARLITO** MIDDLE NAME **GOLIAT** 3. DATE OF BIRTH **AUGUST 07, 1995** 16 CITIZENSHIP ✓ Filipino (mm/dd/yyyy) ☐ Dual Citizenship by birth by naturalization 4. PLACE OF BIRTH **BAYBAY CITY** If holder of dual citizenship, Pls. indicate country: please indicate the details. 5. SEX ✓ Male ☐ Female 4 ✓ Single ☐ Married 17. RESIDENTIAL ADDRESS 6 CIVIL STATUS House/Block/Lot No. ☐ Widowed☐ Separated Street CANDADAM Other/s: Subdivision/Village Barangay BAYBAY LEYTE 7. HEIGHT (m) 1.63 City/Municipality Province 8. WEIGHT (kg) 64 ZIP CODE 6521 18. PERMANENT ADDRESS 9. BLOOD TYPE 0+ House/Block/Lot No. Street CANDADAM 10. GSIS ID NO. N/A Subdivision/Village Barangay **BAYBAY** LEYTE 11. PAG-IBIG ID NO. 12-120532886-8 City/Municipality Province 12. PHILHEALTH NO. 12-025473988-0 ZIP CODE 6521 13. SSS NO. 06-4012958-7 19. TELEPHONE NO 14. TIN NO. 340-264-619 20, MOBILE NO. 09657026533 09513650704 15 AGENCY EMPLOYEE NO N/Δ 21. E-MAIL ADDRESS (if any) marlitopalermo07@gmail.com amile y sparok gradund 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) N/Δ FIRST NAME N/A N/A MIDDLE NAME N/A OCCUPATION N/A EMPLOYER/BUSINESS NAME N/A BUSINESS ADDRESS N/A TELEPHONE NO. N/A 24. FATHER'S SURNAME **PALERMO** NAME EXTENSION (JR., SR) FIRST NAME CARLITO MIDDLE NAME MAZO MARLYN A. GOLIAT MOTHER'S MAIDEN NAME **PALERMO** SURNAME FIRST NAME MARLYN MIDDLE NAME **GOLIAT** (Continue on separate sheet if necessary) II. EDIJOATIONAL BARKGROUND LEVEL/ UNITS 26. NAME OF SCHOOL PERIOD OF ATTENDANCE SCHOLARSHIP/ BASIC EDUCATION/DEGREE/COURSE LEVEL CADEMIC HONOR (Write in full) (Write in full) GRADUATED EARNED RECEIVED From То HIPUSNGO ELEMENTARY **ELEMENTARY** PRIMARY EDUCATION 2003 2008 GRADUATED 2008 N/A SCHOOL BAYBAY NATIONAL HIGH SECONDARY HIGH SCHOOL 2009 2012 GRADUATED 2012 N/A SCHOOL VOCATIONAL / N/A N/A N/A N/A N/A N/A N/A TRADE COURSE BACHELOR OF SCIENCE IN COLLEGE VISAYAS STATE UNIVERSITY 2013 2017 GRADUATED 2017 N/A SAINT MICHAEL COLLEGE OF BACHELOR IN SECONDARY **GRADUATE STUDIES** Jun-18 Oct-18 18 units 2018 N/A HINDANG, LEYTE, INC. **EDUCATION** (Continue on separate sheet if necessary) SIGNATURE DATE 4-4-22

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				DATE OF				LICENSE (if a	applicable)
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE RATING (If Applicabl)			RATING (If Applicable)	DATE OF EXAMINATION / PLACE OF EXAMINATION / CONFERME CONFERMENT		ERMENT	NUMBER	Date of Validity	
CAREER CIVIL SERVICE PROFESSIONAL			80.04	August 12, 2018	TACLOBAN CITY			N/A	N/A
EXAMINATION					1,102021110111				
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	8. INCLUSIVE DATES (mm/dd/yyyy) POSITION TITLE (Write in full/Do not abbrevi			DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)		MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/N)
1/3/2022	Present	ADMINISTRATIVE A	ASSISTANT I	Department of Public Works and Highways- LEYTE 5th DEO - FINANCE SECTION		17,179.00	7	Permanent	Υ
10/01/2019	12/31/2021	BOOKBINE	DER I	Department of Public Works and Highways- LEYTE 5th DEO - FINANCE SECTION		11,199.00	2	Job Order	N
04/02/2018	08/31/2018	ADMINISTRAT	VE AIDE	VISAYAS STATE UNIVERSITY		6,600.00	N/A	Job Order	N
04/09/2017	04/12/2017	LTO LIAIS	ON	DES	DES Marketing		N/A	Probationary	N
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SIGNATURE			(Continue on separate sheet if necessary) DATE			4-6-22			
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Government Corporation O4/21/2021	National Government Agencies	04/27/2021	04/27/2021	4		ENGINEERING OFFICE		
No. III No. II		04/27/2021	04/27/2021	4	Technical			
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THE ELIGIBLE PROTECTION OF THE	SIGNA I UKE	DA:			TE 4- 4- 22 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?		E			
		YES	☑ NO			
	b. within the fourth degree (for Local Government Unit - Care	er Employees)?	YES	☑ NO		
		If YES, give detai	ils:			
35	a. Have you ever been found guilty of any administrative offer	nse?				
	and the state of t	1100	YES give detail	☑ NO		
			If YES, give detai	iio.		
	b. Have you been criminally charged before any court?	YES	☑ NO			
		If YES, give details:				
			Date Filed: Status of Case/s:			
26	Have you ever been convicted of any crime or violation of any	v law decree ordinance or				
30.	regulation by any court or tribunal?	y law, decree, ordinance or	YES	☑ NO		
			If YES, give detai	IIS:		
37.	Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, end		YES	☑ NO		
	phased out (abolition) in the public or private sector?	or torm, inneriod contract of	If YES, give details:			
38.	a. Have you ever been a candidate in a national or local elect	tion held within the last year		[] NO		
	(except Barangay election)?	· · · · · · · · · · · · · · · · · · ·	☐ YES ☑ NO If YES, give details:			
	b. Have you resigned from the government service during the	e three (3)-month period before	YES			
	the last election to promote/actively campaign for a national o		☐ YES ☑ NO If YES, give details:			
39.	Have you acquired the status of an immigrant or permanent re	esident of another country?				
		,	YES If YES, give detail	ls (country):		
			ii 120, give detail	is (country).		
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magr	na Carta for Disabled Persons (RA				
	7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), p					
a.	Are you a member of any indigenous group?		☐ YES	☑ NO		
b.	Are you a parson with disability?		If YES, please specit			
J.	Are you a person with disability?		☐ YES If YES, please specit	fv 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 la	appointee)				
	NAME	ADDRESS	TEL. NO.			
	WENYLOU R. LAGUNA - CHIEF ACCOUNTANT	BAYBAY CITY, LEYTE	9399344308			
	MERZETH BLAIRE B OLLERAS - ACCOUNTANT II	BAYBAY CITY, LEYTE	9171138802			
		,				
40						
42.	I declare under oath that I have personally accomplished this complete statement pursuant to the provisions of pertinent I					
	Philippines. I authorize the agency head/authorized represen			MARLITO G. PALERMO		
	I agree that any misrepresentation made in this docume	nt and its attachments shall cau	ise the filing of	PROTO		
	administrative/criminal case/s against me.					
	Normont Insued ID -					
	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) LEASE INDICATE ID Number and Date of Issuance					
	overnment Issued ID: DRIVERS LICENSE	(N)	_~			
ID/	License/Passport No.: H12-17-001844	M	U			
┢		Signature (Sign inside the Sign in Sign inside the Sign inside the Sign inside the Sign inside the Sign in Sig	ne DOX)			
Da	te/Place of Issuance: 07/24/2017	Date Accomplishe	d	Right Thumbmark		
SUR	SCRIBED AND SWORN to before me this	officent exhibiting his/her valid	lly issued government II	D on indicated above		
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