CS Form No. 212 Revised 2017

PERSONAL DATA SHEET

WARNING: Any misinterpretation made in the Personal Data Sheet and the Work Experience Sheet shall cause the filing of administrative/criminal case/s against the person concerned.										
READ THE ATTACHED GUIDE	EUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM. 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)								For CSC use only)	
I. PERSONAL INFORMATION		set ii necessary. indicate	NA II Hot applic	dole. DO NOT A	OBINE VIATE.		1. 00 15 110.		(20 1101 1111 442 1	o. 000 aoo oy,
2. SURNAME	RODRIGUEZ									
FIRST NAME	GERRY NAME EXTENSION (JR., SR)									
MIDDLE NAME										
3. DATE OF BIRTH (mm/dd/yyyy)	02/02	16. CITIZENSH	IP		☑ Filipino ☐ Dual Citizenship ☐ by birth ☐			☐ by naturaliz	ation	
4. PLACE OF BIRTH	Bayba	If ho	older of dual citizer	iship,			Pls. indicate country:			
5. SEX	✓ Male ☐ Female		ple	ease indicate the de	tails.	Philippines		•		
6 CIVIL STATUS	☑ Single ☐ Married ☐ Widowed ☐ Separated ☐ Other/s:		17. RESIDENTI	AL ADDRESS		se/Block/Lot No		\$	Street HILUSIG	
7. HEIGHT (m)		.6			Subdivision/Village MAHAPALG			Barangay LEYTE		
8. WEIGHT (kg)	6		7IP	CODE	City/Municipality		Province			
		<u> </u>	ZII	CODE				6512 SITIO TAGPILI		
9. BLOOD TYPE		, 			Hous	se/Block/Lot No	0.	Street HILUSIG		
10. GSIS ID NO.					Sub	odivision/Village			Barangay	
11. PAG-IBIG ID NO.	121312	849213			Cit	MAHAPL ty/Municipality	AG	LEYTE Province		
12. PHILHEALTH NO.	01-2551	93358-8	ZIP	CODE		6512				
13. SSS NO.			19. TELEPHON	IE NO.						
14. TIN NO.	617-119-6	20. MOBILE NO).			09				
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADI	ORESS (if any)		geri	ryrodrigue	l.com			
II. FAMILY BACKGROUND										
22. SPOUSE'S SURNAME				23. NAME of CHI	HILDREN (Write full name and list all)			DATE OF BIRT	TH (mm/dd/yyyy)	
FIRST NAME		NAME EXTENSION	ON (JR., SR)							
MIDDLE NAME										
OCCUPATION										
EMPLOYER/BUSINESS NAME										
BUSINESS ADDRESS										
TELEPHONE NO.										
24. FATHER'S SURNAME	SALIDO	NAME EXTENSION	ON (JR., SR)							
FIRST NAME MIDDLE NAME	JESSIE SARCO									
25. MOTHER'S MAIDEN NAME	SARCO									
SURNAME	RODRIGUEZ									
FIRST NAME	RODRIGUEZ LYDIA									
MIDDLE NAME	DUPLACO (Continue on separate sheet if necessary)									
III. EDUCATIONAL BACKGE	ROUND									
26. LEVEL	NAME OF SCHOOL (Write in full)		BASIC ED	BASIC EDUCATION/DEGREE/COURSE (Write in full)		PERIOD OF A	ATTENDANCE To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
ELEMENTARY	HILUSIG ELEMENTARY SCHOOL					07/04/2007	03/25/2012	Grade 6	2012	3rd Honorable Mention
SECONDARY	MAHAPLAG NATIONAL HIGH SCHOOL- UPPER					07/12/2012	01/06/2018	Grdae 12	2018	With Honor
VOCATIONAL / TRADE COURSE										
COLLEGE	VISAYAS STATE UNIVERSITY					08/05/2018	08/12/2022	Fourth Year	2022	Cumlaude
GRADUATE STUDIES										
SIGNATURE			Continue on sepa	arate sheet if nece		une 05, 2023		CS ECIDIM 241	2 (Revised 2017),	Page 1 of 4
SIGNATURE				DATE	J	une 00, 2023		US FURIVI 212	. (110vi36u 2017),	i ayo i ui 4

IV. CIVIL SE	ERVICE ELIG	IBILITY							
27. CAREE	ER SERVICE/ RA 1	1080 (BOARD/ BAR) UNDER	DATING	DATE OF				LICENSE (if a	pplicable)
SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE RATING (If Applicable)		EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT			NUMBER	Date of Validity		
HONOR GRADUATE ELIGIBILTY (P.D. 907) NA		05/17/2023	PALO	, LEYTE		NA	NA		
			(Con	tinue on separate sheet	if necessary)				
	XPERIENCE		t work) Doscription	of duties should b	o indicated in the attache	d Work Eve	rioneo shoot		
	ISIVE DATES	nt. Start from your recent	- TAULA - 1551011011011	or duties silouid D	e-muicateu iii tile attache	W WOLK -X OL	SALARY/ JOB/ PAY		
(mr	m/dd/yyyy)	POSITION TI (Write in full/Do not		DEPARTMENT / AG (Write in ful	MONTHLY SALARY	GRADE (if applicable)& STEP (Format "00-0")/	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)	
From 09/28/2022	To 02/01/2023	PART-TIME INST	TRUCTOR	VISAYAS STATE UN	13,000-14,500	02-6	CONTRACTUAL	Y	
02/15/2023	06/23/2023	PART-TIME INST	TRUCTOR	VISAYAS STATE UN	D BEHAVIORAL SCIENCES IVERSITY-DEPARTMENT OF D BEHAVIORAL SCIENCES	13,000-14,500		CONTRACTUAL	Y
		_							
							_		
(Continue on separate sheet if necessary)									
SIGNATURE DATE JUNE 05, 2023 CS FORM 212 (Revised 2017), Page 2 of 4									

VI. VOLUNTARY WORK OR INVOLVEMENT	IN CIVIC / NON-GOVERNMENT	/PEOPLE/V	OLUNTARY (ORGANIZATIO	DN/S		
29. NAME & ADDRESS OF OF (Write in full)			/E DATES d/yyyy) To	NUMBER OF HOURS	OF HOURS POSITION / NATURE OF WORK		
Youth for Christ					Religious Orga	anization	
	(Cont	inue on separate s	heet if necessary)				
VII. LEARNING AND DEVELOPMENT (L&D)							
(Start from the most recent L&D/training program and include	e only the relevant L&D/training taken for th	T T	s for Division Chie	f/Executive/Manag			
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)			DANCE d/yyyy)	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)		CONDUCTED/ SPONSORED BY (Write in full)
ANNUAL STUDENT TEACHERS	CONVENTION	From 3/26/2022	3/26/2022	8.0	TECHNICAL	PHILIPPII	NE ASSOCIATION FOR TEACHERTS AND EDUCATORS
INSTRUCTIONAL RESOURCES IN R	REMOTE LEARNING	11/19/2021	11/19/2021	3.0	TECHNICAL		STATE UNIVERSITY- DEPARTMENT OF TEACHER EDUCATION
	(Cont	inue on separate s	heet if necessary)				
VIII. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES	32. NON-	-ACADEMIC DISTIN (Write	ICTIONS / RECOG e in full)	NITION		33. MEM	BERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
Interpersonal Skills							
Effective Time Management							
Teamwork and Collaboration							
	(Cont	inue on separate s	heet if necessary)				
SIGNATURE			DATE	J	UNE 05, 2023		CS FORM 212 (Revised 2017), Page 3 of 4

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		NO						
35.	a. Have you ever been found guilty of any administrative of	ffense?	☐ 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 by any court or tribunal?	any law, decree, ordinance or regulation	☐ YES ☑ NO If YES, give details: —————						
37.	Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, export (abolition) in the public or private sector?	end of term, finished contract or phased	☐ YES ☑ NO If YES, give details:						
38.	a. Have you ever been a candidate in a national or local elements are a section.	ection held within the last year (except	☐ YES ☑ NO If YES, give details:						
	b. Have you resigned from the government service during talest election to promote/actively campaign for a national or		☐ YES ☑ NO If YES, give details:						
39.	Have you acquired the status of an immigrant or permanen	☐ YES ☑ NO If YES, give details (country): ————————————————————————————————————							
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma	agna 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 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?		☐ YES ☑ NO If YES. please specify ID No:						
41.	REFERENCES (Person not related by consanguinity or affinity to applicant	nt /appointee)							
NAM	E	ADDRESS	TEL. NO.						
Dr.	Noel Ayoc	Palanogan, Mahaplag Leyte	9363169000						
Jay	C. Bansale	MacArthur Leyte	9489762630	600					
Ber	ndine April Anatacio	Hilongos Leyte	9325923533						
42.	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.								
	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) LEASE INDICATE ID Number and Date of Issuance								
ΙH	overnment Issued ID:	•							
	/License/Passport No.:								
D	ate/Place of Issuance:		Right Thumbmark						
SUB	SUBSCRIBED AND SWORN to before me this, affiant exhibiting his/her validly issued government ID as indicated above.								
	Per		sc						
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