

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 concerned.

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)

I. PERSONAL INFORMATION


2. SURNAME	BAHANDI						
FIRST NAME	JOHN					NAME EXTENSION (JR., SR)	
MIDDLE NAME	SOYMAN						
3. DATE OF BIRTH (mm/dd/yyyy)	1/8/1998		16. CITIZENSHIP  If holder of dual citizenship, please indicate the details.		<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:		
4. PLACE OF BIRTH							
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female						
6 CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:		17. RESIDENTIAL ADDRESS  ZIP CODE		ZONE 4		
7. HEIGHT (m)	1.55				House/Block/Lot No. Street		
8. WEIGHT (kg)	51				GUADALUPE		
9. BLOOD TYPE					Subdivision/Village Barangay		
10. GSIS ID NO.					BAYBAY LEYTE		
11. PAG-IBIG ID NO.	121292273819				City/Municipality Province		
12. PHILHEALTH NO.	13-025577788-3		ZIP CODE		6318		
13. SSS NO.			19. TELEPHONE NO.				
14. TIN NO.	604-220-195-000		20. MOBILE NO.		09983372610		
15. AGENCY EMPLOYEE NO.			21. E-MAIL ADDRESS (if any)		<a href="mailto:bahandijohn17@gmail.com">bahandijohn17@gmail.com</a>		

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)
FIRST NAME	N/A	NAME EXTENSION (JR., SR)	N/A	N/A
MIDDLE NAME	N/A			N/A
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME				
FIRST NAME		NAME EXTENSION (JR., SR)		
MIDDLE NAME				
25. MOTHER'S MAIDEN NAME	EPIFANIA SOYMAN BAHANDI			
SURNAME	BAHANDI			
FIRST NAME	EPIFANIA			
MIDDLE NAME	SOYMAN		(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		HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	CABACNITAN ELEM. SCHOOL		6/6/2005	5/3/2011		2011	1ST HONORABLE MENTION

SECONDARY	QUEZON NATIONAL HIGHSCHOOL		6/6/2011	6/3/2015		2015	5TH HONORABLE MENTION
VOCATIONAL / TRADE COURSE	N/A						
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN AGRICULTURE (PLANT BREEDING)	5/6/2015	06/22/2020		2020	N/A
GRADUATE STUDIES	N/A						
(Continue on separate sheet if necessary)							
SIGNATURE			DATE		08/18/2022		

#### IV. CIVIL SERVICE ELIGIBILITY

[illegible]

**(Continue on separate sheet if necessary)**

## V. WORK EXPERIENCE

*(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.*

[illegible]


<i>(Continue on separate sheet if necessary)</i>							
<b>SIGNATURE</b>				<b>DATE</b>	08/18/2022		

[illegible]

34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to the chief of bureau or office or to the person who has immediate supervision over you in the Office, Bureau or Department where you will be appointed, a. within the third degree? b. within the fourth degree (for Local Government Unit - Career Employees)?	<div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details:<div></div></div></div>												
35. a. Have you ever been found guilty of any administrative offense?  b. Have you been criminally charged before any court?	<div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details:<div></div></div></div> <div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details:<div>Date Filed:<div></div>Status of Case/s:<div></div></div></div></div>												
36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?	<div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details:<div></div></div></div>												
37. Have you ever been separated from the service in any of the following modes: resignation, retirement, dropped from the rolls, dismissal, termination, end of term, finished contract or phased out (abolition) in the public or private sector?	<div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details:<div></div></div></div>												
38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?  b. Have you resigned from the government service during the three (3)-month period before the last election to promote/actively campaign for a national or local candidate?	<div><div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details:<div></div></div></div><div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details:<div></div></div></div></div>												
39. Have you acquired the status of an immigrant or permanent resident of another country?	<div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details (country):<div></div></div></div>												
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 7277); and (c) Solo Parents Welfare Act of 2000 (RA 6972), please answer the following items: a. Are you a member of any indigenous group?  b. Are you a person with disability?  c. Are you a solo parent?	<div><div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, please specify:<div></div></div></div><div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, please specify ID No: <div></div></div></div><div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, please specify ID No: <div></div></div></div></div>												
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)	<table><tr><td>NAME</td><td>ADDRESS</td><td>TEL. NO.</td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr></table> <div><div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div><div></div><div></div></div></div><div>PHOTO</div></div>	NAME	ADDRESS	TEL. NO.									
NAME	ADDRESS	TEL. NO.											
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.	<div><div><div><div><div>Government Issued ID (i.e. Passport, GDS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</div><div>Government Issued ID: PRC</div><div>ID/License/Passport No.: 0038452</div><div>Date/Place of Issuance: PRC ORMOC</div></div><div><div><div><div></div><div></div></div><div><div></div><div></div></div></div><div>Signature (Sign inside the box)</div><div>Date Accomplished08/18/2022</div></div><div><div></div><div>Right Thumbmark</div></div></div></div></div>												
SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above. <div><div></div><div>Person Administering Oath</div></div>													