CS Form No. 212 Revised 2017		PERS	ONAL DA	ATA SH	IEE	Т			
WARNING: Any misrepresent	ation made in the Person						minal case/s aga:	inst the perso	a concerned
READ THE ATTACHED GUIDE	TO FILLING OUT THE P	PERSONAL DATA SH	HEET (PDS) BEFORE ACCO	MPLISHING THE PD				7141 W	n sunaymus.
Print legibly. Tick appropriate boxe L. PERSONAL INCOMMAN	as () and use separate she	of if necessary, Indicate	e N/A if not applicable. DO NO	T ABBREVIATE,	Second St.	1. CS ID N	9.	(Do not	fill up. For CSC use onl
2. SURNAME	BARCOS		the state of the s		A STATE OF THE PARTY OF				
FIRST NAME	CERIACO			nya saasa ka ja araa kiri sa araa kiri sa araa sa araa kiri sa araa ka araa kiri sa araa kiri sa araa kiri sa	elarestación estren destruci	Unidate med analysis called the sale participal	JR.	-	
MIDDLE NAME	ALCASODA		Matter Service communication of the public of the communication of the c					-	
3 DATE OF BIRTH	O8-28-1990		16. CITIZENSHIP		T				
(mm/dd/yyyy)	O0-20-1999		16. CITIZENSHIP		☑ Filip	onic [☐ Dual Otizenship☐ by birth		
4. PLACE OF BIRTH	BAYBAY CITY, LEYTE	1	If holder of dual				Pls. indicate	by naturalize country:	ration
5. SEX	☑ Male	☐ Female	please Indicate	the details.					•
6 CIVIL STATUS	Single	☐ Married	17. RESIDENTIAL ADDRESS	T	14-146			ZONE 3, NANG	JKA
	☐ Widowed ☐ Other/s:	☐ Separated			Block/Lat No.			Street GUADAL UP	E
7. HEIGHT (m)	1.7				vision/Village 'BAY CITY			Barangay LEYTE	
8. WEIGHT (kg)	72		ZIP CODE	City/M	Municipality HILIPPINES	-		Province	
9. BLOOD TYPE	0+		ZIP CODE 18. PERMANENT ADDRESS	002171	IILIPPINES			ZONE 3, NANG	
	0+	-		House/E	Block/Lot No.			Street	
10. GSIS ID NO.				Subdivi	rision/Village			GUADAL UPE Barangay	ſ
11. PAG-IBIG ID NO.	1212-0381-5987			City/N	BAYBAY C Municipality	ITY		LEYTE Province	
12. PHILHEALTH NO.	13-202073826-3		ZIP CODE		6521 PHILIP	PINES			
13. SSS NO.			19. TELEPHONE NO.						
14. TIN NO.	272-838-030-000		20. MOBILE NO.	09203598346					
5. AGENCY EMPLOYEE NO.			21. E-MAIL ADDRESS (if any)	ceriacobarcos9	10@gma	il.com			
FAMILY BACKGROUND		TO THE STATE OF		是《经济人》					M 127
2. SPOUSE'S SURNAME	BARCOS		NAME EXTENSION (JR., SR)	23. NAME of CHILDREN		me and list all)		DATE OF B	IRTH (mm/dd/yyyy)
FIRST NAME MIDDLE NAME	ROSIT		Print Extension (5.5)	GRAYSON JOHN AI	BANERA			06	-19-2020
OCCUPATION		HOUSE WIFE							
EMPLOYER/BUSINESS NAME		HUUSE WILL						-	
BUSINESS ADDRESS									
TELEPHONE NO.								-	
4. FATHER'S SURNAME								-	
FIRST NAME			Γ					-	
MIDDLE NAME									
5.									
SURNAME	ABANERA	-						-	
	GILNA								
	RABINO				(Cor	ntinue on sept	arate sheet if necessi	aryl	
I. EDUCATIONAL BACKGR	ROUND						47 (3)		Marine Con
B. LEVEL	NAME OF SC (Write in fu		BASIC EDUCATION/DEC			ATTENDANCE	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
ELEMENTARY	GUADALUE ELEMEN	ITARY SCHOOL			1997	2003		2003	
SECONDARY	BAYBAY NATIONAL	HIGH SCHOOL			2003	2007	HIGH SCHOOL	2007	
VOCATIONAL / TRADE COURSE							GRADUATE		
COLLEGE									
GRADUATE STUDIES									
SIGNATURE	~	シ		T	DA	ITE	10	-10-	2023

	ERVIGERER			第四分尺,至于 书。			學以外國		
 CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE 		RATING	DATE OF EXAMINATION /	ATION / CONFE	RMENT	LICENSE (if applicable)			
BARANGAY ELIGIBILITY / DRIVER'S LICENSE			(If Applicable)	CONFERMENT		THE		NUMBER	Date of Validity
									ļ
			(0	ontinue on separate she	et if necessary)				
	EXPERIENCE rate employme	nt. Start from your recen	nt work) Descriptio	n of duties should l	he indicated in the attack	and Work Ev	norionea chas		
28. INCLU	JSIVE DATES m/dd/yyyy) To	POSITION T (Write in full/Do not	TITLE	DEPARTMENT / AGI	ENCY / OFFICE / COMPANY I/Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format *00-0")/	STATUS OF APPOINTMENT	GOVT SERVICE (Y/N)
09/06/2016	09/08/2023	LABORE	:P	DEPARTMENT	OF FORESTRY AND	11220	INCREMENT	JOB ORDER	, , , ,
01/16/2009	08/17/2016	BAKEF			ENTAL SCIENCE IEMADE BUKO PIE	5000		JOB ORDER	
				TATA O TO III	EMADE BONOTIE				
				60,000					

		-							
rate sheet if nece									
SIGNA	TURE				DATE		10-	10-202	3
2 of 4									

VE. VOLUNTARY WORK OR INVOLVEMEN	TIN CIVIC / NUN-GOVERNMEN!	A STATE OF THE STA	CUNIARY	URGANIERI			2 是一个一个一个一个	
29. NAME & ADDRESS OF ORGANIZATION (Write in N#)		INCLUSE	VE DATES Id/yyyy) To	NUMBER OF HOURS		POSITION / NATURE OF WORK		
		rion	10		Management (Management)			
	and the second of the second o			A CONTRACTOR OF THE PARTY OF TH				
				-				
					-	-		
VIL LEARNING AND DEVELOPMENT (L&C		tinue on separate ROGRAMS A			10000			
30. TITLE OF LEARNING AND DEVELOPMENT IN (Write in fu		ATTEN	DATES OF DANCE d/yyyy)	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)		CONDUCTED/ SPONSORED BY (Write in full)	
CFES STRATEGIC PLANNING WORKSHOP	•	11011	03-24-2017	8 hrs	PARTICIPANT		GE OF FORESTRY & NMENTAL SCIENCE	
NATIONAL YOUTH CONFERENCE ON CLI MITIGATION, DISASTER RISK REDUCTION		11-20-2019	11-22- 2019	24 hrs	PARTICIPANT	R	EGIONAL CLIMATE CHANGE SEARCH AND DEVELOPMENT	
MITIGATION, DISASTER RISK REDUCTION	AND RESILENCE					- 132	JEANON AND DETERM MENT	
10	A 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							

	(Contin	nue en separate si	neet if necessary					
VIII. OTHER INFORMATION	Contract							
31. SPECIAL SKILLS and HOBBIES	32. NON-A	CADEMIC DISTING		ITION		33. MEA	IBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
CARPENTER							KARANCHO	
DRIVER								
BAKER		i.						
WELDER								
SIGNATURE	(Contin	ue on separate sh	eet if necessary)	0.4	7E		10-110-0-00	
SIGNATURE				DA	IE .		10-10-2023	

34,	Are you related by consanguinity or affinity to the appointin chief of bureau or office or to the person who has immedia 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	☐ YES If YES, give de	☑ NO etails:				
35.	a. Have you ever been found guilty of any administrative of	ffense?	YES If YES, give del	☑ NO etails:			
	b. Have you been criminally charged before any court?		☐ YES If YES, give det Date Filet Status of Case/s	od.			
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 If YES, give det	☑ NO tails:			
	Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, e out (abolition) in the public or private sector?	end of term, finished contract or phased	YES If YES, give deta	☑ NO tails:			
38.	Barangay election)?	201	☐ YES If YES, give de				
	 Have you resigned from the government service during the election to promote/actively campaign for a national or local 	al candidate?	☐ YES ☑ NO If YES, give details:				
39.	Have you acquired the status of an immigrant or permanent	it resident of another country?	☐ YES If YES, give deta	☑ NO tails (country):			
a. b.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mar 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), Are you a member of any indigenous group? Are you a person with disability? Are you a solo parent?	☐ YES If YES, please spec ☐ YES If YES, please spec ☐ YES If YES, please spec ☐ YES	✓ NO cify ID No: ✓ NO				
41.	REFERENCES (Person not related by consanguinity or affinity to applicant		II ILO, Diodoc J.	AIV ID NO.			
	NAME	ADDRESS	TEL. NO.	1			
_	GILNA R. ABANERA	BRGY. GUADALUPE BAYBAY CITY, LEYTE	09203598346				
	I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertine Philippines. I authorize the agency head/authorized repret I agree that any misrepresentation made in this doct administrative/criminal case/s against me.	ent laws, rules and regulations of the R resentative to verify/validate the contents	Republic of the stated herein.	РНОТО			
	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) LEASE INDICATE ID Number and Date of Issuance						
	overnment Issued ID: Driver's License	- in					
IDA	License/Passport No.: H12-12-001740	x)					
Date	te/Place of Issuance: 2022/03/07	Signature (Signative by box	-	High Thumbmark			
	SUBSCRIBED AND SWORN to before me this	, affiant exhibitin	g his/her validly issue	ed government ID as indicated above.			
		Person Administering Oath					
	Maria Cara Cara Cara Cara Cara Cara Cara						