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 () a 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 FERNANDEZ NAME EXTENSION (JR., SR) JR FIRST NAME DOMINGO MIDDLE NAME POSAS 3. DATE OF BIRTH 16. CITIZENSHIP Filipino Dual Citizenship 07/15/1982 (mm/dd/vvvv) ☐ by birth by naturalization BAYBAY CITY, LEYTE If holder of dual citizenship, Pls. indicate country: 4. PLACE OF BIRTH please indicate the details. ☐ Female Male 5. SEX ☐ Single ✓ Married 17 RESIDENTIAL ADDRESS 6 CIVIL STATUS House/Black/Lat No ☐ Widowed ☐ Separated **PANGASUGAN** Other/s: Subdivision/Village Barangay BAYBAY CITY LEYTE 7. HEIGHT (m) 1.80 City/Municipality Province 6521 ZIP CODE 8. WEIGHT (kg) 80 18 PERMANENT ADDRESS 9. BLOOD TYPE "O+" House/Block/Lot No Street PANGASUGAN N/A 10. GSIS ID NO Subdivision/Village Barangay BAYBAY CITY LEYTE 11. PAG-IBIG ID NO. 1080-0187-2017 City/Municipality 6521 02-050344689-9 ZIP CODE 12 PHILHEALTH NO N/A 13. SSS NO. 33-8337395-6 19. TELEPHONE NO 09673123814/09121160454 253-089-597 20. MOBILE NO. 14 TIN NO 21 F-MAIL ADDRESS (if any) ihunicsfernandez19@gmail.com 15. AGENCY EMPLOYEE NO. N/A FAMILY BACKGROUND DATE OF BIRTH (mm/dd/yyyy) 23. NAME of CHILDREN (Write full name and list all) 22. SPOUSE'S SURNAME **FERNANDEZ** NAME EXTENSION (JR., SR) SAINT IZA D. FERNANDEZ 01/07/2007 AIZA FIRST NAME MIDDLE NAME DEGUZMAN LIANE D. FERNANDEZ 03/14/2009 04/10/2013 N/A KENNETH D. FERNANDEZ OCCUPATION 10/16/2014 EMPLOYER/BUSINESS NAME N/A AIZHYL D. FERNANDEZ N/A BUSINESS ADDRESS TELEPHONE NO. N/A FERNANDEZ 24. FATHER'S SURNAME NAME EXTENSION (JR., SR) FIRST NAME DOMINGO (Deceased) MIDDLE NAME CERNA 25. MOTHER'S MAIDEN NAME MANAGBANAG **FERNANDEZ** SURNAME FIRST NAME **DOLORES** (Deceased) POSAS (Continue on separate sheet if necessary) MIDDLE NAME SCHOLARSHIP PERIOD OF ATTENDANCE HIGHEST LEVEL ACADEMIC HONORS NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE UNITS EARNED LEVEL GRADUATED (Write in full) (Write in full) (if not graduated) RECEIVED From To PANGASUGAN ELEMENTARY SCHOOL ELEMENTARY 1988 1994 N/A 1994 N/A ELEMENTARY **BUNGA NATIONAL HIGH SCHOOL** HIGH SCHOOL 1994 1998 N/A 1998 N/A SECONDARY VOCATIONAL / N/A N/A N/A N/A N/A N/A N/A TRADE COURSE N/A N/A N/A COLLEGE N/A N/A MIA N/A GRADUATE STUDIES 11-17-23 DATE SIGNATURE

IV. CIVIL S	ERVICE ELIGIBILI	ITY							
27			DATINO	DATE OF				LICENSE	(if applicable)
CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE			RATING (If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMIN	PLACE OF EXAMINATION / CONFERMENT		NUMBER	Date of Validity
DRIVER'S LICENSE			N/A	N/A	N/A			H12-13- 001432	07/15/2024
SECURITY GUARD			N/A	N/A	N/A			NCR- 0201291586	12/14/2023
				(Continue on separate	sheet if necessary)				
V. WORK I	EXPERIENCE vate employment. Si	tart from your recent wo	ork) Descri	iption of duties show	uld be indicated in the a	ttached Work Exp	perience s	heet.	
28.									
INCLUSIVE DATES (mm/dd/yyyy) POSITION TITLE (Write in full/Do not abbre		viate)	DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)		MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Formal "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOVT SERVICE (Y/ N)	
JAN 2022	FEB 2023	DRIVER		JRE TRUCKING ENTERPRISES		10,000.00	N/A	CONTRACTUAL	N
JAN 2017	JAN 2022	SECURITY GUAR	SD	KING ELEAZAR SECURITY & INVESTIGATION AGENCY, INC.		15,000.00	N/A	CONTRACTUAL	N
SEPT 2010	MAY 2016	DRIVER		CHING BEE TRAI	10,000.00	N/A	CONTRACTUAL	N	
AUG 2004	JAN 2010	SECURITY GUAR	SD	MEGA FORCE INTEGRATED SECURITY SERCIVES INCORPORATED		15,000.00	N/A	CONTRACTUAL	N
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	-								
	-								
				_					
		A.	10	(Continue on separate			1.		
SIG	NATURE		A.		DATE		11-1	1-23	evised 2017), Page 2 of

VI. VOLUNTARY WORK OR INVOLVEMENT	IN CIVIC / NON-GOVERN	IMENT / PEO	PLE / VOLUN	TARY ORGANI	ZATION/S		
29. NAME & ADDRESS OF ORGA (Write in full)	NIZATION	INCLUSIVE DATES (mm/dd/yyyy) From To		NUMBER OF HOURS	POSITION / NATURE OF WORK		
(write in full)							
N/A			N/A	N/A		N/A	
		_					
		-					
	(Continu	ue on separate sh	eet if necessary)	YT , Ti -			
		WWO DECOD	AMS ATTEMS				
VII. LEARNING AND DEVELOPMENT (L&D)	INTERVENTIONS/TRAIN	IING PROGR	AWS ATTENU	EU			
(Start from the most recent L&D training program and include	only the relevant L&D/training ta		ve (5) years for Divi		Managerial positi	ons)	
20		INCLUSIVE DATES OF ATTENDANCE		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full) Cougar Integrated Security Training	
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)			n/dd/vvvv)				
			То				
Refresher Training Course Class No. 09		03/03/2020	03/16/2020	56.0	Technichal	Center, Inc	
In-Service Enhancement Security Training Course Cla	03/04/2020	03/06/2020	24.0	Technichal	Cougar Integrated Security Training Center, Inc		
Gun Safety and Responsible Gun Ownership Seminar		03/14/2020	03/14/2020	8.0	Technichal	Ultimate Practical Shooting Gun Club, Inc	
			_				
			-				
				1			
		-	-				
	(Continu	ue on separate sh	eet if necessary)				
VIII. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION 33. ASSOCIATION/ORGANIZATION (Write in full)						
DRIVING	N/A					N/A	
PLAYING BASKETBALL							
	(Continu	ue on separate sh	eet if necessary)				
SIGNATURE	724			D	ATE	11-17-23	
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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 - Care	☐ YES ☑ NO If YES, give details:					
35.	a. Have you ever been found guilty of any administrative offe	☐ 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 an any court or tribunal?						
37.	Have you ever been separated from the service in any of the dropped from the rolls, dismissal, termination, end of term, fir in the public or private sector?	☐ YES ☑ NO If YES, give details:					
38.	a. Have you ever been a candidate in a national or local electron)?	☐ YES ☑ NO If YES, give details:					
	b. Have you resigned from the government service during the election to promote/actively campaign for a national or local of	☐ 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 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972),						
a.	Are you a member of any indigenous group?	☐ YES 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 is	appointee)					
	NAME	ADDRESS	TEL. NO.				
JIM	MY CABALLERO	BRGY. PANGASUGAN BAYBAY CITY, LEYTE	09127933140				
TIR	SO E. IGOT JR.	BRGY. PANGASUGAN BAYBAY CITY, LEYTE	09353021065				
42.	I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertine Philippines. I authorize the agency head/authorized represe agree that any misrepresentation made in this document administrative/criminal case/s against me.	ent laws, rules and regulations of the ntative to verify/validate the contents state	Republic of the ed herein.	РНОТО			
P	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						
ID	/License/Passport No.: H12-13-001432	Signature (Sign inside the b	ew)				
Di	ate/Place of Issuance: 07/23/2019		Right Thumbmark				
F	CURCORRED AND CHARRAS Lafers are this	Date Accomplished	a big/bar validh issuad sau	ernment ID as indirected above			
	SUBSCRIBED AND SWORN to before me this	Person Administering Oal		emment ID as indicated above.			