Revised 2017

## **PERSONAL DATA SHEET**

WARNING: Any misrepresentat concerned.					-		riminal case/s ag	ainst the pers	son
READ THE ATTACHED GUIDE To Print legibly. Tick appropriate boxes	and use separate sheet					1. CS ID No.		(Do not fill up. F	For CSC use only)
I. PERSONAL INFORMATION									
2. SURNAME	ORZALES								
FIRST NAME	JOY KRISTEL NAME EXTENSION (JR., SR)								
MIDDLE NAME	LOBRIGUITO								
DATE OF BIRTH     (mm/dd/yyyy)	03/27/1985 16. CITIZENSHIP					□ by naturaliz	ation		
4. PLACE OF BIRTH	MARIKINA	CITY	If holder of dual citizer	izenship, PIs. ir				ls. indicate country:	
5. SEX	☐ Male	✓ Female	please indicate the de	italis.					•
6 CIVIL STATUS	☐ Single ☐ Widowed ☐ Other/s:	☑ Married ☐ Separated	17. RESIDENTIAL ADDRESS	House/Block/Lot No. ARANETA CENTER, CUBAO SC		N. MALVAR ST.  Street  SOCORRO  Barangay			
7. HEIGHT (m)	1.52 m			QUEZON CITY			NCR		
8. WEIGHT (kg)	54		ZIP CODE	City/Municipality Province 1109			FIOVINCE		
9. BLOOD TYPE	B+		18. PERMANENT ADDRESS	MANHATTAN PARKWAY RES. TOWER 1		GE	GEN. MALVAR ST.		
10. GSIS ID NO.	N/A			ARANET	A CENTER, C	e/Block/Lot No. A CENTER, CUBAO		Street SOCORRO	
11. PAG-IBIG ID NO.	121058311	073		Subdivision/Village  QUEZON CITY			Barangay NCR		
12. PHILHEALTH NO.	030505733	3432	ZIP CODE	City/Municipality Province 1109					
13. SSS NO.	34-165374	10-7	19. TELEPHONE NO.	02-7621-4152					
14. TIN NO.	273-480-6	630	20. MOBILE NO.	639171461007					
15. AGENCY EMPLOYEE NO.	N/A		21. E-MAIL ADDRESS (if any)	jkorzales@gmail.com					
II. FAMILY BACKGROUND									
22. SPOUSE'S SURNAME		ORZALES		23. NAME of CHILDREN (Write full name and list all)				DATE OF BIRTH (mm/dd/yyyy)	
FIRST NAME	DANN DE	E	NAME EXTENSION (JR., SR)		KSANDRIA JEROME ORZALES			10/09/2010	
MIDDLE NAME	TORDILLO			JUAN JAIME KISMET ORZALES			12/03/2014		
OCCUPATION		IT PROFESSIONA	L	AEDA SICILIA IV ORZALES 04/02/2020				2/2020	
EMPLOYER/BUSINESS NAME	UN	IILEVER PHILIPPII	NES						
BUSINESS ADDRESS	BONIFACIO CO	RPORATE CENTE	R, BGC, TAGUIG						
TELEPHONE NO.		588-8888		†					
24. FATHER'S SURNAME		LOBRIGUITO							
FIRST NAME	JOHNNYFO	OUR	NAME EXTENSION (JR., SR)						
MIDDLE NAME		DIAZ		+					
25. MOTHER'S MAIDEN NAME									
SURNAME		MERCADO							
FIRST NAME		AIDA							
MIDDLE NAME	BUSTAMANTE			(Continue on separate sheet if necessary)					
III. EDUCATIONAL BACKGR									
26. LEVEL	NAME OF SCH		BASIC EDUCATION/DEGRE	E/COURSE	PERIOD OF A	ATTENDANCE	HIGHEST LEVEL/ UNITS EARNED	YEAR	SCHOLARSHIP/ ACADEMIC
	(Write in fu	ll)	(Write in full)		From	То	(if not graduated)	GRADUATED	HONORS RECEIVED
ELEMENTARY	MOTHER OF DIVINE PROV	/IDENCE SCHOOL	GRADE SCHOOL	GRADE SCHOOL		1998	N/A	1998	HONORABLE MENTION
SECONDARY	SECOND PHILIPPINE INTERI	NATIONAL SCHOOL	HIGH SCHOOL		2000	2002	N/A	2002	SALUTATORIA N
VOCATIONAL / TRADE COURSE	N/A		N/A		N/A	N/A	N/A	N/A	
COLLEGE	UNIVERSITY OF THE PHIL	IPPINES BAGUIO	BS SOCIAL SCIENCES (MAJ. EC POLITICAL SCIENC	•		2008	N/A	2008	
GRADUATE STUDIES	UNIVERSITY OF ASIA AM	ND THE PACIFIC	MASTER IN APPLIED BUSINES	S ECONOMICS	2019	PRESENT	39 units	N/A	
		(C	ontinue on separate sheet if nece	essary)				-	
SIGNATURE	9	(Keles			DA	TE		June 19, 2022	

IV CIVIL SE	ERVICE ELIG	IDII ITV							
			D. 7711.0	DATE OF				LICENSE (if a	oplicable)
	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE  BARANGAY ELIGIBILITY / DRIVER'S LICENSE  RATING (If Applicable)  RATING EXAMINATION / CONFERMENT CONFERMENT			RMENT	NUMBER	Date of Validity			
Career Service Professional Eligibility		84.6	04/25/2010	QUEZO	ON CITY		08-120490	N/A	
	DRIVER'S I	LICENSE	N/A	05/24/2019	QUEZO	N CITY		N02-10-001504	03/27/2024
			(Con	tinue on separate sheet	if nacassary)				
	XPERIENCE	nt. Start from your recen				ed Work Exp	erience sheet		
28. INCLU	ISIVE DATES						SALARY/ JOB/ PAY GRADE (if		GOV'T
From	m/dd/yyyy) To	POSITION TI (Write in full/Do not			ENCY / OFFICE / COMPANY /Do not abbreviate)	MONTHLY SALARY	GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	SERVICE (Y/N)
	PRESENT	AGRIBUSINESS SI	PECIALIST 2	UNIVERSITY OF A	ASIA AND THE PACIFIC	27000.00	N/A	REGULAR	N
01/10/2011	03/31/2017	RESEARCH AS	SISTANT	UNIVERSITY OF A	ASIA AND THE PACIFIC	25000.00	N/A	REGULAR	N
04/01/2017	04/21/2021	SALES AND MARKE	TING OFFICER	SBAJ	TRADING	7000.00	N/A	CONSULTANT	N
10/26/2009	04/01/2010	CUSTOMER INTERA	CTION AGENT	TELUS INTERNA	TIONAL PHILIPPINES	13000.00	N/A	REGULAR	N
07/13/2009	10/01/2009	SALES AG	ENT	STREAM GL	OBAL SERVICES	11000.00	N/A	REGULAR	N
01/01/2009	01/31/2012	FREELANCE	WRITER	ESS	ESSAYS.PH		N/A	FREELANCE	N
		-							
-									
			(Con	tinue on separate sheet	if necessary)				
SIGNA	SIGNATURE DATE June 19, 2022  CS FORM 212 (Revise			FORM 212 (Revised 2)	017). Page 2 of 4				

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S								
29. NAME & ADDRESS OF OF	OF ORGANIZATION INCLUSIVE DATES							
(Write in full)		(mm/dd/yyyy) From To		NUMBER OF HOURS	POSITION / NATURE OF WORK			
N/A			N/A	N/A	N/A			
	(Continue on separate sheet if necessary)							
VII. LEARNING AND DEVELOPMENT (L&D)	INTERVENTIONS/TRAINING P							
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)			DATES OF DANCE d/yyyy)	NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)		
English Writing for Professionals Course		From 02/15/2022	05/20/2022	32.0	TECHNICAL	UNIVERSITY OF ASIA AND THE PACIFIC		
Global Agribusiness Management and Entrepreneur	ship Conference 2021		11/19/2021	16.0	TECHNICAL	UP LOS BANOS		
Challenging the Change: Mitigating the Impact of Cl			11/12/2021	1.5	TECHNICAL	World Food Programme		
Climate Change Adaptation and Disaster Risk Manage			05/18/2019	35.0	TECHNICAL	UP LOS BANOS and SEARCA		
Applied Statistical Forecasting	g		07/05/2019	14.0	TECHNICAL	UP DILIMAN		
-			05/26/2018	40.0	TECHNICAL			
Digital Marketing Specialist Course		03/17/2018	05/26/2018	40.0	TECHNICAL	CIIT COLLEGE OF ARTS AND TECHNOLOGY		
	(Con	tinue on separate :	sheet if necessary					
VIII. OTHER INFORMATION								
31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)			NITION	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)			
PROFICIENT IN MICROSOFT OFFICE APPLICATIONS	N/A				N/A			
PROFICIENT IN GOOGLE WORKPLACE APPLICATIONS	<del> </del>							
DESIGNING AND LAYOUTING USING ADOBE	<del> </del>							
EVENT MANAGEMENT								
CREATIVE WRITING								
	(Continue on separate sheet if necessary)							
SIGNATURE	Joyler			Di	A <i>TE</i>	June 19, 2022		
	<u> </u>					CS FORM 212 (Revised 2017), Page 3 of 4		

<ul> <li>34. Are you related by consanguinity or affinity to the appointichief of bureau or office or to the person who has immedia Bureau or Department where you will be apppointed,</li> <li>a. within the third degree?</li> <li>b. within the fourth degree (for Local Government Unit - Call</li> </ul>	☐ YES ☑						
	If YES, give details:						
35. a. Have you ever been found guilty of any administrative of	☐ 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 by any court or tribunal?	☐ YES ☑ NO If YES, give details:						
37. Have you ever been separated from the service in any of retirement, dropped from the rolls, dismissal, termination, out (abolition) in the public or private sector?		☑ YES ☐ NO If YES, give details: Resignation due to pregnancy					
38. a. Have you ever been a candidate in a national or local e Barangay election)?	☐ YES ☑ NO If YES, give details:						
b. Have you resigned from the government service during 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 permane	☐ YES ☑ NO If YES, give details (country):						
<ul> <li>7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972)</li> <li>a. Are you a member of any indigenous group?</li> <li>b. Are you a person with disability?</li> <li>c. Are you a solo parent?</li> </ul>	☐ YES ☑ NO  If YES, please specify: ☐ YES ☑ NO  If YES, please specify ID No: ☐ YES ☑ NO  If YES ☑ NO  If YES. please specify ID No:						
41. REFERENCES (Person not related by consanguinity or affinity to applica	nt /appointee)						
NAME	ADDRESS	TEL. NO.					
SHEENA MARIE PALCONITE	CAGAYAN DE ORO CITY	9353850821					
NATACIA ANN ESGUERRA	MARIKINA CITY	9173148500	4				
ELLEN SORIANO	PASIG CITY	9175808808					
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.							
Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)  PLEASE INDICATE ID Number and Date of Issuance  Government Issued ID: LTO  ID/License/Passport No.: N02-10-001504  Date/Place of Issuance: QUEZON CITY	Signature (Sign inside the b 06/15/2022 Date Accomplished	ox)	Right Thumbmark				
SUBSCRIBED AND SWORN to before me this	ting his/her validly issued go	vernment ID as indicated above.					
SOBSCRIBED AND SWORM to before the this	Person Administering Oa		vomment id as indicated above.				