| CS Form No. 212 | | | | | | | | |
|--------------------------------|--|---|---------------------|--|-----------------|--|-------------------|------------------------------------|
| Revised 2017 | PERSO | NAL DAT | A SH | EET | Г | | | |
| concerned. | tion made in the Personal Data Sheet and the | | | | | riminal case/s ag | ainst the per | son |
| | TO FILLING OUT THE PERSONAL DATA SHE () and use separate sheet if necessary, Indicate N | | | PDS FORM | 1, CS ID No. | | (Do not fill up.) | For CSC use only) |
| L PERSONAL INFORMATIO | | | | | | | | |
| 2. SURNAME | FERNANDEZ | | | | | | | |
| FIRST NAME | ELENITA MAE | | | | | NAME EXTENSION (JR | ., SR) | |
| MIDDLE NAME | DADOR | | | | | | | |
| DATE OF BIRTH (mm/dd/yyyy) | | 16. CITIZENSHIP | | ☐ Filipir | 10 🗆 | Dual Citizenship | | |
| (minute))))) | JANUARY, 16, 1999 | | | | | by birth | by naturaliz | ation |
| 4. PLACE OF BIRTH | MAHAPLAG, LEYTE | If holder of dual citizenship, | | Pls. indicate country: | | | | |
| 5. SEX | ☐ Male ☐ Female | please indicate the details. | | | | | ~ | |
| 6 CIVIL STATUS | ☑ Single ☐ Married | 17. RESIDENTIAL ADDRESS | | The state of the s | | | ONE CO Street | |
| | ☐ Widowed ☐ Separated ☐ Other/s: | | Hou | se/Block/Lot No |). | S | AN ISID | RV |
| 7 MENOUT (m) | | | Sut | division/Village | | l | Barangay EYTE | |
| 7. HEIGHT (m) | 1.4 | | | ty/Municipality | | | Province | |
| 8. WEIGHT (kg) | 40 | ZIP CODE | | | 65 | 21 | | |
| 9. BLOOD TYPE | | 18. PERMANENT ADDRESS | Hou | se/Block/Lot No |). | | Street | |
| 10. GSIS ID NO. | | | Sut | ndivision/Village | | | UGUIS Barangay | |
| 11. PAG-IBIG ID NO. | | | | HAPLA ty/Municipality | IG | | LEYTE Province | |
| 12. PHILHEALTH NO. | 1302-5555-0550 | ZIP CODE | | ymanoquany | 05 | 12 | | |
| 13. SSS NO. | 34-9307055-2 | 19. TELEPHONE NO. | | | 0 4 | | | |
| 14. TIN NO. | | 20. MOBILE NO. | narin | VIII O et l | 12 | | | |
| | | | | 0449803 amaefernandez88@gmail.com | | | | |
| 15. AGENCY EMPLOYEE NO. | | 21. E-MAIL ADDRESS (if any) | elenita | amal. | terna | maer 88 | gma | 1 · Com |
| 22. SPOUSE'S SURNAME | N/A | | 23. NAME of CHI | DREN (Write | full name and l | ist all) | DATE OF BIRT | 'H (mm/dd/yyyy) |
| FIRST NAME | IV/A | NAME EXTENSION (JR., SR) | ZO. TO MILE OF OFFI | N/A | | | N/A | |
| MIDDLE NAME | | | | NIF | ` | | 14// | |
| OCCUPATION | | | | | | | | |
| EMPLOYER/BUSINESS NAME | | | | | | | | |
| BUSINESS ADDRESS | | | | | | | | |
| TELEPHONE NO. | | | | | | | | |
| 24. FATHER'S SURNAME | FERNANDE2 | | | | - | | | |
| FIRST NAME | ISID RO NAME EXTENSION (JR., SR) | | | | | | I STATE | |
| MIDDLE NAME | TAÑAJORA | | | 77.1 | | | | |
| 25. MOTHER'S MAIDEN NAME | 17770067 | | | | | | | |
| SURNAME | DADOR | | | | | | | |
| FIRST NAME | TERESITA | | | | | | | |
| MIDDLE NAME | N/A | | | (Continue on separate sheet if necessary) | | | | |
| III. EDUCATIONAL BACKG | | | | | | | | 1000 |
| 26. LEVEL | NAME OF SCHOOL (Write in full) | BASIC EDUCATION/DEGR (Write in full) | EE/COURSE | PERIOD OF A | TTENDANCE | HIGHEST LEVEL/ UNITS EARNED (If not graduated) | YEAR GRADUATED | SCHOLARSHIP/ ACADEMIC HONORS |
| | SAN ICIDED ELEMENTARY | | | From | То | J | | RECENED |
| ELEMENTARY | CCHOOL | GRADE G from GRADE 1 | | 2001 | 2011 | | 2011 | HONDRS |
| SECONDARY | MAHAPLAG NATIONAL HIGH SCHOOL | 1st Year High School to | | 2011 | 2015 | | 2015 | N/A |
| VOCATIONAL / TRADE COURSE | N/A | N/A | | N/A | N/A | | N/A | N/A |
| COLLEGE | VISAYAS STATE UNIVERSITY MAIN CAMPUS | | | 2015 | 2019 | | 2019 | CUM |
| GRADUATE STUDIES | VWAYAL STATE UNIVERSITY | Master of Science in | | 2020 | 2023 | | 2023 | N/A |
| | | Language To | essary) | | | | 2000 | 17/1 |
| SIGNATURE | Sernfylder | | | DATE 10-08-23 | | | | |
| | 0 11) | NAME OF TAXABLE PARTY. | 1000 | | | CS | FORM 212 (Revise | d 2017), Page 1 of 4 |

| IV. CIVIL SERVICE EL | IGIBILITY | | | | | | | |
|--|--|--|---|-----------------------------------|--|--------------------------|------------------|--------------------|
| | RA 1080 (BOARD/ BAR) UNDER | RATING | DATE OF EXAMINATION / | PLACE OF EXAMINATION / CONFERMENT | | | LICENSE (if a | pplicable) Date of |
| SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE | | (If Applicable) EXAMINATION / CONFERMENT | | PLACE OF EXAMINA | MILLEY! | NUMBER | Validity | |
| HONOR GRADUA | TED ELEGIBILITY | GRANTED | 08/15/19 | CSCROB, P. | AW, LE- | TE | 100108190640 | 6 6/14/19 |
| The state of the s | The state of the s | | | | | | | |
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| V. WORK EXPERIEN | | | tinue on separate sheet | | 1.W1 G | inner chest | | |
| 28. INCLUSIVE DATES | ment. Start from your reces | (work) Description | | | | SALARY/ JOB/ PAY | | GOVT |
| (mm/dd/yyyy) | m/dd/yyy) POSITION TITLE DEPARTMENT / AGENCY / C | | NCY / OFFICE / COMPANY /Do not abbreviate) | MONTHLY SALARY | GRADE (If applicable) & STEP (Format "00-0")/ INCREMENT | STATUS OF APPOINTMENT | SERVICE (Y/N) | |
| From To | | | | | | | | (17 N) |
| 2020 PRECEN | IT TUTOR/ READING | COORDINATOR | LOUVEE TOTO | PIAL CENTER | 410100 · W | N/A | N/A | N/A |
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| | | Con | tinue on separate sheet | If necessary) | | | | |
| SIGNATURE | Kennell len | | | DATE | | 10/08 | 23 | |
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| M. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-BOVERNMENT | Pront | LUNTARYO | MBANIZATION | | |
|---|--|------------------------------|-----------------|--|--|
| 29. NAME & ADDRESS OF ORGANIZATION (With in full) | PICLUSIVE DATES (mm/dd/yyyy) From To | | | POSITION/NATURE OF WORK | |
| N/A | N/A | N/A | N/A | | N/A |
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| VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS TRAINING PR | elinue on seperate ROGRAMS AT | TENDED | 1.10.0 | | ANTONIO DE SALA PROPIN |
| 30 TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (White in Nat) | | DATES OF DANCE BYYYYY) | NUMBER OF HOURS | Type of LD (Manageriali' Supervisory/ Technicalietc) | CONDUCTED/ SPONSORED BY (Write in full) |
| TRAINING WORKSHOP ON PREPARING NANUSCEIPTS | 3/29/23 | 3/51/23 | 24 hrs | | VSUGSS / GRADUATE SCHOOL |
| THAINING WORKSHOP ON PREPARING NANWYCEIPTS | Jantos | وهابداد | -4 1447 | | The control of the co |
| FACER READER WEBNAR: LEARNING THROUGH | 10/29/22 | | 2 hrc | | ADAKNA HOUCE |
| And Auto Called Co. Land Co. Called Co. | 7 | | 150 had | | INTERNATIONAL OPEN |
| READING OFMINAR - WORKATOP | 了いり 24 | И | to hre | | ACAPEMY |
| CONTINUING PROFESSIONAL ODVELOPMENT | APPIL | 2007 | Cehra | | LOUVEY TOTUPIAL CENTER |
| CONTINUING PROFESSIONAL ODVEWOPMENT (UPPCIAL EDUCATION NEETES) | AVIELL | nu | CV NY | | COUNTY TOTAL COUNTY |
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| (Cont | tinue on separate s | heet if necessary) | | | |
| VIII. OTHER INFORMATION | | | | | |
| 31. SPECIAL SKILLS and HOBBIES 32. NON- | 32. NON-ACADEMIC DISTINCTIONS / RECOGNITION 33. MEMBERSHIP IN ASSO (Write in full) | | | | |
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| Cont | inue on separate a | heet if nocessary) | | *** | Introlog |
| SIGNATURE Surreydly | | | DA | IE | 10 08 23 CS FORM 212 (Revised 2017), Page 3 of 4 |
| 0 " | | | | | |

| | | | CS FORM 212 (Revised 2017), Page 4 of | | |
|---|---|-----------------------------|---------------------------------------|--|--|
| |) Dath | | | | |
| SUBSCRIBED AND SWORN to before me this, affiant exhibiting his/her validly issued government ID as indicated above. | | | | | |
| PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: PACSPORT IDILicense/Passport No.: P3552033C Date/Place of Issuance: 13/03/23 DFA TACLOBAN | Signature (Sign inside the | | | | |
| 42. I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertin Philippines. I authorize the agency head/authorized represe agree that any misrepresentation made in this docu administrative/criminal case/s against me. Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) | nent laws, rules and regulations of the ntative to verify/validate the contents star | Republic of the ted herein. | | | |
| JENNIFER ANDO | BAYBAY CITY, LETTE | 09367356354 | | | |
| MARICAR POSAS | BAYDAY CITY, LETTE | 09155992609 | 100 | | |
| ANNIE A. PARMIS | BAYBAY CITY, LETTE | Parmic-annie | | | |
| 41. REFERENCES (Person not related by consanguinity or affinity to applican NAME | ADDRESS | TELNO | | | |
| rae year a colo parent: | ☐ YES If YES, please specify ID N | No: | | | |
| Are you a person with disability? Are you a solo parent? | If YES, please specify: YES NO If YES, please specify ID No: | | | | |
| and (c) Solo Parents Welfare Act of 2000 (RA 8972), please Are you a member of any indigenous group? | YES | ON E | | | |
| 40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magrand (a) Sala Reports Welfer And (2008) RA 2008 | na Carta for Disabled Persons (RA 7277); | If YES, give details (cou | intry): | | |
| 39. Have you acquired the status of an immigrant or permanent r | ☐ YES ☑ NO | | | | |
| b. Have you resigned from the government service during the election to promote/actively campaign for a national or local of | If YES, give details: ☐ YES ☑ NO If YES, give details: | | | | |
| a. Have you ever been a candidate in a national or local elect Barangay election)? | YES ☑ NO | | | | |
| 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: | | | | |
| 66. Have you ever been convicted of any crime or violation of any any court or tribunal? | ☐ 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: | 0 | | | |
| a. Have you ever been found guilty of any administrative offen | ☐ YES ☑ NO If YES, give details: | | | | |
| b. within the fourth degree (for Local Government Unit - Caree | YES NO | | | | |
| Are you related by consanguinity or affinity to the appointing or chief of bureau or office or to the person who has immediate s Bureau or Department where you will be apppointed, a. within the third degree? | ☐ YES ☑ NO | | | | |

CS CamScanner