CS Form No. 212 Revised 2017	DEDSOL	NAL DAT	A 0:-		pa			
					_			
WARNING: Any misrepresenta concerned.	ation made in the Personal Data Sheet and the	Work Experience Sheet sh	all cause the f	filing of adn	ninistrative	/criminal case/s a	gainst the p	erson
READ THE ATTACHED GUIDE Print legibly. Tick appropriate boxes	TO FILLING OUT THE PERSONAL DATA SHE (()) and use separate sheet if necessary. Indicate N	ET (PDS) BEFORE ACCOM A if not applicable. DO NOT A	PLISHING THE	E PDS FOR				
I. PERSONAL INFORMATIO			THE PARTY	CAN IN	1. CS ID No.		(Do not fill up	For CSC use only
2. SURNAME	VERRA						Maria Pa	And the second
FIRST NAME	MARY GRACE					NAME EXTENSION (J	R., 5R)	
MIDDLE NAME	OSEKIN					1014		
DATE OF BIRTH (mm/dd/yyyy)	11/09/1997	16. CITIZENSHIP		Z Filip	pino [☐ Dual Citizenshi	45.5	
4. PLACE OF BIRTH	ABUYOG, LEYTE	If holder of dual citize	enship,			Pls. indicate	by natu country:	ralization
5. SEX	☐ Male	please indicate the di	etails.					
6 CIVIL STATUS	✓ Single ☐ Married ☐ Widowed ☐ Separated ☐ Other/s:	17. RESIDENTIAL ADDRESS	CEN	TE NNI A	L-2A		PLUTO Street PINAGE	SHATAN
7. HEIGHT (m)	1.212		PI	bdivisionVillag ASIG			Barangay NCR	
8. WEIGHT (kg)	52	ZIP CODE	1602	ity/Municipality	/		Province	
9. BLOOD TYPE	8	18. PERMANENT ADDRESS	4	26		WASHING	No	objectives of a
10. GSIS ID NO.	NA		NA		L	-OYONSAWA	Street N G	
11. PAG-IBIG ID NO.	1202 - 5772 -9473			bdivisionVillage BUYD (ity/Municipality	ge	LEAL	Barangay	
12. PHILHEALTH NO.	12-025772947-3	ZIP CODE	6510	ity/Municipality	Y		Province	
13. SSS NO.	06-4213085-9	19. TELEPHONE NO.	N/A					Mill record of the Control
14. TIN NO.	353-211-496-000	20. MOBILE NO.	-	. 4/1 Ъ.	11/20			
15. AGENCY EMPLOYEE NO.	AIN	21. E-MAIL ADDRESS (if any)	OWNER	-447 -1570 mDegrail.com				
II. FAMILY BACKGROUND			galla	no regi	411, WF(Control of the last	
22. SPOUSE'S SURNAME	NIA		23. NAME of CH	ILDREN (Write	e full name an	d list all)	DATE OF D	RTH (mm/dd/yyyy
FIRST NAME	NIA	NAME EXTENSION (JR., SR)	NIA				-	Kiri (minocayyyy
MIDDLE NAME	N/A		NIA				NIA	
OCCUPATION	NIA		NIA				NIA	
EMPLOYER/BUSINESS NAME	NIA		NIA				AIN	
BUSINESS ADDRESS	NIA	NIA				AIN		
TELEPHONE NO.	NIA		NIA				-	
24. FATHER'S SURNAME	VERRA		NIA				AIA	
FIRST NAME	FRANCISCO	NAME EXTENSION (JR., SR)	NIA				NIA	
MIDDLE NAME	LABRAPOR		NIA				1	
25. MOTHER'S MAIDEN NAME			NIA	the state of the s		200	111	
SURNAME	OSERIN		NIA				N/A	
FIRST NAME	WILMA		AIN AIN					-
MIDDLE NAME	LODOR			(Co	ontinue on se	parate sheet if neces		
III. EDUCATIONAL BACK	GROUND	是我的人们也是	MATERIAL PROPERTY.	AR FO		N.C. Mark		70254
26. LEVEL	NAME OF SCHOOL (Write in fulf)	BASIC EDUCATION/DEGRI (Write in full)	EE/COURSE		ATTENDANCE	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
ELEMENTARY	BERNAR DO V. CLOSA CENTRAL SUKO	PRIMARY EDU	LATION	2004	2010	NJA	2010	HIGH ATHORS
SECONDARY	NOTRE DAME OF ABUJOG	HIGH SCHOOL		100	2014	N/A	2014	2rd Hondray MENTION
VOCATIONAL / TRADE COURSE	NIA	AIN		AIN	AIN	NIA	ALN	NA
COLLEGE	VISAYAS STATE UNIVERSITY	BS IN CHEMI	STRY	2014	2018	AIN	2018	CUM UNDE
	111000000000000000000000000000000000000	1 1.01						_
GRADUATE STUDIES	N/A	Alu		NJA	AĮN	AIN	NJA	MA

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27. CAR	SPECIAL LA	1080 (BOARD/ BAR) UNDER LWS/ CES/ CSEE LITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT		LICENSE (If ap	pplicable) Date of Validity	
KA 1060)		78.10 %	OCTOBER, 2018	MANILA, PHILIPPINES			0014131	11/09/201
	EXPERIENCE			ontinue on separate sheet	A PROPERTY OF THE	V 60			
INCLL	JSIVE DATES middlyyyy)	POSITION 1 (Write in full/Do not	TITLE	DEPARTMENT / AGE	ENCY / OFFICE / COMPANY //Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format *00-0*)/ INCREMENT		GOVT SERVICE (Y/N)
lop lons	08/16/204	LABORATORY U	HEMIST	THE FIRST ANALY	TICAL SERVICES /TECHN	£17,000	NIA	PERMANENT	N
									-
								-	
			(6	Continue on separate sheet	if necessary)				
SIGN	VATURE	Spenner			DATE	08/21/		S FORM 212 (Revised 2	017

RGANIZATION	INCLUSIV		CONCUENTATION OF	Party Street Court Story on Street		
9 NAME & ADDRESS OF ORGANIZATION (Write in full)		/yyyy) To	NUMBER OF HOURS	POSITION / NATURE OF WORK		
MANDAUE CITY	1204/2013	present	NIA	NOTIVITEE	ER IN THE MINISTRY	
INTERVENTIONS/TRAINING RVENTIONS/TRAINING PROGRAMS	PROGRAMS A INCLUSIVE	DATES OF DANCE	NUMBER OF HOURS	Type of LD (Managorial/ Supplied	CONDUCTED/ SPONSORED BY	
STORY AND STORY	From To			Supervisory/ Technical/etc)	(Write in full)	
	202/02/205	N/A	1 ~		THE FIRST AVALYTICAL and SERVICE	
			-	TECHNICAL		
					THE FIRST MALYTIME AND TECHNICA	
	, ,			1	NATIONAL METROLOGY LABORATOR	
10 E	03/02/10/8	03/04/2015	24	TECHN) LAL	SEARIA - PIOTECHANDOS INTERNATIONAN RIVE INSTITUTE	
					PHILIPPING SEED INDUSTRY AS	
	_			-		
		-				
			3			
		176				
			-1 -1			
				7		
(0.30)	Continue on separate	sheet if necessary				
32. N			NITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
NIA					INTELKATED CHEMISTS	
					of the philippines	
		-				
y.A.						
	Continue on separate	sheet if necessary	20042020	ATE	DS [2] 2021	
	MENT RESULTS L OFTERMINATION AKENESS METPOLOGY MMIT 2018	(Continue on separate 3) INTERVENTIONS/TRAINING PROGRAMS A INCLUSION OF ATTEM (minide From MENT RESULTS DETON 104 120 20 METPOLOGY METPOLOGY MMIT 2018 (Continue on separate 3) (Continue on separate 3) NON-ACADEMIC DISTIN NIA	(Continue on separate sheet if necessary INTERVENTIONS/TRAINING PROGRAMS ATTENDED INCLUSIVE DATES OF ATTENDANCE (miniddyyyy) From To DETERMINATION ARENESS INCLUSIVE DATES OF ATTENDANCE (miniddyyyy) From To DETERMINATION ARENESS INCLUSIVE DATES OF ATTENDANCE (miniddyyyy) From To DETERMINATION ARENESS INCLUSIVE DATES OF ATTENDANCE (miniddyyyy) From To DETERMINATION ARENESS INCLUSIVE DATES OF ATTENDANCE (miniddyyyy) From To DETERMINATION ARENESS INCLUSIVE DATES OF ATTENDANCE (miniddyyyy) From To DETERMINATION ARENESS INCLUSIVE DATES OF ATTENDANCE (miniddyyyy) From To DETERMINATION ARENESS INCLUSIVE DATES OF ATTENDANCE (miniddyyyy) From To DETERMINATION ARENESS INCLUSIVE DATES OF ATTENDANCE (miniddyyyy) From To DETERMINATION ARENESS INCLUSIVE DATES OF ATTENDANCE (miniddyyyy) From To DETERMINATION ARENESS INCLUSIVE DATES OF ATTENDANCE (miniddyyyy) From To DETERMINATION ARENESS INCLUSIVE DATES OF ATTENDANCE (miniddyyyy) From To DETERMINATION ARENESS INCLUSIVE DATES OF ATTENDANCE (miniddyyyy) From To DETERMINATION ARENESS INCLUSIVE DATES OF ATTENDANCE (miniddyyyy) From To DETERMINATION ARENESS INCLUSIVE DATES OF ATTENDANCE (miniddyyy) From To DETERMINATION ARENESS INCLUSIVE DATES OF ATTENDANCE (miniddyyy) From To DETERMINATION ARENESS INCLUSIVE DATES OF ATTENDANCE (miniddyyy) From To DETERMINATION ARENESS INCLUSIVE DATES OF ATTENDANCE (miniddyyy) From To DETERMINATION ARENESS INCLUSIVE DATES OF ATTENDANCE (miniddyyy) From To DETERMINATION ARENESS INCLUSIVE DATES OF ATTENDANCE (miniddyyy) From To DETERMINATION ARENESS INCLUSIVE DATES OF ATTENDANCE (miniddyyy) From To DETERMINATION ARENESS INCLUSIVE DATES OF ATTENDANCE (miniddyyy) From To DETERMINATION ARENESS INCLUSIVE DATES ARENESS INCLUS	(Continue on apparate sheet if necessary) INTERVENTIONS/TRAINING PROGRAMS ATTENDANCE (minds)yyyy) FROM TO	INTERVENTIONSTRAINING PROGRAMS ATTENDED INCLUSIVE DATES OF ATTENDANCE (minds) From To OFTERMINATION AREALTS OFTERMINATION AREALTS OFTERMINATION AREALTS OFTERMINATION AREALTS OFTERMINATION AREALTS OFTERMINATION AREALTS OFTERMINATION OFTERMINATION	

34. Are you related by consanguinity or affinity to the appointing	g or recommending authority, or to the						
chief of bureau or office or to the person who has immediate	e supervision over you in the Office,						
Bureau or Department where you will be apppointed,							
a. within the third degree?	FI\2	/.	NO				
b. within the fourth degree (for Local Government Unit - Car	eer Employees)?	,	NO				
	If YES, give details:						
35. a. Have you ever been found guilty of any administrative of							
35. a. riave you ever been louist guilty of any durining aute on	,	NO					
		If YES, give details:					
			,				
b. Have you been criminally charged before any court?		☐ YES ☑ NO					
		If YES, give details: Date Filed:					
36. Have you ever been convicted of any crime or violation of a	ny law decree ordinance or regulation	Status of Case/s:	,				
by any court or tribunal?	ity law, decree, ordinance or regulation	☐ YES ☑ NO					
		If YES, give details:					
27 Hava yayı ayar bası sasarılı ili	Lui L						
 Have you ever been separated from the service in any of th retirement, dropped from the rolls, dismissal, termination, et 	e rollowing modes: resignation,	☐ YES □ NO					
out (abolition) in the public or private sector?	o. torri, imported contract of priased	If YES, give details: RESIGNATION FROM PREVIOUS COMPANY					
38. a. Have you ever been a candidate in a national or local ele	ection held within the last year (except	, , , , , , , , , , , , , , , , , , , ,					
Barangay election)?		☐ YES ☑ NO If YES, give details:					
b. Have you resigned from the government service during the	he three (3)-month period before the last	☐ YES ☑ NO					
election to promote/actively campaign for a national or local	candidate?	If YES, give details:	NO NO				
39. Have you acquired the status of an immigrant or permanen							
or an analysis of position of	trooderit or another country?	☐ YES ☐ NO If YES, give details (country):					
		if YES, give details (c	country):				
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma	ona Carta for Disabled Persons (RA						
7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972)	, please answer the following items:						
a. Are you a member of any indigenous group?		☐ YES	☑ NO				
		If YES, please specify:	NO.				
b. Are you a person with disability?		☐ YES	☑ NO				
c. Are you a solo parent?		If YES, please specify ID No:					
and you a solo parolit.		☐ YES					
41. REFERENCES (Person not related by consanguinity or affinity to applican	d formalists of	Y Thy Significant May					
NAME	ADDRESS	TEL. NO.					
PROF. JAWB GLENNF. JANSALIN	VISLA, BAYBAY CITY	0926 749 0861	122				
TLIZABETH S. QUEVEDO, PAD	VILA, BAYBAY CITY	563 -7870	1-2				
	em a catal	-					
ROJEMARIE C. MILAND, RCH		6936 735 4921					
42. I declare under oath that I have personally accomplishe							
complete statement pursuant to the provisions of pertir Philippines. I authorize the agency head/authorized rep			MARY CRACE O VERRA				
I agree that any misrepresentation made in this do			PHOTO				
administrative/criminal case/s against me.							
Comment level ID.							
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance							
Government Issued ID: PRC	11	11 11 11 11 11					
ID/License/Passport No.: 10(14) 7)	Signature (Sign Inside the t	ox)					
Date/Place of Issuance. DRNOC LITY		Right Thumbmark					
SUBSCRIBED AND SWORN to before me this, affiant exhibiting his/her validly issued government ID as indicated above.							
, H	th						
L.	Person Administering Oa						

WORK EXPERIENCE SHEET

- Duration: November 06, 2018 August 16, 2021
- Position: Laboratory Chemist
- Name of Office/ Unit: The First Analytical Services and Technical Cooperative
- Immediate Supervisor: Rosemarie C. Milano
- Name of Agency/ Organization and Location: F.A.S.T. Laboratories- Cebu, Mandaue City
 - o List of Accomplishments and Contributions
 - Participated and Passed International Proficiency Tests
 - Endorsed and Recommended as DENR Signatory
 - Laboratory Equipment Coordinator
 - Assists the management in the conceptualization and implementation of programs and projects.
 - o Summary of Actual Duties
 - Performs the required chemical and physical analyses of accepted samples according to specified methods and procedures. Strictly implements the established laboratory quality system based on PNS ISO 17025. Participates in Proficiency Testing and other Quality Assurance programs of the laboratory, including method verification and validation as required.

THE GRAGE O. VERRA

(Signature over Printed Name

of Employee or Applicant)

Date: Aug 23,2021