CS Form No. 212 Revised 2017 PERSONAL DATA SHEET								
WARNING: Any misrepresental	tion made in the Personal Data Sheet and th	e Work Experience Sheet si	nall cause the f	iling of admi	inistrative/c	riminal case/s aç	gainst the pers	ion
CONCERNED.								
Print legibly. Tick appropriate boxes	nd use separate sheet if necessary. Indicate	N/A if not applicable. DO NOT	ABBREVIATE.		1, CS ID No.		(Do not fill up. Fo	r CSC use only)
I. PERSONAL INFORMATION		The second secon				The state of the s		a my direction
2. SURNAME	REDRENDO					mental to a great	. V. 10 100	re, re, grad
FIRST NAME	DECHRISTIAN							100
MIDDLE NAME	VILLACORTE	•						
3. DATE OF BIRTH (mm/dd/yyyy)	04/12/1998	16. CITIZENSHIP					□by naturaliza	tion
4. PLACE OF BIRTH	ABUYOG, LEYTE	If holder of dual citize				Pls. indicate o	ountry:	
5. SEX	☐ Male	please indicate the d	etails.					~
6 CIVIL STATUS	✓ Single Married	17. RESIDENTIAL ADDRESS	Hou	se/Block/Lot No			PLARIDEL Street	
	☐ Widowed ☐ Separated					(	CAN-UGUIB	
	Other/s:	4		odivision/Village ABUYOG			Barangay LEYTE	
7. HEIGHT (m)	1.64			ty/Municipality			Province	
8. WEIGHT (kg)	65 kg	ZIP CODE				6510		
9. BLOOD TYPE	NA	18. PERMANENT ADDRESS	Hou	se/Block/Lot No			PLARIDEL Street	
	NONE	-					CAN-UGUIB	
10. GSIS ID NO.		-	Sut	division/Village			Barangay LEYTE	
11, PAG-IBIG ID NO.	NONE		Ci	ity/Municipality			Province	
12. PHILHEALTH NO.	NONE	ZIP CODE		6510			-	
13, SSS NO.	NONE	19. TELEPHONE NO.				NONE		
14, TIN NO.		20. MOBILE NO.	09058840071					
15. AGENCY EMPLOYEE NO.	NONE	21. E-MAIL ADDRESS (if any)  dechristianreds@gmail.com						
II. FAMILY BACKGROUND	THE RESERVE THE PARTY OF THE PA			STATE OF THE PARTY				
TANK TO A CONTROL OF THE PARTY	The state of the s					J	THE OF BIRT	· //445anaA
	NONE		23. NAME of CH	ILDREN (Write	full name and	list all)	DATE OF BIRT	H (mm/dd/yyyy)
	NONE		23. NAME of CHI	ILDREN (Write	full name and	list all)	DATE OF BIRTI	H (mm/dd/yyyy)
22. SPOUSE'S SURNAME	NONE			ILDREN (Write	full name and	list all)		H (mm/dd/yyyy)
22. SPOUSE'S SURNAME FIRST NAME	NONE			ILDREN (Write	full name and	list all)		H (mm/dd/yyyy)
22. SPOUSE'S SURNAME FIRST NAME MIDDLE NAME	NONE			ildren (Write	full name and	ist alf)		H (mm/dd/yyyy)
22. SPOUSE'S SURNAME FIRST NAME MIDDLE NAME OCCUPATION	NONE			ILDREN (Write	full name and	list all)		H (mm/dd/yyyy)
22. SPOUSE'S SURNAME FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS	NONE			ILDREN (Write	full name and	list all)		H (mm/dd/yyyy)
22. SPOUSE'S SURNAME FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO.				ILDREN (Write	full name and	list all)		H (mm/dd/yyyy)
22. SPOUSE'S SURNAME FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO. 24. FATHER'S SURNAME	REDRENDO			ILDREN (Write	full name and	list all)		H (mm/dd/yyyy)
22. SPOUSE'S SURNAME FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO.	REDRENDO EDUARDO			ILDREN (Write	full name and	ist all)		H (mm/dd/yyyy)
22. SPOUSE'S SURNAME FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME	REDRENDO EDUARDO RAGA			ILDREN (Write	full name and	list all)		H (mm/dd/yyyy)
22. SPOUSE'S SURNAME FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME	REDRENDO EDUARDO			ILDREN (Write	full name and	list all)		H (mm/dd/yyyy)
22. SPOUSE'S SURNAME FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME	REDRENDO EDUARDO RAGA			ILDREN (Write	full name and	list all)		H (mm/dd/yyyy)
22. SPOUSE'S SURNAME FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 25. MOTHER'S MAIDEN NAME	REDRENDO EDUARDO RAGA VILLACORTE						N/A	H (mm/dd/yyyy)
22. SPOUSE'S SURNAME FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 25. MOTHER'S MAIDEN NAME SURNAME	REDRENDO EDUARDO RAGA VILLACORTE REDRENDO					parate sheet if neces	N/A	H (mm/dd/yyyy)
22. SPOUSE'S SURNAME FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 25. MOTHER'S MAIDEN NAME SURNAME FIRST NAME	REDRENDO EDUARDO RAGA VILLACORTE REDRENDO BALBINA MANTALABA					parate sheet if neces	N/A	H (mm/dd/yyyy)
22. SPOUSE'S SURNAME FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 25. MOTHER'S MAIDEN NAME SURVAME FIRST NAME MIDDLE NAME MIDDLE NAME	REDRENDO EDUARDO RAGA VILLACORTE REDRENDO BALBINA MANTALABA	BASIC EDUCATION/DEGR (Write in full)	NONE	(Co			N/A	
22. SPOUSE'S SURNAME FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 25. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME MIDDLE NAME	REDRENDO EDUARDO RAGA VILLACORTE REDRENDO BALBINA MANTALABA ROUJ(D)		NONE	(Co	ontinue on sep	HIGHEST LEVEL/ UNITS EARNED	N/A  ssary)	SCHCLARSHIP! ACADEMIC HONGS
22. SPOUSE'S SURNAME FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 25. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME MIDDLE NAME LEVEL	REDRENDO EDUARDO RAGA VILLACORTE REDRENDO BALBINA MANTALABA COUVID NAME OF SCHOOL (Write in full)	(Write in full)	NONE	PERIOD OF A	ontinue on separatrenoance To	HIGHEST LEVEL UNITS EARNED (If not graduated)	N/A  SSATY)  YEAR GRADUATED	SCHCLARSHIP! ACADEMIC HONGS
22. SPOUSE'S SURNAME FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 25. MOTHER'S MAIDEN NAME SURVAME FIRST NAME MIDDLE NAME  MIDDLE NAME LEVEL  ELEMENTARY SECONDARY VOCATIONAL I	REDRENDO EDUARDO RAGA VILLACORTE REDRENDO BALBINA MANTALABA GOUND  NAME OF SCHOOL (Write in full)  ABUYOG SOUTH CENTRAL SCHOOL	(Write in full)	NONE	PERIOD OF A From 2005	To 2011	HIGHEST LEVEL/ UNITS EARNED (If not graduated) GRADUATE	N/A  SSAITY)  YEAR GRADUATED  2011	SCHCLARSHIP! ACADEMIC HONGS
22. SPOUSE'S SURNAME FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 25. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME 11. EDUCATIONAL BACKGE 28. LEVEL ELEMENTARY SECONDARY	REDRENDO EDUARDO RAGA VILLACORTE REDRENDO BALBINA MANTALABA  COUVID  NUME OF SCHOOL (Write in full)  ABUYOG SOUTH CENTRAL SCHOOL  NOTREDAME OF ABUYOG	(Write in full) N/A N/A	NONE	PERIOD OF A From 2005 2011	To 2011	HIGHEST LEVEL UNITS EARNED (If not graduated) GRADUATE GRADUATE	N/A  SSAITY)  YEAR GRADUATED  2011	SCHCLARSHIP! ACADEMIC HOMORS
22. SPOUSE'S SURNAME FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 25. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME MIDDLE NAME LEVEL ELEMENTARY SECONDARY VOCATIONAL! TRADE COURSE	REDRENDO EDUARDO RAGA VILLACORTE REDRENDO BALBINA MANTALABA  COUVID  NAME OF SCHOOL (Write in full)  ABUYOG SOUTH CENTRAL SCHOOL NOTREDAME OF ABUYOG  NONE	(Write in full) N/A N/A N/A BACHELOR IN SEC	NONE	PERIOD OF A From 2005 2011 N/A	To 2011 2015 N/A	HIGHEST LEVEL/ UNITS EARNED (If not graduated) GRADUATE GRADUATE N/A	N/A  SSATY)  YEAR GRADUATED  2011  2015	SCHCLARSHIP! ACADEMIC HONORS

pur

SIGNATURE

CS FORM 212 (Revised 2017), Page 1 of 4

V. GIVIL SE						1000		LICENSE (if ap	plicable)
		RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINA	NUMBER 1828372	Date of Validity			
LICENSURE EXAMINATION FOR TEACHERS 87.6		87.6	\$EPTEMBER 29,2018	TACLOE	TACLOBAN CITY			03/01/2020	
				,2.7.10					
				ntinue on separate sheet	if necessary)				
V Wasie	(Daniana-					red Work E	perience she	et.	73/
<ol> <li>28. INCLUS</li> </ol>	nte employme SIVE DATES ndddyyyy)	POSITION TO	TLE		ENCY / OFFICE / COMPANY I/Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (If applicable)& STEP (Formal '00-0') NCREMENT	STATUS OF APPOINTMENT	GOVT SERVICE (Y/N)
From	To	(Write in full/Do not a			ATISTICS AUTHORITY	P24,494	14	cosw	
NOV. 25, 2020	DEC. 19, 2020	REGISTRATION C		PHILIPPINES STA	ATISTICS AUTHORITY	P23,700	9	cosw	
MAR. 5, 2021	JUN. 15, 2021	REGISTRATION CENTE	R SUPERVISOR	(Pi	HILSYS)				
		,							-
<del>                                     </del>									-
<del>                                     </del>									-
									-
									-
									-
									+
									-
									-
									+
						-			+
									+
									+
							-		+
$\Box$									+
									+
									+
									+
									+
and the same		The second second second	(Conti	inue on seperate sheet i	f necessary)	ent the trail re-		Paris II	<u> </u>
SIGNAT	URE	AUP			DATE			JUNE 8, 20	

29. NAME & ADDRES	S OF ORGANIZATION	INC	LUSIVE DATES			POSITION / NATURE OF WORK
(Wri	te in (ulf)	From	mm/dd/yyyy) To	NUMBER OF HOU	RS	POSITION / NATURE OF WORK
ONE		From	10			
		_	_		-	
				-		
		-				
				+		
					and the same of the same of	
		THE PARTY OF THE P	ite sheet if necessa ATTENDED			
III. LEARNING AND DEVELOPMENT (Literature of the most recent L&D training program and in	.&D) INTERVENTIONS/TRAINING F include only the relevant L&D/training taken for t	THE RESIDENCE OF ALL		jel/Executive/Manage	erial positions)	A SECURCOSED BY
		INCLUSIVE DATES O ATTENDANCE		NUMBER OF HOURS	Type of LD (Managerial/ S Supervisory/	CONDUCTED/ SPONSORED BY (Write in fulf)
30. TITLE OF LEARNING AND DEVELOPMENT (Write	INTERVENTIONS/TRAINING PROGRAMS in full)	(mn	n/dd/yyyy) To	7-728	Technical/etc)	
	· · · · · · · · · · · · · · · · · · ·	From 10/14/2019	12/14/2019	150 HRS		PHTIT INC.
CII BREAD AND PASTRY PRODUCTION		19/11/2020	21/11/2020	30 HRS	SUPERVISORY	PHILIPPINE STATISTICS AUTHOR
ROVINCIAL TRAINING ON PHILSYS STEP 2 RE		05/03/2021	05/03/2021	10 HRS	SUPERVISORY	PHILIPPINE STATISTICS AUTHOR
EFRESHER TRAINING ON PHILSYS STEP 2 RE	GISTRATION	05/03/2021	-			
				+		
				+		
				-		
				-		
		=======================================		-		
			-			
	(Contin	ue on separate si	neet if necessary)			
ALL OTHER INFORMATION						MEMBERSHIP IN ASSOCIATION/ORGANIZATION
	32. NON-AC	ADEMIC DISTING	TIONS / RECOGN	ITION	:	MEMBERSHIP IN ASSCURATION (Write in full)
31. SPECIAL SKILLS and HOBBIES	2	NONE				NONE
Ability to communicate well		HUNE				
Computer Literate						
Interpersonal Skills						
Managerial Skills						
		e on separate she				

<ol> <li>Are you related by consanguinity or affinity to the appointing chief of bureau or office or to the person who has immediate</li> </ol>	g or recommending authority, or to the e supervision over you in the Office.				
Bureau or Department where you will be apppointed,	,				
a. within the third degree?     b. within the fourth degree (for Local Government Unit - Can	☐ YES ☑ NO☐ YES ☑ NO If YES, give details:				
35. a. Have you ever been found guilty of any administrative offe					
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?	Y ☐ YES ☑ NO If YES, give details:				
<ol> <li>Have you ever been separated from the service in any of the dropped from the rolls, dismissal, termination, end of term, fire</li> </ol>	YES ☑ NO If YES, give details:				
in the public or private sector?	in the public or private sector?  a. Have you ever been a candidate in a national or local election held within the last year (except				
b. Have you resigned from the government service during the election to promote/actively campaign for a national or local of the election to promote/actively campaign for a national or local of the election to promote actively campaign for a national or local of the election to promote actively campaign for a national or local of the election to promote actively campaign for a national or local of the election to promote actively campaign for a national or local of the election to promote active the election to the election to the election to the election that the election to t	Note that the provenant service during the three (3)-month period before the last				
39. Have you acquired the status of an immigrant or permanent	☐ YES ☑ NO If YES, give details (country):				
<ul> <li>40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magnand (c) Solo Parents Welfare Act of 2000 (RA 8972), please</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, please specify ID No: ☐ YES, please specify ID No:				
41. REFERENCES (Person not related by consanguinity or affinity to applicant	t /appointee)	TEL, NO.			
NAME GILBERT G. GALIT	ADDRESS  LEYTE NORMAL UNIVERSITY	9568317884			
SHERYL ANN A. JAMISOLA	PSA	9199133208	(=)		
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 represer agree that any misrepresentation made in this document administrative/criminal case/s against me.	ntering to verify validate the contents state	ed herein.	DECHRISTIAN V. REDRENDO		
Government Issued ID (i.a.Passport, GSIS, SSS, PRC, Driver's License, etc.)  PLEASE INDICATE ID Number and Date of Issuance  Government Issued ID: PRC I.D  ID/License/Passport No.: 1828372  Date/Place of Issuance: JANUARY 03, 2019/ TACLOBAN CITY	Signature (Sign inside the b JUNE 8,2021 Date Accomplished	ox)	Right Thumbmark		
SUBSCRIBED AND SWORN to before me this	, affiant exhibitir	ng his/her validly issued	government ID as indicated above.		
	Person Administering Oat	h	CC EDDU 21) (Parcent 2017). Page 4.0		