CS Form No. 212 Revised 2017	PERSO	NAL DATA	SHE	ET				
WARNING: Any misrepresentation	made in the Personal Data Sheet and the Work Ex	perience Sheet shall cause the	e filing of admir	nistrative/crir	ninal case/s	against the person	concerned.	
READ THE ATTACHED GUIDE TO I	FILLING OUT THE PERSONAL DATA SHEET (PDS)	BEFORE ACCOMPLISHING TI	HE PDS FORM.					. For CSC use onl
I. PERSONAL INFORMATION	Ind use separate sheet if necessary. Indicate N/A if not a	applicable. DO NOT ABBREVIATE			1. CS ID No.		(Do not hii up	. For USC use on
2. SURNAME	IBO							
FIRST NAME	MARIA NOEL					NAME EXTENSION (JR.,	SR)	
MIDDLE NAME	ABAPO					N/A		
3. DATE OF BIRTH	5/4/1997	16. CITIZENSHIP		FILIPINO		1071		
(mm/dd/yyyy)	34/1997	III. GITZENSHIP		FILIPINO				
PLACE OF BIRTH	BAYBAY CITY, LEYTE	If holder of dual citizens	ship,			Pls. indicate coun	try:	
5. SEX	FEMALE	please indicate the det	ails.	N/A				
6 CIVIL STATUS	SINGLE	17. RESIDENTIAL ADDRESS		N/A			N/A	
			Ho	use/Block/Lot No N/A	l.	S	Street TO. ROSARIO	
7. HEIGHT (m)	450		Sı	ubdivision/Village BAYBAY			Barangay LEYTE	
	150			Dity/Municipality			Province	
8. WEIGHT (kg)	60	ZIP CODE 18. PERMANENT ADDRESS		N/A			N/A	
9. BLOOD TYPE	0	18. PERMANENT ADDRESS	Ho	use/Block/Lot No	l.		Street	
10. GSIS ID NO.	N/A		Sı	N/A ubdivision/Village			STO. ROSARIO Barangay	
11. PAG-IBIG ID NO.	121312239246		L	BAYBAY Dity/Municipality			LEYTE Province	
12. PHILHEALTH NO.	1202-6106-5792	ZIP CODE	6521					
13. SSS NO.	06-4518441-7	19. TELEPHONE NO.	N/A					
14. TIN NO.	721168486	20. MOBILE NO.	09062556707					
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	marianoel.ibo@	gmail.com				
II. FAMILY BACKGROUND								
22. SPOUSE'S SURNAME	N/A		23. NAME of CHIL	DREN (Write fu	I name and list	all)	DATE OF BIR	TH (mm/dd/yyyy)
FIRST NAME	N/A	NAME EXTENSION (JR., SR) N/A			N/A		1	VA.
MIDDLE NAME	N/A	•						
OCCUPATION	N/A							
EMPLOYER/BUSINESS NAME	N/A							
BUSINESS ADDRESS	N/A							
TELEPHONE NO.	N/A							
24. FATHER'S SURNAME	IBO							
FIRST NAME	NOEL	NAME EXTENSION (JR., SR) N/A						
MIDDLE NAME	CABARDO	•						
25. MOTHER'S MAIDEN NAME								
SURNAME	ABAPO							
FIRST NAME	MA. ZORAIDA							
MIDDLE NAME	VINCULADO				(Continue on s	eparate sheet if necess	ary)	
III. EDUCATIONAL BACKGRO	UND	1						
26. LEVEL	(Write in full)	UCATION/DEGREE/COURSE (Write in full)		PERIOD OF A	ATTENDANCE To	HEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP! ACADEMIC HONORS RECEIVED
ELEMENTARY	BAYBAY II CENTRAL SCHOOL	PRIMARY		2003	2009	GRADUATED	2009	9TH HONOF
SECONDARY	FRANCISCAN COLLEGE OF THE IMMACULATE CONCEPTION	HIGHSCHOOL		2009	2013	GRADUATED	2013	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A		N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE ENGINEERING		2013	2021	GRADUATED	2021	N/A
GRADUATE STUDIES	N/A	N/A		N/A	N/A	N/A	N/A	N/A
		(Continue on separate sheet if neces	sary)			L		L
SIGNATURE			·	DA	\TE	September 13, 20	24	

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IV. CIVIL SERVICE ELIGIBILITY							
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL	RATING	DATE OF EXAMINATION /		LICENSE (if a	applicable)		
LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	(If Applicable)	CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	NUMBER	Date of Validity		
CAREER SERVICE PROFESSIONAL EXAMINATION	80.4	3/17/2024	ORMOC CITY, LEYTE	N/A	5/20/2019		
(Continue on separate sheet if necessary)							
V. WORK EXPERIENCE							
(Include private employment. Start from your recent work) Description of dut	ies should be indicated	d in the attached Work Experience sheet.				

			(Co	ontinue on separate sheet it	f necessary)				
V. WORK EXPERIENCE (Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.									
28 INCLU	JSIVE DATES	E (Write in full/Do not a		NCY / OFFICE / COMPANY			SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOVT
From	То	(,				INCREMENT		(Y/ N)
1/9/2023	7/1/2024	CUSTOMER SERVICE RE	EPRESENTATIVE		UNDEVER	PHP 14,950	N/A	RESIGNED	N
2/22/2022	5/9/2022	DESO TECHNICAL	SUPPORT		LECTIONS- BAYBAY CITY, LEYTE	N/A	N/A	END OF CONTRACT	Υ
4/15/2021	4/3/2022	SCIENTIFIC ADVISORY TI	EAM VOLUNTEER		AL LEGAL ASSISTANCE TER (ELAC)	PHP 5,000	N/A	RESIGNED	N

(Continue on separate sheet if necessary)						
SIGNATURE		DATE	SEPTEMBER 13, 2024			
	-		00 50001000 0 1 10007 0 0 11			

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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S						
29. NAME & ADDRESS OF ORGANIZATION full)	(Write in	(mm/d	ld/yyyy)	NUMBER OF HOURS		POSITION / NATURE OF WORK
N/A		N/A	N/A	N/A		N/A
VIII I FARMINO AND REVELORMENT (LORDINE		ntinue on separate s	sheet if necessary)			
VII. LEARNING AND DEVELOPMENT (L&D) INTE	RVENTIONS/TRAINING PROGRAM	IS ATTENDED	_			1
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTION (Write in full)	IS/TRAINING PROGRAMS	NDANCE (mm/d	ld/yyyy)	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
		From	То			
N/A		N/A	N/A	N/A	N/A	N/A
	(00	ntinus on consents o	heat if page agent			
VIII. OTHER INFORMATION	(60	ntinue on separate s	occ ii riecessary)			
31. SPECIAL SKILLS and HOBBIES	32. I-ACADEMIC DISTINCTIONS / RECOGNIT	ION (Write	e in full)			33. SOCIATION/ORGANIZATION (Write in full)
COMPUTER LITERATE	N/A					N/A

(Continue on separate sheet if necessary)							
SIGNATURE		DATE	SEPTEMER 13, 2024				

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34.	Are you related by consanguinity or affinity to the appointing or receive of bureau or office or to the person who has immediate super-					
	Bureau or Department where you will be apppointed,	, ,				
	a. within the third degree?b. within the fourth degree (for Local Government Unit - Career Em	inlovece)?	NO			
	b. Within the fourth degree (for Local Government Onit - Career Em	ployees)?	NO If YES, give details:			
35.	a. Have you ever been found guilty of any administrative offense?	NO .				
00.	, , ,		-			
	b. Have you been criminally charged before any court?	NO				
			Status of Case/s:			
36.	Have you ever been convicted of any crime or violation of any law, or tribunal?	decree, ordinance or regulation by any court	NO			
	or urburiar?		If YES, give details:	<u> </u>		
07	Have you ever been congreted from the conject in any of the follows	ing modes: resignation, retirement, drapped				
37.	from the rolls, dismissal, termination, end of term, finished contract	or phased out (abolition) in the public or	YES If YES, give details: RESIG	GNATION AND END OF CONTRACT		
	private sector?					
38.	 a. Have you ever been a candidate in a national or local election he election)? 	eld within the last year (except Barangay	NO			
	b. Have you resigned from the government service during the three	e (3)-month period before the last election to	NO			
	promote/actively campaign for a national or local candidate?	. (-)	If YES, give details:			
39.	Have you acquired the status of an immigrant or permanent residen	nt of another country?	NO			
			If YES, give details (country):			
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Car	ta for Disabled Persons (RA 7277); and (c)				
	Solo Parents Welfare Act of 2000 (RA 8972), please answer the fol	lowing items:				
а	Are you a member of any indigenous group?		NO If YES, please specify:			
b	Are you a person with disability?		NO			
C.	Are you a solo parent?		If YES, please specify ID No:			
	, as you a colo paron.		If YES, please specify ID No:			
41.	REFERENCES (Person not related by consanguinity or affinity to applicant /appoint	ee)				
	NAME	ADDRESS	TEL. NO.			
	DR. BUENAVENTURA DARGANTES	J.P. LAUREL ST., BAYBAY CITY, LEYTE	N/A			
	MR. MARIANITO GORGONIO	BAYBAY CITY, LEYTE	N/A	Man N		
	MR. LEONARDO G. DIZON JR.	MAHAPLAG LEYTE	N/A			
42.	I declare under oath that I have personally accomplished this Personal	onal Data Sheet which is a true, correct and co	omplete statement			
				A A		
				РНОТО		
	Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance					
ΙF	Sovernment Issued ID: NATIONAL ID					
l ⊦	D/License/Passport No.: 4704-1248-4036-746	Signature (Sign inside the box				
╽├	Date/Place of Issuance: JUNE 26, 2021/ BAYBAY CITY, LEYTE		D: 11=			
\perp		Date Accomplished		Right Thumbmark		
	SUBSCRIBED AND SWORN to before me this	, affiant exhibiting	his/her validly issued government	ID as indicated above.		

1			•
	Person Administering Oath		
•			

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