PERSONAL DATA SHEET

WARNING: Any misrepresentation made in the Personal Data Sheet and the Work Experience Sheet shall cause the filing of administrative/criminal case/s against the person concerned.

READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM. Print legibly. Tick appropriate boxes () and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. 1. CS ID No. (Do not fill up. For CSC use only) 2 SURNAME **MEJORADA** NAME EXTENSION (JR., SR) FIRST NAME **EDUARDO** MIDDLE NAME LANOTE 3. DATE OF BIRTH 16. CITIZENSHIP Filipino Dual Citizenship (mm/dd/yyyy) 10/4/1995 by birth by naturalization BRGY. IPIL, SURIGAO CITY 4. PLACE OF BIRTH If holder of dual citizenship Pls. indicate country: please indicate the details ✓ Male Female 5. SEX 17. RESIDENTIAL ADDRESS PUROK KAHOY ✓ Single Married 6 CIVIL STATUS House/Block/Lot No Widowed Separated IPIL Other/s: Subdivision/Village Barangay SURIGAO CITY SURIGAO DEL NORTE 7. HEIGHT (m) 175m City/Municipality Province 75kg 8. WEIGHT (kg) ZIP CODE 8400 18. PERMANENT ADDRESS PUROK KAHOY 9. BLOOD TYPE 0 House/Block/Lot No. Street IPIL 10. GSIS ID NO. N/A Subdivision/Village Barangay SURIGAO CITY SURIGAO DEL NORTE 11. PAG-IBIG ID NO. N/A City/Municipality Province 18-025276033-2 12 PHILHEALTH NO 8400 ZIP CODE 13. SSS NO. N/A 19. TELEPHONE NO. N/A 14. TIN NO. N/A 20. MOBILE NO. +639664566499 15. AGENCY EMPLOYEE NO N/A 21. E-MAIL ADDRESS (if any) edumejorada9@gmail.com 22. SPOUSE'S SURNAME N/A 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) N/A FIRST NAME N/A N/A N/A N/A MIDDLE NAME N/A N/A OCCUPATION N/A N/A N/A **FMPLOYER/BUSINESS NAME** N/A N/A N/A **BUSINESS ADDRESS** N/A N/A N/A N/A TELEPHONE NO N/A N/A 24. FATHER'S SURNAME **MEJORADA** N/A NAME EXTENSION (JR., SR) N/A FIRST NAME **EDGARDO** N/A N/A MIDDLE NAME N/A N/A N/A 25. MOTHER'S MAIDEN NAME N/A N/A SURNAME LANOTE N/A N/A FIRST NAME ROWENA N/A MIDDLE NAME **DEL VALLE** (Continue on separate sheet if necessary) EDUCATIONAL BACKGROUND SCHOLARSHIP HIGHEST LEVEL 26 PERIOD OF ATTENDANCE NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE YEAR LEVEL UNITS EARNED HONORS RECEIVED GRADUATED (Write in full) (Write in full) (if not graduated) From To ELEMENTARY IPIL ELEMENTARY SCHOOL GRADE 1 TO GRADE 6 6/3/2002 3/28/2008 N/A 2008 SECONDARY **IPIL NATIONAL HIGH SCHOOL** FIRST YEAR TO FOURTH YEAR 2012 ITH HONORABLE MENTION 6/2/2008 3/28/2012 N/A VOCATIONAL / N/A N/A NA N/A N/A N/A N/A TRADE COURSE BACHELOR OF LIBRARY AND INFORMATION COLLEGE SAINT PAUL UNIVERSITY SURIGAO N/A 2022 N/A 8/13/2018 7/14/2022 SCIENCE GRADUATE STUDIES N/A N/A NA N/A N/A N/A 1-19-2023 SIGNATURE DATE

| 7. CARE | | 1080 (BOARD/ BAR) UNDER | RATING | DATE OF | | | | LICENSE (If | applicable) |
|----------------------------------|--|--------------------------------------|-----------------------------|--------------------------------|--|-------------------|---|------------------------------|--------------------------|
| ВА | SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE RATING (If Applicable) | | EXAMINATION / CONFERMENT | EXAMINATION / PLACE OF EXAMINA | | RMENT | NUMBER | Date of Validity | |
| LIBRARIANS LICENSURE EXAMINATION | | SEPTEMBER 12-13, 2022 CAGAY | | AN DE ORO | | 0010161 | 10/4/202 | | |
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| | EXPERIENCE | | | ontinue on separate sheet h | | | | | |
| INCLU | USIVE DATES | nt. Start from your recent | | | | | SALARY/JOB/PAY | National Property | |
| (m | nm/dd/yyyy) | POSITION TI (Write in full/Do not | | | NCY / OFFICE / COMPANY Do not abbreviate) | MONTHLY SALARY | GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT | STATUS OF APPOINTMENT | GOV'T SERVIC (Y/N) |
| From | N/A | N/A | | | N/A | | N/A | N/A | N/A |
| A | N/A | N/A | | | N/A | N/A N/A | N/A | N/A | N/A |
| A | N/A | N/A | | | N/A | N/A | N/A | N/A | N/A |
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| SIGNA | ATURE | 5 | 1 | | DATE | | 1-19 | -2023 FORM 212 (Revised 2 | |

| VI. VOLUNTARY WORK OR INVOLVEMENT IN | | | CONTRACTOR DESCRIPTION OF THE PERSON OF THE | ORGANIZATIO | ON/S | | | | | |
|---|---|------------------------------|---|---------------------|-------------------------------|---|---|--|--|--|
| 29. NAME & ADDRESS OF ORGANIZATION (Write in full) | | INCLUSIVE DATES (mm/dd/yyyy) | | NUMBER OF HOURS | | POSITION / NATURE OF WORK | | | | |
| | | | From To | | | | | | | |
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| VII. LEARNING AND DEVELOPMENT (L&D) II | NTERVENTIONS/TRAINING P | (Cont ROGRAMS A | inue on separate s TTENDED | sheet if necessary) | | | | | | |
| | | | /E DATES OF | | Type of LD | | | | | |
| TITLE OF LEARNING AND DEVELOPMENT INTER' (Write in full) | VENTIONS/TRAINING PROGRAMS | | ATTENDANCE (mm/dd/yyyy) | | (Managerial/ Supervisory/ | CONDUCTED/ SPONSORED BY (Write in full) | | | | |
| | | From | То | | Technical/etc) | | | | | |
| ARCHIVIST IN THE NEW NORM | AL | 10/12/2020 | 0/12/2020 10/12/2020 2.0 FOUNDATION SOCIETY OF FILIPING | | SOCIETY OF FILIPINO ARCHIVIST | O ARCHIVIST | | | | |
| ONLINE LIBRARY: CURATING RESOUR | RCES FOR ACCESS | 9/11/2020 | 9/11/2020 | 2.0 | TECHNICAL | PHILIPPINE LIBRARIANS ASSOCIATION, INC. (CARAGA REGIONAL LIBRARIANS COUNCIL) | | | | |
| | | | | | | REGIONAL LIBRARIANO COUNCIL) | | | | |
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| | | (Conti | nue on separate s | heet if necessary) | | | | | | |
| VIII. OTHER INFORMATION | | | | | | | | | | |
| 31. SPECIAL SKILLS and HOBBIES | 32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full) | | | 33. | ASSOCIATION/ORGANIZATION | | | | | |
| OFFICE ADMINISTRATION SKILLS | | | | | Alfrito in 6:II) | | | | | |
| READING | | | | | | | | | | |
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| | | Was a | nuo on ann | heet if necessary) | | | | | | |
| SIGNATURE | 50 | (COAD) | nuv vii saparata Si | | ATE | 1-19-2023 | | | | |

CS FORM 212 (Revised 2017)

| | chief of bureau or office or to the person who has important or Department where you will be approinted, a. within the third degree? | | | | | |
|-------|---|--|--|--|--|--|
| | b. within the fourth degree (for Local Government Un | YES NO | | | | |
| | | If YES, give details: | | | | |
| 35. | a. Have you ever been found guilty of any administrate | 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 violatio any court or tribunal? | YES NO If YES, give details: | | | | |
| | Have you ever been separated from the service in any dropped from the rolls, dismissal, termination, end of t in the public or private sector? | YES NO If YES, give details: | | | | |
| 38. | A. Have you ever been a candidate in a national or loc Barangay election)? | cal election held within the last year (except | ☐ YES ☑ NO If YES, give details: | | | |
| | b. Have you resigned from the government service du election to promote/actively campaign for a national or | ☐ YES ☑ NO If YES, give details: | | | | |
| 39. | Have you acquired the status of an immigrant or perm | YES NO If YES, give details (country): | | | | |
| 40. | Pursuant to: (a) Indigenous People's Act (RA 8371); (b | o) Magna Carta for Disabled Persons (RA | | | | |
| a. | 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8 Are you a member of any indigenous group? | 1972), please answer the following items: | | | | |
| b. | Are you a person with disability? | | If YES, please specify: | | | |
| | Are you a person with disability? | | YES VO If YES, please specify ID No: | | | |
| C. | Are you a solo parent? | | YES NO If YES, please specify ID No: | | | |
| 41. | REFERENCES (Person not related by consanguinity or affinity to app | plicant /appointee) | | | | |
| | NAME | ADDRESS | TEL. NO. | | | |
| | DANILO ADORADOR III | BRGY. IPIL SURIGAO CITY | 9773000200 | | | |
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| F | declare under oath that I have personally accomplete statement pursuant to the provisions of philippines. I authorize the agency head/authorized regaree that any misrepresentation made in this administrative/criminal case/s against me. | pertinent laws, rules and regulations of the Ropresentative to verify/validate the contents stated | depublic of the | | | |
| Gov | rernment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) FASE INDICATE ID Number and Date of Issuance | | | | | |
| Gove | ernment issued ID: PRC | | | | | |
| ID/Li | cense/Passport No.: 0010161 | | | | | |
| Date | /Place of Issuance: 10-24-2022/PRC BUTUAN | Right Thumbmark | | | | |
| | SUBSCRIBED AND SWORN to before me this | , atriant exhibiting | his/her validly issued government ID as indicated above. | | | |
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| | | ICLE No. VI-0004048 / TIN No. 934-1 | | | | |
| | | MCLE NO. VII-9002058 | 52-6\$3 CS FORM 212 (Revised 2017), Page 4 of 4 | | | |

MCLE No. VI-00040487 TIN No. 934-152-893
MCLE NO. VII-0002056
Mejares bldg. Narcieo Corner Rizal St.
Surigao City