CS Form No. 212
Revised 2017

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.**

CSC ID NO. (Do not fill up. For CSC use only)

I. PERSONAL INFORMATION

2. SURNAME	CAMPO		
FIRST NAME	JUDY ANN	NAME EXTENSION (JR., SR)	
MIDDLE NAME	MENDROS		

3. DATE OF BIRTH (mm/dd/yyyy)	10/25/1999	16. CITIZENSHIP	☑ Filipino ☐ Dual Citizenship ☐ by birth ☐ by naturalization. Pls. indicate country:
4. PLACE OF BIRTH	PALO, LEYTE	If holder of dual citizenship, please indicate the details.	
5. SEX	☐ Male ☑ Female		
6 CIVIL STATUS	☑ Single ☐ Married ☐ Widowed ☐ Separated ☐ Other/s:	17. RESIDENTIAL ADDRESS	N/A (House/Block/Lot No.) N/A (Street) N/A (Subdivision/Village) GACAO (Barangay) PALO (City/Municipality) LEYTE (Province) ZIP CODE 6501
7. HEIGHT (m)	1.55		
8. WEIGHT (kg)	58		
9. BLOOD TYPE		18. PERMANENT ADDRESS	N/A (House/Block/Lot No.) N/A (Street) N/A (Subdivision/Village) GACAO (Barangay) PALO (City/Municipality) LEYTE (Province) ZIP CODE 6501
10. GSIS ID NO.			
11. PAG-IBIG ID NO.	1212-2259-3824		
12. PHILHEALTH NO.	1302-5500-7867		
13. SSS NO.	06-4103814-3	19. TELEPHONE NO.	N/A
14. TIN NO.	346-447-882-00000	20. MOBILE NO.	09917596348
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (If any)	judyanncampo102519@gmail.com

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	N/A	23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	NAME EXTENSION (JR., SR)	N/A	
MIDDLE NAME			
OCCUPATION			
EMPLOYER/BUSINESS NAME			
BUSINESS ADDRESS			
TELEPHONE NO.			
24. FATHER'S SURNAME	CAMPO		
FIRST NAME	ROBERT NAME EXTENSION (JR., SR)		
MIDDLE NAME	MORANO		
25. MOTHER'S MAIDEN NAME			
SURNAME	MENDROS		
FIRST NAME	JOSEPHINE		
MIDDLE NAME	MONTEROSO	(Continue on separate sheet if necessary)	

III. EDUCATIONAL BACKGROUND

26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE From	To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
ELEMENTARY	GACAO ELEMENTARY SCHOOL	ELEMENTARY	2007	2013	GRADUATED	2013	VALEDICTORIAN
SECONDARY	ANAHAWAY NATIONAL HIGH SCHOOL	JUNIOR HIGH SCHOOL	2013	2017	GRADUATED	2017	HIGH HONOR
	PALO NATIONAL HIGH SCHOOL	SENIOR HIGH SCHOOL	2017	2019	GRADUATED	2019	HIGH HONOR
VOCATIONAL / TRADE COURSE	N/A						
COLLEGE	SAINT PAUL SCHOOL OF PROFESSIONAL STUDIES	BACHELOR OF SCIENCE IN ACCOUNTANCY	2019	2023	GRADUATED	2023	N/A
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

SIGNATURE		DATE	10/28/2024

IV. CIVIL SERVICE ELIGIBILITY

27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
				NUMBER	Date of Validity
CAREER SERVICE PROFESSIONAL	82.30	03/26/2023	LEYTE NORMAL UNIVERSITY	N/A	N/A

(Continue on separate sheet if 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. INCLUSIVE DATES (mm/dd/yyyy)		POSITION TITLE (Write in full/Do not abbreviate)	DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)
From	To						
03/01/2024	12/15/2024	DOCUMENTOR	DEPARTMENT OF AGRARIAN REFORM	27,525		CONTRACTUAL	Y
10/01/2023	02/29/2024	PROCESSOR	DEPARTMENT OF AGRARIAN REFORM	33,306		CONTRACTUAL	Y

(Continue on separate sheet if necessary)

SIGNATURE	[signature]	DATE	10/08/2024

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

29. NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy) From	To	NUMBER OF HOURS	POSITION / NATURE OF WORK
PAULINIAN STUDENT ASSISTANT	06/01/2021	06/01/2022		AUDITOR
	06/01/2020	06/01/2021		VICE PRESIDENT
	06/01/2019	06/01/2020		VICE PRESIDENT REPRESENTATIVE

(Continue on separate sheet if necessary)

VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

(Start from the most recent L&D/training program and include only the relevant L&D/training taken for the last five (5) years for Division Chief/Executive/Managerial positions)

30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy) From	To	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
BOOKKEEPING				TECHNICAL	NATIONAL INSTITUTE OF ACCOUNTING TECHNICIANS
SAINT PAUL SCHOOL OF PROFESSIONAL STUDIES STUDENT INTERNSHIP PROGRAM	08/01/2022	11/10/2022	375	TECHNICAL	MANCERA BUSINESS CONSULTANCY
NATIONAL CERTIFICATE III IN BOOKKEEPING			3	TECHNICAL	TECHNICAL EDUCATION AND SKILLS DEVELOPMENT AUTHORITY

(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
BOOKKEEPING	OUTSTANDING STUDENT ASSISTANT	ISTILD
WRITING SPOKEN WORD POETRY		

(Continue on separate sheet if necessary)

SIGNATURE		DATE	10/08/2024

34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to the chief of bureau or office or to the person who has immediate 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 - Career Employees)?	☐ YES ☑ NO ☐ YES ☑ NO If YES, give details: _____
35. a. Have you ever been found guilty of any administrative offense?	☐ 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 violation of any law, decree, ordinance or regulation by any court or tribunal?	☐ YES ☑ NO If YES, give details: _____
37. Have you ever been separated from the service in any of the following modes: resignation, retirement, dropped from the rolls, dismissal, termination, end of term, finished contract or phased - out (abolition) in the public or private sector?	☐ YES ☑ NO If YES, give details: _____
38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?	☐ YES ☑ NO If YES, give details: _____
b. Have you resigned from the government service during the three (3)-month period before the last election to promote/actively campaign for a national or local candidate?	☐ YES ☑ NO If YES, give details: _____
39. Have you acquired the status of an immigrant or permanent resident of another country?	☐ YES ☑ NO If YES, give details (country): _____
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna 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? b. Are you a person with disability? c. Are you a solo parent?	 ☐ YES ☑ NO If YES, please specify: _____ ☐ YES ☑ NO If YES, please specify ID No: _____ ☐ YES ☑ NO If YES, please specify ID No: _____

41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)

NAME	ADDRESS	TEL. NO.
ALICIA TARIMAN	TACLOBAN CITY	09466594332
LOWE TANA	PASTRANA LEYTE	09089879080
GLENN GOLGOTA	JAVIER LEYTE	09458767358

JUDY ANN M. CAMPO

42. I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I authorize the agency head/authorized representative to verify/validate the contents stated herein. I agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me.

Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) *PLEASE INDICATE ID Number and Date of Issuance*
Government Issued ID: PHILIPPINE NATIONAL ID
ID/License/Passport No.: 4684-5736-0352-0413
Date/Place of Issuance:

Signature (Sign inside the box)

Date Accomplished

Right Thumbmark

SUBSCRIBED AND SWORN to before me this 08 OCT 2024, affiant exhibiting his/her validly issued government ID as indicated above.

ATTY. JERRY S. UY
Notary Public
Until December 31, 2025
Appointment No. 2024-01-65
168 M. H. Del Pilar St., Tacloban City
PTR No. 8359166, Jan. 2, 2024, Tacloban City
Roll of Attorney No. 38363, IBP Lifetime No. 06666
MCLE Comp. No. VIII-0022733, Until April 14, 2028

Person Administering Oath

Attachment to CS Form No. 212

WORK EXPERIENCE SHEET

Instructions: ***1.*** *Include only the work experiences relevant to the position being applied to.*

2. The duration should include start and finish dates, if known, month in abbreviated form, if known, and year in full. For the current position, use the word Present, e.g., 1998-Present. Work experience should be listed from most recent first.

- Duration: MARCH 01, 2024 – DECEMBER 15, 2024
- Position: DOCUMENTOR
- Name of Office/Unit: SUPPORT TO PARCELIZATION OF LAND FOR INDIVIDUAL TITLING (SPLIT)
- Immediate Supervisor: EVA D. CALLERA AND GERMILINA SANDINO
- Name of Agency/Organization and Location: DEPARTMENT OF AGRARIAN REFORM

- List of Accomplishments and Contributions (if any)

  VALIDATED AND COMPLETED THE DOCUMENTS OF APPROXIMATELY 1,000 HECTARES AGRARIAN LANDS THAT ARE SUBJECT FOR INDIVIDUAL TITLING.

- Summary of Actual Duties

  RESPONSIBLE TO CONDUCT DOCUMENTATION TO AGRARIAN REFORM BENEFICIARIES, INTERVIEWING THE LANDOWNERS, PREPARING PAYROLL DOCUMENTS AND ASSIST DURING MEETING.

JUDY ANN M. CAMPO
(Signature over Printed Name of Employee/Applicant)

Date: 12/05/2024

Attachment to CS Form No. 212

WORK EXPERIENCE SHEET

Instructions: *1. Include only the work experiences relevant to the position being applied to.*

2. The duration should include start and finish dates, if known, month in abbreviated form, if known, and year in full. For the current position, use the word Present, e.g., 1998-Present. Work experience should be listed from most recent first.

- Duration: OCTOBER 01, 2023 – FEBRUARY 29, 2024
- Position: PROCESSOR
- Name of Office/Unit: SUPPORT TO PARCELIZATION OF LAND FOR INDIVIDUAL TITLING (SPLIT)
- Immediate Supervisor: FLORISA G. AMORES
- Name of Agency/Organization and Location: DEPARTMENT OF AGRARIAN REFORM (DAR)
- List of Accomplishments and Contributions (if any)

  COMPLETED THE VALIDATION OF 500 HAS (HECTARES) AGRICULTURAL LANDS.

- Summary of Actual Duties

  RESPONSIBLE TO PREPARE PARCELIZATION FORMS, MODIFIED FORM AND PAYROLL DOCUMENTS, ENSURING THE COMPLETENESS OF EACH FOLDERS AND ASSIST DURING INTERVIEW OF THE CLOA / TITLE HOLDERS.

JUDY ANN M. CAMPO
(Signature over Printed Name of Employee/Applicant)

Date: 12/05/2024