| CS Form No. 212 | | | | | | | | | |
|--|---|---------------------------------|---|-------------------------|-----------------|------------------------------------|------------------------|--------------------------|--|
| Revised 2017 | DEDCO | NAL DAT | A CL | ·== | _ | | | | |
| İ | PERSU | NAL DAI | АЭП | | | | | | |
| WARNING: Any misrepresenta concerned. | ation made in the Personal Data Sheet and the | Work Experience Sheet sha | all cause the fil | ling of adm | inistrative/c | riminal case/s ag | ainst the pers | son | |
| READ THE ATTACHED GUIDE | TO FILLING OUT THE PERSONAL DATA SHE | | | PDS FOR | | , | | | |
| Print legibly. Tick appropriate boxes I. PERSONAL INFORMATIO | s () and use separate sheet if necessary. Indicate I | N/A if not applicable. DO NOT A | ABBREVIATE. | | 1. CS ID No. | | (Do not fill up. I | For CSC use only | |
| 2. SURNAME | Cosido | | | | | | | | |
| FIRST NAME | James Anthony | | | | | NAME EXTENSION (J | R., SR) | | |
| MIDDLE NAME | Bacalla | | | | | | | | |
| 3. DATE OF BIRTH | 08/31/2000 | 16. CITIZENSHIP | | | | | | | |
| (mm/dd/yyyy) | 00/01/2000 | 10. GITIZENGTIII | | ☑ Filipir | no Li | Dual Citizenship | □ by naturaliz | ration | |
| 4. PLACE OF BIRTH | Hilongos, Leyte | If holder of dual citizer | nship, | nship, | | | Pls. indicate country: | | |
| 5. SEX | ☑ Male ☐ Female | please indicate the de | etails. | | | | • | | |
| | ☑ Single ☐ Married | 17. RESIDENTIAL ADDRESS | | N/A | | | N/A | • | |
| 6 CIVIL STATUS | ☐ Widowed ☐ Separated | Tr. NEGIDENTI LE ABORLOS | Hou | se/Block/Lot N | lo. | | Street | | |
| | □ Other/s: | | Sut | N/A ndivision/Villag | 10 | | Tabunok Barangay | | |
| 7. HEIGHT (m) | 1.67 | | Bato City/Municipality | | | Leyte Province | | | |
| 8. WEIGHT (kg) | 76 | ZIP CODE | - On | [У/ічинырансу | <u>′</u> | | PIUVIIILE | | |
| 9. BLOOD TYPE | N/A | 18. PERMANENT ADDRESS | N/A | | | | N/A | | |
| 10. GSIS ID NO. | N/A | - | | se/Block/Lot N N/A | | | Street Tabunok | | |
| | | _ | Sub | odivision/Villag | 10 | | Barangay Leyte | | |
| 11. PAG-IBIG ID NO. | N/A | | Ci | ty/Municipality | , | | Province | | |
| 12. PHILHEALTH NO. | 08-251731229-7 | ZIP CODE | 6525 | | | | | | |
| 13. SSS NO. | 06-4625587-9 | 19. TELEPHONE NO. | | | | N/A | | | |
| 14. TIN NO. | 630-803-919-00000 20. MOBILE NO. | | 09107746102 | | | | | | |
| 15. AGENCY EMPLOYEE NO. | N/A | 21. E-MAIL ADDRESS (if any) | jamesanthonycosido@gmail | | | ail.com | | | |
| II. FAMILY BACKGROUND | | | | | | | | | |
| 22. SPOUSE'S SURNAME | N/A | | 23. NAME of CHI | ILDREN (Write | e full name and | l list all) | DATE OF BIRT | TH (mm/dd/yyyy) | |
| FIRST NAME | N/A | NAME EXTENSION (JR., SR) | | NA | | | | N/A | |
| MIDDLE NAME | N/A | | NA | | | | N/A | | |
| OCCUPATION | N/A | - | N/A | | | | N/A | | |
| EMPLOYER/BUSINESS NAME | N/A | - | N/A | | | | N/A | | |
| BUSINESS ADDRESS | N/A | - | | N/A | | | N/A | | |
| TELEPHONE NO. | N/A | | | | NA | | N | N/A | |
| 24. FATHER'S SURNAME | COSIDO | | | | | | | | |
| FIRST NAME | ANEJUNE | NAME EXTENSION (JR., SR) | | | | | | | |
| MIDDLE NAME | BACALLA | | | | | | | | |
| 25. MOTHER'S MAIDEN NAME | • | | | | | | | | |
| SURNAME | BACALLA | | | | | | | | |
| FIRST NAME | GINA | | | | | | | | |
| MIDDLE NAME | ONLAO | | (Continue on separate sheet if necessary) | | | | | | |
| III. EDUCATIONAL BACKG | ROUND | | | | | | | | |
| 26. NAME OF SCHOOL BA | | BASIC EDUCATION/DEGRE | EE/COURSE | PERIOD OF | ATTENDANCE | HIGHEST LEVEL/ | YEAR | SCHOLARSHIP/ ACADEMIC | |
| LEVEL | (Write in full) | (Write in full) | | From | То | UNITS EARNED (if not graduated) | GRADUATED | | |
| | | | | 110111 | 10 | | | | |

| MIDDLE NAME | ONLAO | | | (Continue on separate sheet if necessary) | | | | |
|---|--|--------------------------------|------------|---|--|--------------------|-------------|----------------------|
| III. EDUCATIONAL BACKGROUND | | | | | | | | |
| 26. LEVEL | BASIC EDUCATION/DEGRE (Write in full) | DAGIC EDUCATION/DEGINEE/COUNGE | | ATTENDANCE | HIGHEST LEVEL/ UNITS EARNED (if not graduated) | YEAR GRADUATED | | |
| | | | | From | То | (ii not graduatou) | | RECEIVED |
| ELEMENTARY | Bato Central School | Elementary | 06/07/2007 | 04/05/2013 | N/A | 2013 | N/A | |
| SECONDARY | Bato School of Fisheries | Junior High Schoo | 06/05/2013 | 04/06/2017 | N/A | 2017 | N/A | |
| VOCATIONAL / TRADE COURSE | Hilongos National Vocational School | Senior High Scho | 06/09/2017 | 04/05/2019 | N/A | 2019 | With Honors | |
| COLLEGE | Visayas State University | College | | 08/04/2019 | 08/03/2023 | N/A | 2023 | CHED FULL SCHOLAR |
| GRADUATE STUDIES | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| (Continue on separate sheet if necessary) | | | | | | | | |
| SIGNATURE | 4 Pera | | | DA | TE | September 07, 2023 | | |

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| IV. CIVIL SERVICE ELIGIBILITY 27. CAREER SERVICE/RA 1080/BOARD/ BARVI INDER DATE OF LICENSE (if applicable) | | | | | | | | | |
|---|--------------------------|--|---------------------|-----------------------------------|----------------------------|---------------|--|-------------|------------------|
| 27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANCA F LICINITY UNDER PREVIOUS (If Applicable) | | DATE OF EXAMINATION / CONFERMENT | PLACE OF EXAMINA | PLACE OF EXAMINATION / CONFERMENT | | | Date of | | |
| BARANGAY ELIGIBILITY / DRIVER'S LICENSE N/A | | | N/A | | | NUMBER N/A | Validity N/A | | |
| | N/A N/A | | IVA | N/A | | | N/A | N/A | |
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| V WORK F | XPERIENCE | | (Co | ntinue on separate sheet | if necessary) | | | | |
| (Include priva | ate employme | nt. Start from your recen | t work) Description | n of duties should b | e indicated in the attache | d Work Exp | | | |
| | SIVE DATES n/dd/yyyy) | POSITION TI | | | ENCY / OFFICE / COMPANY | MONTHLY | SALARY/ JOB/ PAY GRADE (if applicable)& STEP | STATUS OF | GOV'T SERVICE |
| From | То | (Write in full/Do not | appreviate) | (Write in ful | I/Do not abbreviate) | SALARY | applicable)& STEP (Format "00-0")/ INCREMENT | APPOINTMENT | (Y/N) |
| N/A | N/A | N/A | | | N/A | N/A | N/A | N/A | N/A |
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| SIGNA | TURE | | 4 de la Co. | | DATE | | September 07, 2 | | |
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| VI. VOLUNTARY WORK OR INVOLVEMENT I | N CIVIC / NON-GOVERNMENT / | / PEOPLE / VO | DLUNTARY O | RGANIZATIOI | V/S | | |
|---|----------------------------|--|--------------------------------|-----------------|---|--|--|
| 29. NAME & ADDRESS OF OF (Write in full) | | INCLUSIVE DATES (mm/dd/yyyy) From To | | NUMBER OF HOURS | | POSITION / NATURE OF WORK | |
| Zea mays Mens Hall Dormitory (Visayas State University) | | | 06/20/2023 | 270.0 | Big Brod and S | ecretary | |
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| | | tinue on separate : | | | | | |
| VII. LEARNING AND DEVELOPMENT (L&D) | INTERVENTIONS/TRAINING PR | | | | | | |
| 30. TITLE OF LEARNING AND DEVELOPMENT INTE (Write in full) | | (Hilliada yyyy) | | NUMBER OF HOURS | Type of LD (Managerial/ Supervisory/ Technical/etc) | CONDUCTED/ SPONSORED BY (Write in full) | |
| On- the- Job Training at Rimils Integrated Farm | | From 03/25/2023 | To 05/10/2023 | 240.0 | Student Intern | Mr. Ricardo Bales and Mrs. Milagros Bales | |
| Summer Practicum (Skills Development) | | 07/04/2022 | 08/04/2022 | 240.0 | Student | De Wieter B. Asia | |
| | | | | | | Dr. Victor B. Asio | |
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| | (Con | tinue on separate : | shoot if nocessary | | | | |
| VIII. OTHER INFORMATION | (con | unue on separate . | meet ii neeessary) | | | | |
| 31. SPECIAL SKILLS and HOBBIES | 32. NON- | -ACADEMIC DISTIN (Write | ICTIONS / RECOGI e in full) | NITION | | 33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full) | |
| Can do computer work with less supervision such as Ms Word, Excel and PPT | | N/A | | | | | |
| Can handle stress and easy to be with | | | | | | | |
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| SIGNATURE | (Con | (Continue on separate sheet if necessa | | | ATE | September 07, 2023 | |

| 34. | Are you related by consanguinity or aminity to the appointing chief of bureau or office or to the person who has immediate Bureau or Department where you will be apppointed, a. within the third degree? | ☐ YES ☑ | ☑ NO | | | | |
|-----|---|--|----------------------------------|-----------------------------------|--|--|--|
| | b. within the fourth degree (for Local Government Unit - Care | ☐ YES ☑ NO If YES, give details: | | | | | |
| 35. | a. Have you ever been found guilty of any administrative offe | ☐ 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 an any court or tribunal? | ☐ YES ☑ NO If YES, give details: | | | | | |
| 37. | Have you ever been separated from the service in any of the dropped from the rolls, dismissal, termination, end of term, find 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 electron are described by the second s | ☐ YES ☑ NO If YES, give details: | | | | | |
| | b. Have you resigned from the government service during the election to promote/actively campaign for a national or local | ☐ YES ☑ NO If YES, give details: | | | | | |
| 39. | Have you acquired the status of an immigrant or permanent | ☐ YES ☑ NO If YES, give details (country): ———————————————————————————————————— | | | | | |
| 40. | Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag and (c) Solo Parents Welfare Act of 2000 (RA 8972), please | | | | | | |
| a. | Are you a member of any indigenous group? | ☐ YES If YES, please specify: | ☑ NO | | | | |
| b. | Are you a person with disability? | ☐ YES ☑ NO 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 applicant | nt /appointee) | | | | | |
| | NAME | ADDRESS | TEL. NO. | | | | |
| | Malvin B. Datan | Malvin.datan@vsu.edu.ph | 0907-366-2793 | 33 | | | |
| | | | | | | | |
| 42. | I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertin Philippines. I authorize the agency head/authorized represe agree that any misrepresentation made in this docu administrative/criminal case/s against me. | ent laws, rules and regulations of the entative to verify/validate the contents stat | Republic of the ed herein. | РНОТО | | | |
| | iovernment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) LEASE INDICATE ID Number and Date of Issuance | 46 | | | | | |
| | overnment Issued ID: | 9900 | | | | | |
| IC | D/License/Passport No.: | pox) | | | | | |
| D | ate/Place of Issuance: | | Right Thumbmark | | | | |
| | SUBSCRIBED AND SWORN to before me this | , affiant exhib | iting his/her validly issued | government ID as indicated above. | | | |
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