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 READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM. (Do not fill up. For CSC use only) Print legibly. Tick appropriate boxes (\sum and use separate sheet if necessary. Indicate N/A if not applicable. **DO NOT ABBREVIATE.** 1. CS ID No. I. PERSONAL INFORMATION MORALES 2 SURNAME N/A NAME EXTENSION (JR., SR) FIRST NAME RESYL BEI SIMPRON MIDDLE NAME 3. DATE OF BIRTH 10/02/1999 16. CITIZENSHIP ✓ Filipino Dual Citizenship (mm/dd/yyyy) BAYBAY CITY LEYTE 4. PLACE OF BIRTH If holder of dual citizenship, Pls. indicate country: please indicate the details. Male ✓ Female 5. SEX **Philippines** R.MAGSAYSAY AVENUE ✓ Single Married 17. RESIDENTIAL ADDRESS N/A 6 CIVIL STATUS House/Block/Lot No. Widowed Separated N/A **POBLACION ZONE 21** Other/s: Subdivision/Village Barangay BAYBAY LEYTE 7. HEIGHT (m) 1.52 City/Municipality Province 58 8. WEIGHT (kg) ZIP CODE 6521 N/A R.MAGSAYSAY AVENUE 18. PERMANENT ADDRESS 9. BLOOD TYPE N/A House/Block/Lot No. N/A POBLACION ZONE 21 N/A 10. GSIS ID NO. Subdivision/Village Barangay **BAYBAY** LEYTE 121349685789 11. PAG-IBIG ID NO. City/Municipality Province 13-202878992-4 12. PHILHEALTH NO. ZIP CODE 6521 13. SSS NO. 06-4886383-2 N/A 19. TELEPHONE NO. 652104159 14. TIN NO. 20. MOBILE NO. 09513984416 N/A resylbei@gmail.com 15. AGENCY EMPLOYEE NO. 21. E-MAIL ADDRESS (if any) I. FAMILY BACKGROUND N/A DATE OF BIRTH (mm/dd/yyyy) 23. NAME of CHILDREN (Write full name and list all) 22. SPOUSE'S SURNAME NAME EXTENSION (JR., SR) N/A N/A N/A N/A FIRST NAME N/A

MIDDLE NAME

OCCUPATION	N/A								
EMPLOYER/BUSINESS NAME	N/A								
BUSINESS ADDRESS	N/A								
TELEPHONE NO.	N/A								
24. FATHER'S SURNAME	MORALES								
FIRST NAME	JOEL	NAME EXTENSION	ON (JR., SR) N/A						
MIDDLE NAME	CRUZ								
25. MOTHER'S MAIDEN NAME	CLARITA SERATO SIMPRON								
SURNAME	MORALES								
FIRST NAME	CLARITA								
MIDDLE NAME	SIMPRON		(Continue on separate sheet if necessary)						
III. EDUCATIONAL BACKG	ROUND								
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC E	OUCATION/DEGR (Write in full)	EE/COURSE	PERIOD OF ATTENDANCE		HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUA TED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
	,				From	То	(ii flot graduated)	ILD	
ELEMENTARY	CARLOS P GARCIA ELEM. SCHOOL		ELEMENTAR	Y	2006	2012	GRADUATED	2012	SALUTATORIAN
SECONDARY	BAYBAY NATIONAL & BAYBAY CITY SENIOr HIGH SCHOOL	JUNIOR	& SENIOR HIG	SH SCHOOL	2012	2018	GRADUATED	2018	WITH HONORS
VOCATIONAL / TRADE COURSE	N/A	N/A			N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	-	ELOR OF SEC N MAJOR IN M	ONDARY IATHEMATICS	2018	2023	GRADUATED	2023	N/A
GRADUATE STUDIES	N/A	N/A			N/A	N/A	N/A	N/A	N/A
		(Continue on s	separate sheet if	necessary)					
SIGNATURE			DATE				CS FORM 2	212 (Revised	2017), Page 1 of 4

IV. CIVIL SERVICE ELIGIBILITY									
	SPECIAL LA	080 (BOARD/ BAR) UNDER WS/ CES/ CSEE	RATING (If Applicable)	DATE OF EXAMINATION /	PLACE OF EXAMI	NATION / CONFERM	ENT	LICENSE (if appl	Date of
BARANGAY ELIGIBILITY / DRIVER'S LICENSE LET (LICENSURE EXAMINATION FOR TEACHERS) 87.20%			03/17/2024	TACLOBAN CITY			2198393	Validity 10/02/2027	
LET (LIOLING	ONE EXAMINA	ATION TON TEACHERO	01.2070			JDAN OIT I		2190393	10/02/2027
NOTHING FOLLOWS									
				(Continue on separa	te sheet if necessary)				
	XPERIENCE ate employme	nt. Start from your recen	t work) Description	on of duties should	be indicated in the attacl	ned Work Experi	ience 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	То								
01/06/2025	01/30/25	Part-time Inst	ructor	VSU INTEGRA	ATED HIGH SCHOOL	18,000.00	N/A	CONTRACTUAL	Υ
				NOTHING	FOLLOWS				

SIGNA	TURE		DATE		CS F	ORM 212 (Revised 2017), Pag	je 2 of 4
		(Continu	ıe on separa	te sheet if necessary)			

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT	/PEOPLE/V	OLUNTARY O	RGANIZATIOI	V/S		
29. NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK		
	From	То				
N/A	N/A	N/A	N/A		N/A	
	ntinue on separate					
VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PI Start from the most recent L&D/training program and include only the relevant L&D/training taken fo			ief/Executive/Mana	agerial positions)		
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/	CONDUCTED/ SPONSORED BY (Write in full)	
	From	То		Technical/etc)		
TRAINING OR SEMINAR FOR BASIC COMPUTER LITERACY	11/14/2024	11/25/2024	80	TECHNICAL	ELTECH LEARNING HUB	
	NOTHING	FOLLOWS				

SIGNATURE			DATE				CS FORM 212 (Revised 2017), Page 3 of 4	
	(Continue on separate sheet if necessary)							
N/A		N/A						
31. SPECIAL SKILLS and HOBBIES	32.	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full) 33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)						
VIII. OTHER INFORMATION								
		(Continue on separate s	heet if necessary)					

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?	☐ YES ✓ NO	
	b. within the fourth degree (for Local Government Unit - Career Employees)?	☐ YES	
		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:	
20	Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation		
30.	by any court or tribunal?	☐ YES ✓ NO If YES, give details:	
		ii i Lo, give detaiis.	
37	Have you ever been separated from the service in any of the following modes: resignation,	YES NO	
0	retirement, dropped from the rolls, dismissal, termination, end of term, finished contract or phased	☐ YES ☑ NO If YES, give details:	
	out (abolition) in the public or private sector?		
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?	☐ YES ✓ NO	
h	Are your a name on with disability O	If YES, please specify:	
b.	Are you a person with disability?	☐ YES ☑ NO If YES, please specify ID No:	
C.	Are you a solo parent?		
		If YES, please specify ID No:	

41. REFERENCES (Person not related by consanguinity or affinity to applicant									
NAME	ADDRESS	TEL. NO.	ID picture taken within the last 6 months						
SHERAMIE CENO	BRGY. PICAS SUR ABUYOG LEYTE	9660212272	3.5 cm. X 4.5 cm (passport size)						
ESTEVIN QUILLA	SOGOD SOUTHERN LEYTE	9367650688	With full and handwritten						
			name tag and signature over printed name						
42. I declare under oath that I have personally accomplished complete statement pursuant to the provisions of perting Philippines. I authorize the agency head/authorized represed agree that any misrepresentation made in this doct administrative/criminal case/s against me.	e Republic of the ated herein.	Computer generated or photocopied picture is not acceptable PHOTO							
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance									
Government Issued ID: PROFESSIONAL IDENTIFICATION CARD									
ID/License/Passport No.: 2198393	Signature (Sign inside the b	box)							
Date/Place of Issuance: ORMOC CITY/06/20/24									
SUBSCRIBED AND SWORN to before me this , affiant exhibiting his/her validly issued government ID as indicated above.									
<u> </u>	Person Administering Oa								