CS Form No. 212 Revised 2017		PERSO	NAL DAT	A SH	IEE1				
WARNING: Any misrepresentat	tion made in the Persona	l Data Sheet and the V	Nork Experience Sheet shall	cause the filin	ng of admin	istrative/cri	minal case/s agai	nst the perso	n concerned.
READ THE ATTACHED GUIDE	_						1		
Print legibly. Tick appropriate boxes  I. PERSONAL INFORMATION		et if necessary. Indicate I	N/A if not applicable. DO NOT A	ABBREVIATE.		1. CS ID No.		(Do not fill up.	For CSC use on
2 SURNAME	ESTEMBER								
_							N/A		
FIRST NAME	MATTHEW EMAN AND	SELO							
MIDDLE NAME	MORETO		T						
<ol> <li>DATE OF BIRTH (mm/dd/yyyy)</li> </ol>	25/04/	2000	16. CITIZENSHIP		✓ Filipin	10	Dual Citizenship		
								by naturaliz	ration
4. PLACE OF BIRTH	TACLOBA	AN CITY	If holder of dual citizer				Pls. indicate	country:	
5. SEX	<b>✓</b> Male	Female	please indicate the de	tails.					•
6 CIVIL STATUS	✓ Single	Married	17. RESIDENTIAL ADDRESS		N/A		COR. R	REAL AND LASTF	RILLA
	☐ Widowed ☐ Other/s:	Separated		Нои	ise/Block/Lot Ni N/A	0.		Street	
	Other/s:			Su	bdivision/Village	9		Barangay	
7. HEIGHT (m)	1.6	66		С	JARO ity/Municipality			LEYTE Province	
8. WEIGHT (kg)	66		ZIP CODE		6527				
9. BLOOD TYPE	0	+	18. PERMANENT ADDRESS	Hav	N/A ise/Block/Lot N	•	COR. R	EAL AND LASTF	RILLA
10. GSIS ID NO.	N/	Δ		nou	N/A	U		III	
	·				Subdivision/Village JARO			Barangay LEYTE	
11. PAG-IBIG ID NO.	1213048	813157		С	ity/Municipality			Province	
12. PHILHEALTH NO.	13-25055	7260-6	ZIP CODE		6527				
13. SSS NO.	06-4451360-7		19. TELEPHONE NO.		N/A				
14. TIN NO.	623-259-486		20. MOBILE NO.		09272919323/ 09856191271				
15. AGENCY EMPLOYEE NO.	N/A		21. E-MAIL ADDRESS (if any)		matth	new.ester	mber25@gma	ail.com	
II. FAMILY BACKGROUND									
22. SPOUSE'S SURNAME		N/A		23. NAME of CHI	LDREN (Write		st all)	DATE OF BIR	TH (mm/dd/yyyy)
FIRST NAME	N/A	A	N/A			N/A		ı	N/A
MIDDLE NAME		N/A							
OCCUPATION		N/A							
EMPLOYER/BUSINESS NAME		N/A							
BUSINESS ADDRESS		N/A							
TELEPHONE NO.		N/A							
24. FATHER'S SURNAME		ESTEMBER							
FIRST NAME	RUB		N/A						
MIDDLE NAME	- Nos	PORE							
25. MOTHER'S MAIDEN NAME		TORE							
		MODETO							
SURNAME		MORETO							
FIRST NAME	AMANDA							L	
MIDDLE NAME					(0	ontinue on se	parate sheet if neces	sary)	
III. EDUCATIONAL BACKG	ROUND								SCHOLARSHIP
26. LEVEL	NAME OF (Write i		BASIC EDUCATION/DEGRE (Write in full)	E/COURSE	PERIOD OF A	ATTENDANCE	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	ACADEMIC HONORS
					From	То			RECEIVED
ELEMENTARY	JARO 1 CENTE	RAL SCHOOL	ELEMENTARY		06/06/2006	03/24/2012	GRADUATED	2012	N/A

WIIDDEL NAWL	DADIONOAN			(bontande on separate sheet in necessary)					
III. EDUCATIONAL BACKGROUND									
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGRE (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)		ATTENDANCE	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED		
				From To		(		RECEIVED	
ELEMENTARY	JARO 1 CENTRAL SCHOOL	ELEMENTARY		06/06/2006	03/24/2012	GRADUATED	2012	N/A	
SECONDARY	NOTRE DAME OF JARO INCORPORATED	SENIOR HIGH SCHOOL		06/14/2012	06/18/2018	GRADUATED	2018	N/A	
VOCATIONAL / TRADE COURSE	N/A	N/A		N/A	N/A	N/A	N/A	N/A	
COLLEGE	PALOMPON INSTITUTE OF TECHNOLOGY	BACHELOR OF SCIENCE IN HOSPITALITY MANAGEMENT		08/14/2018	07/17/2022	GRADUATED	2022	N/A	
GRADUATE STUDIES	UNIVERSITY OF THE PHILIPPINES TACLOBAN  MASTER OF MANAGEMENT MAJOR IN BUSINESS MANAGEMENT			08/14/2024	N/A	N/A	N/A	N/A	
(Continue on separate sheet if necessary)									
SIGNATURE					TE				

IV. CIVIL SERVICE ELIGIBILITY									
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWK/ CES/ CSEE RATING		DATE OF EXAMINATION / PLACE OF EXAMINATION / CONFERMENT			LICENSE (if applicable)				
SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE  (If Applicable)			CONFERMENT				NUMBER	Date of Validity	
CAREER SERVICE PROFESSIONAL 80.9			08/07/2022	NAVAL,BILIRAN			N/A	N/A	
			(Con	ntinue on separate sheet	if necessary)				
	XPERIENCE					W 1 =			
	ate employmen ISIVE DATES	t. Start from your recent	work) Description (	of duties should be i	ndicated in the attached \	vork Experie	SALARY/ JOB/ PAY		001
	m/dd/yyyy)	POSITION T (Write in full/Do not			ENCY / OFFICE / COMPANY //Do not abbreviate)	MONTHLY SALARY	GRADE (if applicable)& STEP (Format "00-0")/	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)
From	То	·		,	OURISM AND HOSPITALITY		INCREMENT	CONTRACTUA	
01/29/2024	05/26/2024	INSTRUCT	OR	MANAGEMENT VIS	AYAS STATE UNIVERSITY	13500.00	156.5/Day	L	Y
08/14/2023	12/07/2023	CHAT ADV	SOR		ESS OUTSOURCING INCORPORATED	12000.00	N/A	PERMANENT	N
03/18/2023	07/21/2023	VISUAL DISPLA	Y ARTIST	METRO RETAIL ST	10000.00	N/A	PROBATIONA RY	N	
12/28/2022	03/05/2023	UTILITY	1	CLEVERMASTER	7500.00	N/A	PERMANENT	N	
09/19/2022	12/04/2022	CALL CENTER	AGENT	MANCAO E-C SO	15000.00	N/A	PERMANENT	N	
09/14/2021	05/25/2022	BARTEND	ER	TWE	7500.00	N/A	PERMANENT	N	
			16	tinuo on concerto ab	if necessary				
SIGNA	ATURE		(Cor	ntinue on separate sheet	DATE				
310117					DATE			S FORM 212 (Revised 20	47.5

		IN CIVIC / NON-GOVERNMENT /				N/S	
29.	NAME & ADDRESS OF OF (Write in full)			/E DATES d/yyyy) To	NUMBER OF HOURS		POSITION / NATURE OF WORK
N/A			N/A	N/A	N/A	N/A	
VII I EADNING	S AND DEVELOPMENT (180)	(Con INTERVENTIONS/TRAINING PR	tinue on separate		)		
VII. ELAKKING	SAND DEVELOT MENT (EQD)	INTERVENTIONS/TRAINING FR					
30. TITLE	OF LEARNING AND DEVELOPMENT INTE (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)
N/A			N/A	N/A	N/A	N/A	N/A
		(Con	tinue on separate	sheet if necessary	)		
VIII. OTHER IN	IFORMATION						
31. S	PECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)					33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	DRIVING	N/A					N/A
	TEACHING						
ADMI	NISTRATIVE DUTIES						
MICROS	OFT WORD, EXCEL, PPT						
COI	MPUTER LITERATE						
		10	tinue on sonarat-	shoot if nocesses			
	SIGNATURE	(Con	tinue on separate	meet ii necessary		ATE	

34.	Are you related by consanguinity or affinity to the appointin chief of bureau or office or to the person who has immediat Bureau or Department where you will be apppointed,						
	a. within the third degree?	☐ YES ☑ NO					
	b. within the fourth degree (for Local Government Unit - Ca	YES	✓ NO				
			If YES, give deta	ils:			
35.	a. Have you ever been found guilty of any administrative of	fense?	YES	<b>☑</b> NO			
			If YES, give deta	ils:			
	b. Have you been criminally charged before any court?		☐ YES ☑ NO				
			If YES, give detain Date Filed:	ls:			
			Status of Case/s:				
36	Have you ever been convicted of any crime or violation of a	any law. decree. ordinance or regulation		Пио			
	by any court or tribunal?	, , ,	☐ YES     ☑ NO If YES, give details:				
			, ,				
37.	Have you ever been separated from the service in any of the	ne following modes: resignation,	✓ YES	□NO			
	retirement, dropped from the rolls, dismissal, termination, e	end of term, finished contract or phased	If YES, give deta	ils:			
00	out (abolition) in the public or private sector?  a. Have you ever been a candidate in a national or local ele	potion hold within the last year (except		ESIGNATION and Finished Contract			
38.	Barangay election)?	ection neid within the last year (except	☐ YES ☑ NO If YES, give details:				
	b. Have you resigned from the government service during t election to promote/actively campaign for a national or loca		<del></del>				
_			If YES, give deta				
39.	Have you acquired the status of an immigrant or permanen	it resident of another country?	☐ YES ☑ NO If YES, give details (country):				
			ii 1ES, give deta	is (country).			
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma	gna Carta for Disabled Persons (RA	'				
	7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972)						
a.	Are you a member of any indigenous group?		YES	▼ NO			
b.	Are you a person with disability?		If YES, please specify:  ☐ YES  ☑ NO				
	, , , , , , , , , , , , , , , , , , ,		If YES, please speci				
C.	Are you a solo parent?	YES	☑ NO				
			If YES, please speci	יטא טו עו:			
41.	REFERENCES (Person not related by consanguinity or affinity to applicant	/appointee)					
	NAME	ADDRESS	TEL. NO.	ID picture taken within			
	REYNDYLL AREVALO	PALO, LEYTE	9934094795	the last 6 months 4.5 cm. X 3.5 cm (passport size)			
	RENE BUSQUE	BAYBAY CITY	9706953099				
	NOL ARTOZA	JARO, LEYTE	9773607261	Computer generated or photocopied picture is not acceptable			
42.	I declare under oath that I have personally accomplished	this Personal Data Sheet which is a tr	ue. correct and	is not assoptable			
	complete statement pursuant to the provisions of pertin	ent laws, rules and regulations of the F	Republic of the				
	Philippines. I authorize the agency head/authorized repr I agree that any misrepresentation made in this doc			PHOTO			
	administrative/criminal case/s against me.	ument and its attachments shall caus	e the lilling of	FIIOTO			
	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)  LEASE INDICATE ID Number and Date of Issuance						
	overnment Issued ID:						
H	//License/Passport No.:						
lH	·	Signature (Sign inside the bo	ox)	[ ]			
D	ate/Place of Issuance:		Right Thumbmark				
	SUBSCRIBED AND SWORN to before me this	ng his/her validly issue	d government ID as indicated above.				
	<u> </u>		,	- 			
		h					
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