CS Form No. 212 Revised 2017	PERSONAL DATA SHEET SHEE							
WARNING: Any misrepresenta concerned. READ THE ATTACHED GUIDE Print legibly. Tick appropriate boxes	TO FILLING OUT THE PER	SONAL DATA SHI	EET (PDS) BEFORE ACCOM	MPLISHING TH	e filing of administrative/crimina HE PDS FORM. 1. CS ID No.	al case/s against the person  (Do not fill up. For CSC use only		
Print legibly. Tick appropriate boxes  I. PERSONAL INFORMATIO	NAME AND ADDRESS OF TAXABLE PARTY.	il flecessary. Illulcate	s N/A il flot applicable. BO NO	ABBREVIATE	i contra	(Boilet in spirit a cool case and		
2. SURNAME	BASALO							
FIRST NAME	DANILO		1		NAME EXT	TENSION (JR, SR) JR.		
MIDDLE NAME	ALBISO							
DATE OF BIRTH     (mm/dd/yyyy)	01/04/1	993	16. CITIZENSHIP			itizenship		
4. PLACE OF BIRTH	BAYBAY CIT	Y, LEYTE	If holder of dual citize	enship,		indicate country:		
5. SEX	✓ Male	Female	please indicate the d	letails.				
6 CIVIL STATUS	☑ Single	Married	17. RESIDENTIAL ADDRESS			EMILIO JACINTO		
	☐ Widowed ☐ Other/s:	Separated		Но	use/Block/Lot No.	Street ZONE IS		
T UTOUT (-)	3 TO Soldington 1 STORUM 1	FIGE / COMPANY CHANGE)	O CHOM BUAN TYPEN RAYERS I ton o'O' (ii) in un'NY)		ubdivisionVillage	Barangay LEYTE		
7. HEIGHT (m)	1.64 m		710,0005		City/Municipality	Province		
8. WEIGHT (kg)	55 Kg		ZIP CODE  18. PERMANENT ADDRESS	(521 137 A		EMILIO JACINTO		
9. BLOOD TYPE	N/A		10. FERMANENI ADDRESS	Ho	use/Block/Lot No.	Street		
10. GSIS ID NO.	N/A			S	ubdivision/Village	20NE 18 Barangay		
11. PAG-IBIG ID NO.	N/A			BAY BAY City/Municipality		LEY TE Province		
12. PHILHEALTH NO.	13-02560189	71-9	ZIP CODE	6521				
13. SSS NO.	N/A		19. TELEPHONE NO.	N/A				
14. TIN NO.	N/A		20. MOBILE NO.	09073114823				
15. AGENCY EMPLOYEE NO.	N/A		21. E-MAIL ADDRESS (if any)	bibabz.basalo@		amail.com		
II. FAMILY BACKGROUND								
22. SPOUSE'S SURNAME	N/A			23. NAME of CI	HILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)		
FIRST NAME	N/A		NAME EXTENSION (JR., SR)		4/4			
MIDDLE NAME	N/A							
OCCUPATION	N/A							
EMPLOYER/BUSINESS NAME	N/A				Anna 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
BUSINESS ADDRESS	N/A			-				
TELEPHONE NO.	N/A							
24. *FATHER'S SURNAME	BASALO							
FIRST NAME	DANILO		NAME EXTENSION (JR., SR)					
MIDDLE NAME	TABA			-				
25. MOTHER'S MAIDEN NAME	ALBISO							
SURNAME	BASALO							

	and address to the control of the co	the court of the c			Name of the owner, when the second	A THE REAL PROPERTY AND PERSONS ASSESSMENT			
MIDDLE NAME	MEÑOZA		(Continue on separate sheet if necessary)						
II. EDUCATIONAL BA	CKGROUND								
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE		HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED			
			From	То	(ii flot gladdated)		RECEIVED		
ELEMENTARY	CARLOS P. GARCIA ELEMENTARY		1999	2005	NA	2005	N/A		
SECONDARY	BAYBAY NATIONAL HIGHISCHOOL		2005	2009	N/A	2009	N/A		
VOCATIONAL / TRADE COURSE	BAYBAY TECH-VOC	ELECTRICAL INSTAUATION AND MANUTENANCE NCIL	JAN. 2022	FEB. 2022	N/A	2022	11/4		
COLLEGE	ONIVERSITY	BACHEWR OF ANIMAL SCIENCE	2014	2019	A)4	2019	NA		
GRADUATE STUDIES	H/A	N/A	N/A	N/A	N/A	N/A	NA		
	(Co	ontinue on separate sheet if necessary)							

FIRST NAME

SIGNATURE

CLARA

FEBRUARY 10, 2023

DATE

27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE		RATING (If Applicable)	DATE OF EXAMINATION /	PLACE OF EXAMINATION / CONFERMENT			LICENSE (if applicable)		
	RANGAY ELIGIBILITY			CONFERMENT				NUMBER	Validity
ROFESS	IONAL EXA	MINAUDN	80.27	DI A SEPORE ACCOMPLI	GOUTHERN L	EYTE	TO PILLING OF	ny miaraprasan TTACHED GUID	RNRNG: A cemed. VD THE A
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Work			(Co	ontinue on separate sheet if					
	XPERIENCE ate employment.	Start from your recent	work) Descripti	on of duties should be	indicated in the attach	ed Work Ex			
	SIVE DATES n/dd/yyyy)	POSITION TI (Write in full/Do not a			CY / OFFICE / COMPANY o not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVIC (Y/ N)
N /#	To N/A	N/A	(a)	A STREET	'A	NA	N/A	N/A	NIA
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VI. VOLUNTARY WORK OR INVOLVEME	ENT IN CIVIC / NON-GOVERNMEN	T/PEOPLE/\	/OLUNTARY	ORGANIZATIO	DN/S	h campara mask arsin i
29. NAME & ADDRESS (Write		INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK	
O NO		From	То			a within the third degree?
N/A ON I	[ ] YES [	N/t	N/A	N/A	U Inammevo	b within the fourth degr. ANY Local Go
				Coppello quit	atpinimine un	s. a. Have you ever been found guilty of a
	I'il yes File (YES, give deutls.			76110-10-044	resimina (	o w thing more room state of path to 3
CM IV	If YES, give details:			\ \frac{1}{2}	dos yns enok	b. Have you been unminally charged bo
, VII. LEARNING AND DEVELOPMENT (L		ntinue on separate PROGRAMS A		y)		
Start from the most recent L&D/training program and  30. TITLE OF LEARNING AND DEVELOPMENT		INCLUSIVE ATTEM	DATES OF	Chief/Executive/Ma	Type of LD ( Managerial/	CONDUCTED/ SPONSORED BY
(Write)	in full)	(mm/d	d/yyyy) To	NUMBER OF HOURS	Supervisory/ Technical/etc)	(Write in full)
N/A	Tassu out   17 Tass, give detens:	P/F	N/A	N/A	N/A	٨/٨
[7] но	pay [7] Jugo	a last year (ax	It radiov bla	r noi bale isos	Lao Isriolism	racceronn in the begin or onvere secons.
	If YES, give details					Barangay elaction)
ON [V]	est [] tasi ed	period being	r#som-(8) s	uring the three	ant service o	b. Have you resigned from the govern
	il (E.S., give Details		1195	or toxal carry	tisnotisms to	Eloslion to promote facility vampaign
ON [2]	ETY:	T gánusa s	nilona in in	schormonen	ang no in ongin	g. Have you soughed the status of an infi
	38.030.0500					
	AR	iled Persons (	sall to an	(a) Magnaria	1 (RA 8371)	Pursuant to: (a) Incigenous People's A
	- 28	THE CHIWONOLS	ee tewene	* 69 / 2/ (5/ Kg	Course	721 (), and (d) son Parchis Wellard A
DM 18	If YES, please sperify:					Securities to security and our
ои 🖸	SHY []					Are you a parson with disability?
N MO	27 VIII					Aca vou a solo parent?
ID Not	if YES, please specify					
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VIII. OTHER INFORMATION	(CO)	ntinue on separate	sneet if necessar	<i>y</i>		
31. SPECIAL SKILLS and HOBBIES	32. NON	N-ACADEMIC DISTII (Writ	NCTIONS / RECO	GNITION	Objeta Leónica, es ESTRACOS	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
COMPUTER LITERATE	1	N/A				Covernment leavest transment Covernment leavest transment Covernment leavest transment leavest leave
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	4 1	ntinue on separate				
SIGNATURE	om.	rson Administ	99	DA	ATE	FEBRUARY 10, 2023 CS FORM 212 (Revised 2017), Page 3 of

34. Are you related by consanguinity or affinity to the appointing or	5. [1] [1] [1] [2] [2] [2] [2] [2] [2] [2] [2] [2] [2					
chief of bureau or office or to the person who has immediate su	5. [1] [1] [1] [2] [2] [2] [2] [2] [2] [2] [2] [2] [2	PERMITTER IN	MANUEL STATE OF THE STATE OF TH			
Bureau or Department where you will be apppointed,			tet ni obstati)			
a. within the third degree?	YES	✓ NO				
b. within the fourth degree (for Local Government Unit - Career	☐ YES	✓ NO				
		If YES, give deta	ails:			
35. a. Have you ever been found guilty of any administrative offense	e?	☐ YES	☑ NO			
		If YES, give details:				
b. Have you been criminally charged before any court?		YES	☑ NO			
		If YES, give deta				
		Date Filed Status of Case/s				
	Separated Silvers St. Light Ave. (4)	Participation of the second				
66. Have you ever been convicted of any crime or violation of any la	aw, decree, ordinance or regulation by	☐ 1E3	✓ NO			
any court or tribunal?		If YES, give deta	ails:			
		A S CALLEGOTT LANCOTT MOLTE	20 TAY E OF LEAGUNG AND DEVELOPING NEW TOTAL			
37. Have you ever been separated from the service in any of the fol	llowing modes: resignation.	YES	T 110			
retirement, dropped from the rolls, dismissal, termination, end or			✓ NO ails:			
(abolition) in the public or private sector?	4/4 4/4		A) of			
88. a. Have you ever been a candidate in a national or local election	n held within the last year (except	☐ YES	☑ NO			
Barangay election)?		If YES, give details:				
· · · · · · · · · · · · · · · · · · ·	(O)					
<ul> <li>b. Have you resigned from the government service during the the election to promote/actively campaign for a national or local can</li> </ul>		YES NO				
		If YES, give details:				
39. Have you acquired the status of an immigrant or permanent res	ident of another country?	☐ YES ☑ NO				
		If YES, give details (country):				
0. 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), ple						
Are you a member of any indigenous group?		☐ YES	☑ NO			
		If YES, please spec	cify:			
Are you a person with disability?		☐ YES	✓ NO			
		If YES, please spec	cify ID No:			
Are you a solo parent?		☐ YES	✓ NO			
		If YES, please spec	cify ID No:			
REFERENCES (Person not related by consanguinity or affinity to applicant /ap	ongintee)					
		T 751 110				
NAME	ADDRESS	TEL. NO.				
N/A	N/A	N/A				
		25				
			4 62			
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12. I declare under oath that I have personally accomplished this complete statement pursuant to the provisions of pertinent						
Philippines. I authorize the agency head/authorized representat			Ent.			
agree that any misrepresentation made in this documer			DANILO A. BASALO JR			
administrative/criminal case/s against me.	Company & Section Section (1) of the Section (1)					
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	Signature (Sign inside the b	oox)				
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			2 Salsa and			
SUBSCRIBED AND SWORN to before me this	, affiant exhib	iting his/her validly iss	ued government ID as indicated above.			
SECTION VORUGEOUS TO THE SECTION OF	Person Administering Oat	th	SIGNATURE			