

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 <input type="checkbox"/> and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE.													
		1. CS ID No.		(Do not fill up. For CSC use only)									
I. PERSONAL INFORMATION													
2. SURNAME		PACATE											
FIRST NAME		LOVELY JOY				NAME EXTENSION (JR., SR)							
MIDDLE NAME		MANDRAS											
3. DATE OF BIRTH (mm/dd/yyyy)		12/17/2002		16. CITIZENSHIP		<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:							
4. PLACE OF BIRTH		BAYBAY CITY		If holder of dual citizenship, please indicate the details.									
5. SEX		<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female											
6 CIVIL STATUS		<input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:		17. RESIDENTIAL ADDRESS		CENTRO Street MAYBOG Barangay LEYTE Province							
7. HEIGHT (m)		1.63											
8. WEIGHT (kg)		55		ZIP CODE		6521							
9. BLOOD TYPE				18. PERMANENT ADDRESS		CENTRO Street MAYBOG Barangay LEYTE Province							
10. GSIS ID NO.		N/A											
11. PAG-IBIG ID NO.		121352139441											
12. PHILHEALTH NO.		13-250362511-7		ZIP CODE		6521							
13. SSS NO.		06-4587474-3		19. TELEPHONE NO.		N/A							
14. TIN NO.		N/A		20. MOBILE NO.		0948-9422-920							
15. AGENCY EMPLOYEE NO.		N/A		21. E-MAIL ADDRESS (if any)		lovelypacate07@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		N/A		NAME EXTENSION (JR., SR)		N/A							
MIDDLE NAME		N/A											
OCCUPATION		N/A											
EMPLOYER/BUSINESS N		N/A											
BUSINESS ADDRESS		N/A											
TELEPHONE NO.		N/A											
24. FATHER'S SURNAME		PACATE											
FIRST NAME		MANUEL		JR.									
MIDDLE NAME		BATINO											
25 MOTHER'S MAIDEN NAME													
SURNAME		MANDRAS											
FIRST NAME		MA. JURGIN											
MIDDLE NAME		VELARDE											
(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		HIGHEST LEVEL/ UNITS EARNED (if not graduated)		YEAR GRADUATE D		SCHOLARSHIP/ ACADEMIC HONORS RECEIVED	
						From To							
ELEMENTARY		MAYBOG ELEMENTARY SCHOOL		ELEMENTARY		2008 2014		GRADUATED		2014		4TH HONOR	
SECONDARY		DAMULAAN NATIONAL HIGH SCHOOL		JUNIOR HIGH SCHOOL		2014 2018		GRADUATED		2018		WITH HONORS	
		DAMULAAN NATIONAL HIGH SCHOOL - SENIOR HIGH SCHOOL		SENIOR HIGH SCHOOL		2018 2020		GRADUATED		2020		WITH HONORS	
VOCATIONAL / TRADE		N/A		N/A		N/A N/A		N/A		N/A		N/A	
COLLEGE		VISAYAS STATE UNIVERSITY		BACHELOR OF SECONDARY EDUCATION - SOCIAL STUDIES		2020 2024		GRADUATED		2024		CUM LAUDE	
GRADUATE STUDIES		N/A		N/A		N/A N/A		N/A		N/A		N/A	
(Continue on separate sheet if necessary)													
SIGNATURE				DATE				OCTOBER 7, 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
	N/A	N/A	N/A	N/A	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						
	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
(Continue on separate sheet if necessary)								

SIGNATURE		DATE	
Sgp.		OCTOBER 7, 2024	

[illegible][illegible][illegible]

OCTOBER 7, 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 appointed,
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?

b. Have you been criminally charged before any court?

☐ YES☒ NO

If YES, give details:

☐ 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)?

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:

☐ 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.
JAY C. BANSALÉ	VISCA, BAYBAY CITY, LEYTE	9489762630
REX M. AUTIDA	MAYBOG, BAYBAY CITY, LEYTE	9176321804
SONIA A. BERTOS	MAYBOG, BAYBAY CITY, LEYTE	9176348703

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.

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: PHIL. ID

ID/License/Passport No.: 6398-6031-2043-8105

Date/Place of Issuance: 9/17/2021 / BAYBAY CITY

Sgp.

Signature (Sign inside the box)

OCTOBER 7, 2024

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.

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ATTY. KIEFER CLINT L. PETILLA
PUBLIC ATTORNEY I
Pursuant to R.A. 9406
Person Administering Oath

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