CS Form No. 212 Revised 2017	DEDGO	NAL DAT	A CI		_			
i e	PERSO	NAL DAT	A SF	1EE				
WARNING: Any misrepresenta	ation made in the Personal Data Sheet and th	ne Work Experience Sheet s	hall cause the	filing of ac	ministrativ	e/criminal case/s	against the	person
concerned. READ THE ATTACHED GUIDE	TO FILLING OUT THE PERSONAL DATA SH	EET (PDS) BEFORE ACCOM	APLISHING TH	E PDS FOR				
Print legibly. Lick appropriate boxe	as ( ) and use separate sheet if necessary Indicate	e N/A if not applicable DO NOT	ABBREVIATE		1. CS ID No.		(Do not fill up	For CSC use on
2. SURNAME		en in a service and the service of t					- WARREN	CARS STATE
FIRST NAME	Somer				_	NAME EXTENSION (JR	L, SR)	
	MARIAH KYLE							
MIDDLE NAME  3 DATE OF BIRTH	DITERDO							
(mm/dd/yyyy)	01  05   2001	16. CITIZENSHIP		Filipin		Dual Citizenship	] by naturaliza	tion
4. PLACE OF BIRTH		If holder of dual citize	enship,			Pls. indicate c	country:	
5. SEX	☐ Male ☐ Female	please indicate the d	letails.					-
6 CIVIL STATUS		17. RESIDENTIAL ADDRESS	905.	A se/Block/Lot No	).	PODLACIO	PINI ST	
7 1/5/01/7/>		-		bdivisionVillage		- •	Barangay	<u> </u>
7. HEIGHT (m)	1.54	-		A CIT			Province	
8. WEIGHT (kg)	70	ZIP CODE	6521					
9. BLOOD TYPE	D	18. PERMANENT ADDRESS	905- Hou	se/Block/Lat No	).	A MA	Street	
10. GSIS ID NO.			Sut	bdivision/Village	,	PUPINAC	JON ZON Barangay	F
11. PAG-IBIG ID NO.	121758405952			M CIT	4.5-7-1-1-1		Province	
12. PHILHEALTH NO.	132503754094	ZIP CODE	6521					
13. SSS NO.		19. TELEPHONE NO.						
14. TIN NO.	386-842-809	20. MOBILE NO.	09702	878761				
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)	mksdlerli	002 @ ginc	nil.com	m-soller@v	ou-edu. p	h
IL FAMILY BACKGROUND	0							
22. SPOUSE'S SURNAME	NIA		23. NAME of CH	IILDREN (Writ	e full name and	l list all)	DATE OF BIR	TH (mm/dd/yyyy
FIRST NAME		NAME EXTENSION (JR., SR)	NIA					
MIDDLE NAME								
OCCUPATION								
EMPLOYER/BUSINESS NAME								
BUSINESS ADDRESS								
TELEPHONE NO.								
24. FATHER'S SURNAME	SOWER							
FIRST NAME	7025	NAME EXTENSION (JR., SR)						
MIDDLE NAME	huyufs							
25. MOTHER'S MAIDEN NAME								
SURNAME	BITERBO							
FIRST NAME	MA. AWYN							
MIDDLE NAME	CUASITO			(C	ontinue on se	parate sheet if neces	ssary)	
III. EDUCATIONAL BACKO	GROUND							
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGR (Write in full)	REE/COURSE	PERIOD OF	To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIF ACADEMIC HONORS RECEIVED
ELEMENTARY	GRACE CHRISTIAN SCHOOL	ELEMENTARY US	NES.	2008	2014		2014	MENTON
SECONDARY	INTEGRATED HIGH SCHOOL	JUNIOR AND OF		2014	2020		2020	12TH PANK
VOCATIONAL / TRADE COURSE								. ,,,,,,,
COLLEGE	SAINT PAUL SCHOOL OF PROFESSIONAL STUDIES	BS in BUSINER ADMI major in FINANCIA MAN		2020	2024		2024	
GRADUATE STUDIES								

SIGNATURE

JUN 16:2015

DATE

7. CAREER	R SERVICE/RA 1	080 (BOARD/ BAR) UNDER	RATING	DATE OF			-22.200	LICENSE (if	applicable
SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE (If Applicable)			EXAMINATION / CONFERMENT	ATION / CONFE	RMENT	NUMBER	Dat Vali		
APPER SPEN	ICE PROFESCI	DAVE ELEMINAJON	81.23	08/20/27	THOUBAN C	XTY			
									1
			(Co	ntinue on separate sheet it	neces sary)				
u.				de local de ori					
(mn	SIVE DATES n/dd/yyyy)	POSITION T (Write in full/Do not		DEPARTMENT / AGE	ICY / OFFICE / COMPANY to not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (If epplicable)& STEP	STATUS OF APPOINTMENT	GOV
Prom 07/2021	PRESENT	BUSINESS DEVELOPME					(Format '00-0")/ INCREMENT		(411)
02/2025	05/202(				CONCUTANT (ERLICES	Pic. In	NIA		
66/05/24	10/04/24		INSTRUCTOR	LAND BANK OF T	THE UMURICITY HE PHILIPPINES -	P182/HR	NIA	2.12	1.0
-01-21c4	15/04/24	BANK INTERN		LEALE RUD	NL CEMPR	410	NIA	MIA	MI
	TURE	10.0	(Co	ntinue on separate sheet i	DATE	7	16,202	_	

Za.						
29. NAME & ADDRESS OF OR (Write in full)		INCLUSIV (mm/dc	/E DATES	NUMBER OF HOURS		POSITION / NATURE OF WORK
(Write in full)	<u> </u>	From	То	HUMBER OF HOUSE		TOUTON THE TOTAL OF TOTAL
AIM						
	and the same of th					
	(Con	office on separate s	sheet II necessary			and Maria Control
30 TITLE OF LEARNING AND DEVELOPMENT INTE		INCLUSIVE	DATES OF		Type of LD	CONDUCTED/ SPONSORED BY
(Write in full		(mm/d	ld/yyyy)	NUMBER OF HOURS	(Managerial/ Supervisory/ Technical/etc)	(Write in full)
PRODUCE MURE PILLETS"	SING DNA MARKERS TO	No. 1 03 12475	06/09/2025	2Has.		DA-PCC, NUEVA ECITA
ONLINE TO AHMIN ON THE PREPHEAT	ON OF PENSIBLUM		05/27/2015	16ths.		VISITYAS SOCIO-ECONOMIC RESTETTECH
ACTUBE AND PRIMERS LAWS	KODO TOOL AND	1	05/22/2015			VILAMIS SUCIO - ECONOMIC RECEMENTA
POSTERING PSYCHOLOGICAL JAPEN	IN THE WORKPLACE	-	04/30/2015	-		VISINAS LITATE UMUERSIM
ASSESSMENT IN LEADING : TRAINING	workstop on	1	03/21/2025			USAYA STATE UNITESTLY
20- HOUR JULYS FUHANCEMENT		1	06/04/2014			CAINT DAVE SCHOOL OF
JAMAP SUMMIT 2012 - ACTIVATE: NEW		69/18/2022		stac.		JOHNA LATIONAL (PH)
6TH CHEEPE CONCRESS WITH THE THE	THE "NAMED THE	-	04/10/2022	8thus.		JAMAN WANGING (PH)
Many of Allocamidated in the	HOREIN PAIN	O I I I I I I		9		
				1		
	(Con	ntinue on separate :	sheet if necessary	1		
odds.	NO!	N-ACADEMIC DISTIN	NCTIONS / RECOG	SNITION		MEMBERSHIP IN ASSOCIATION/ORGANIZATION
31. SPECIAL SKILLS and HOBBIES	32.		e in full)			(Write in full)
TEACHING SIMW	NIA					DETHE AMMONDEL -SPIPI CHTAPTER
TECHNICAL SIGLIS						
TOOLS PROPILIENLY						
SOFT SKINS						
HOBBIET: COOKING, Travel						
SIGNATURE	h.d.	ntinue on separate :	sheet if necessary		ATE	JUY 16, 2025
						CS FORM 212 (Revised 2017), Page 3 of 4

If YES, please specify:							
b. Have you been criminally charged before any court?    YES give details:     YES give details:     YES give details:     Date Fleid:     Status of Casels:     Status of Casels:     YES give details:     One of the Status of Casels:     YES give details:     YES	34.	Bureau or Department where you will be apppointed.  a. within the third degree?	□ YES □ NO				
If YES, give details:   Date Field:   Status of Case/s:   Date Field:   Status of Case/s:   Date Field:   Status of Case/s:	35.	a. Have you ever been found guilty of any administrative offer					
1		b. Have you been criminally charged before any court?	If YES, give details:  Date Filed:				
### Support on the rolls, dismissal, termination, end of term, finished contract or phased out (abolition) in the public or private sector?  3. 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 fivree (3)-month period before the last election to promote/actively campaign for a national or local candidate?  3. Have you acquired the status of an immigrant or permanent resident of another country?  4. 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?  4. Respectively Carta and the status of an immigrant or permanent resident of another country?  4. Respectively Carta and the status of an immigrant or permanent resident of another country?  4. Respectively Carta and the status of an immigrant or permanent resident of another country?  4. Respectively Carta and the status of an immigrant or permanent resident of another country items.  Are you a solo parents Welfare Act of 2000 (RA 8972), please answer the following items:  a. Are you a solo parents?  4. Respectively Carta and the status of a status of the s	36.	Have you ever been convicted of any crime or violation of any by any court or tribunal?					
38. a. Have you are considered 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?  J. Have you acquired the status of an immigrant or permanent resident of another country?  A. Have you acquired the status of an immigrant or permanent resident of another country?  J. PES. J. NO  J. YES. J. NO  J. YES. give details:  J. YES. J. NO  J. YES. J.	37.	reurement, dropped from the rolls, dismissal, termination, er					
election to promote/actively campaign for a national or local candidate?  39. Have you acquired the status of an immigrant or permanent resident of another 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?  c. Are you a solo parent?  c. Are you a solo parent?  d. REFERENCES (Person not related by consangumity or affinity to applicant appointee)  NAME  ADDRESS  TEL NO.  SHEYEUINA Inst. 6. By-NOTITY  DINIBAL ALT  DINIBAL ALT  DIPLIBAL ALT  DIPLIBAL ALT  DIPLIBAL ALT  DIPLIBAL ALT  MARIAL O CEVOLA  L. HONDING ALT IN INVEST 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.  Government Issued Dip a respect Cas, 56.8 PC. DEV SUPY A. P. Date Accomplished  SUBSCRIBED AND SWORN to before me this  J. Affiant exhibiting his/her validly issued government ID as indicated above.	38.	a. Have you ever been a candidate in a national or local ele-	ction held within the last year (except				
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?  41. REFERENCES (Person not retaked by consanguinty or affinity to applicant appointee)  NAME  ADDRESS  TEL NO.  SHEYES, please specify ID No:  If YES, please spec		<ul> <li>b. Have you resigned from the government service during the election to promote/actively campaign for a national or local</li> </ul>					
7277; and (c) Solo Parents Welfare Act of 2000 (RA 8972), please answer the following items:  Are you a member of any indigenous group?  b. Are you a solo parent?  c. Are you a solo parent?  1 YES, please specify:  YES,	39.	Have you acquired the status of an immigrant or permanent	1 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1				
NAME ADDRESS TEL. NO.  SHEYRUINA MAE 6. DANDTITY DIMMH CIP  OPICIES JACC  CHIN IDIEN R-CIM  DIMMH CIP  OPASZ21 & SET L  OPASZ	<ul><li>a.</li><li>b.</li><li>c.</li></ul>	Are you a person with disability?	If YES, please specify:  ☐ YES ☐ NO If YES, please specify ID No: ☐ YES ☐ NO				
CHIN IDIEN R. UM  DHIMM UM  DAS2218KIU  NACLO CEVONA  PHOM MY  OP223.00 UNI  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.  Government Issued ID (**Personal**, SSS, PRC, Driver's License, etc.)  PLEASE INDICATE ID Number and Date of Issuance Government lissued ID: *POCTAT** ID  Date/Place of Issuance:  OR TO 1 SUBSCRIBED AND SWORN to before me this  , affiant exhibiting his/her validly issued government ID as indicated above.	41.	REFERENCES (Person not related by consanguinity or affinity to applican	it /appointee)				
CHIN IDIEN R. UM  NACLO CEWONA  INTERM UM  OPREZEDISETO  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.  Government Issued ID (in Pasaport, CSIS, SSS, PRC, Driver's License, etc.)  PLEASE INDICATE ID Number and Date of Issuance  Government Issued ID: POCTAL ID  IDILicense/Passport No.: PPN I 052500 52437 P  Date/Place of Issuance: Orkmoc CAT/  Date Accomplished  Affiant exhibiting his/her validly issued government ID as indicated above.		NAME	ADDRESS	TEL. NO.			
NACLO CEWONA  12 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.  Government Issued ID (**Passport, CSIS, SSS, PRC, Chrive's License, etc.)  PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: POCTAC ID  IDICLicense/Passport No: PP-N IOSSCOO 52477 P  Date/Place of Issuance: On this CUM  Signature (Sign inside the box)  6 7 I 1 1 202 C  Date Accomplished  Right Thumbmark  SUBSCRIBED AND SWORN to before me this, affiant exhibiting his/her validly issued government ID as indicated above.	St	FERWINA MAE 6. BAUDTIY	DHMH UN	09104283400			
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 filling of administrative/criminal case/s against me.  Government Issued ID: Pochar (Sils, SSS, PRC, Driver's License, etc.)  PLEASE INDICATE ID Number and Date of Issuance  Government Issued ID: Pochar I D  Signature (Sign inside the box)  On the Complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Republi		CHIN IDIEN R-UM	MHMH UM	09752218816			
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.    Government Issued ID (In-Passport, CSIS, SSS, PRC, Driver's License, etc.)   PLEASE INDICATE ID Number and Date of Issuance   Government Issued ID: POCTATL ID							
PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: PUCTAL ID  ID/License/Passport No.: PP-IV IOS2500 52437 P  Date/Place of Issuance: On moc CATY  Signature (Sign inside the box)  OR IN IOS2500 52437 P  Date Accomplished  Right Thumbmark  SUBSCRIBED AND SWORN to before me this, affiant exhibiting his/her validly issued government ID as indicated above.	42.	complete statement pursuant to the provisions of pertine Philippines. I authorize the agency head/authorized representation made in this documents.	ent laws, rules and regulations of the esentative to verify/validate the content	Republic of the s stated herein.			
	G ID	DELEASE INDICATE ID Number and Date of Issuance overnment Issued ID: PいけみしID OnLicense/Passport No.: PP-IN IOS25005243子 P					
Person Administering Oath		SUBSCRIBED AND SWORN to before me this	, affiant exhibi	ing his/her validly issued government ID as indicated above.			
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