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. |   |   |   |                               |  |   |                            |                              |
|--|---|---|---|-------------------------------|--|---|----------------------------|------------------------------|
|  | TO FILLING OUT THE PERSONAL DATA SHE  ( ) and use separate sheet if necessary. Indicate |   |   | PDS FORM                      | 1. CS ID No.   |   | (Do not fill up. F         | or CSC use only)             |
| I. PERSONAL INFORMATIO   | N   |   |   |                               |  |   |                            |                              |
| 2. SURNAME   | LABIDES   |   |   |                               |  |   |                            |                              |
| FIRST NAME   | APPLE CYRRIEL NAME EXTENSION (JR., SR)  |   |   |                               |  |   |                            |                              |
| MIDDLE NAME  | RALLOS N/A  |   |   |                               |  |   |                            |                              |
| DATE OF BIRTH     (mm/dd/yyyy)   | 10/31/1997 16. CITIZENSHIP  |   |   | ☑ Filipir                     | ☑ Filipino □ Dual Citizenship □ by birth □ by naturalization |   |                            |                              |
| 4. PLACE OF BIRTH  | HILONGOS, LEYTE If holder of dual citizenship,  |   |   |                               |  | Pls. indicate of                          | •                          | duon                         |
| 5. SEX   | ☐ Male ☑ Female   | please indicate the de                          | etails.   | Philippines                   |  |   |                            | •                            |
| 6 CIVIL STATUS   | ☑ Single ☐ Married  | 17. RESIDENTIAL ADDRESS                         | Hou   | N/A<br>se/Block/Lot No        | 2  | PUI                                       | ROK CREEKSIDE<br>Street    |                              |
|  | ☐ Widowed ☐ Separated ☐ Other/s:  |   |   | N/A                           |  |   | Pontod                     |                              |
| 7. HEIGHT (m)  | 1.57  |   | Sul   | odivision/Village<br>Hilongos | 9  |   | Barangay<br>Leyte          |                              |
| 8. WEIGHT (kg)   | 52  | ZIP CODE  | 6524  | ty/Municipality               |  |   | Province                   |                              |
|  |   | 18. PERMANENT ADDRESS                           | 0324  | N/A                           |  | PUI                                       | ROK CREEKSIDE              | :                            |
| 9. BLOOD TYPE  | A+  | -   | Нои   | se/Block/Lot No               | 0.   |   | Street                     |                              |
| 10. GSIS ID NO.  | N/A   |   | Sul   | N/A<br>odivision/Village      | 9  |   | Pontod<br>Barangay         |                              |
| 11. PAG-IBIG ID NO.  | 1212-4-489-5292   |   |   |                               |  | longos Leyte  **Municipality** Province** |                            |                              |
| 12. PHILHEALTH NO.   | N/A   | ZIP CODE  | ZIP CODE 6524                                       |                               |  |   |                            |                              |
| 13. SSS NO.  | 06-4387218-7  | 19. TELEPHONE NO.                               | N/A   |                               |  |   |                            |                              |
| 14. TIN NO.  | 356-133-121 20. MOBILE NO. 0926445  |   |   | 0/09387657242                 |  |   |                            |                              |
| 15. AGENCY EMPLOYEE NO.  |   | 21. E-MAIL ADDRESS (if any)                     | applelabid  | les1@gm                       | nail.com   |   |                            |                              |
| II. FAMILY BACKGROUND  |   |   |   |                               |  |   |                            |                              |
| 22. SPOUSE'S SURNAME   | N/A  NAME EXTENSION (JR., SR)   |   | 23. NAME of CHILDREN (Write full name and list all) |                               |  | list all)                                 | DATE OF BIRTH (mm/dd/yyyy) |                              |
| FIRST NAME   | N/A   | INAME EXTENSION (JR., SK)                       | N/A   |                               |  |   | 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   | LABIDES   | NAME EXTENSION (JR., SR)                        |   |                               |  |   |                            |                              |
| FIRST NAME   | LEONARDO  | Sr.   |   |                               |  |   |                            |                              |
| MIDDLE NAME  | VITERBO   | JR.   |   |                               |  |   |                            |                              |
| 25. MOTHER'S MAIDEN NAME   | GINA M. RALLOS  | 5   |   |                               |  |   |                            |                              |
| SURNAME  | RALLOS  |   |   |                               |  |   |                            |                              |
| FIRST NAME   | GINA  |   |   |                               |  |   |                            |                              |
| III. EDUCATIONAL BACKGI  | MELGAZO   |   |   | (Ci                           | ontinue on se <sub>l</sub>                                   | parate sheet if neces                     | sary)                      |                              |
| 26.  | NAME OF SCHOOL  | BASIC EDUCATION/DEGRE                           | EE/COLIDSE  | PERIOD OF A                   | ATTENDANCE   | HIGHEST LEVEL/                            | YEAR                       | SCHOLARSHIP/<br>ACADEMIC     |
| LEVEL  | (Write in full)   | (Write in full)                                 | EE/COURSE   | From To                       |  | UNITS EARNED<br>(if not graduated)        | GRADUATED                  | HONORS<br>RECEIVED           |
| ELEMENTARY   | PONTOD ELEMENTARY SCHOOL  | PRIMARY EDUCA                                   | ATION   | 2007                          | 2011   | N/A                                       | 2011                       | 2nd Honor                    |
| SECONDARY  | HILONGOS NATIONAL VOCATIONAL SCHOOL   | HIGHSCHOO                                       | L   | 2011                          | 2014   | N/A                                       | 2014                       | N/A                          |
| VOCATIONAL /<br>TRADE COURSE   | HILONGOS NATIONAL VOCATIONAL SCHOOL   | MAJOR IN DRESSM                                 | MAKING  | 2011                          | 2014   | N/A                                       | 2014                       | N/A                          |
| COLLEGE  | VISAYAS STATE UNIVERSITY  | Bachelor of Science in                          | n Forestry  | 2014                          | 2018   | N/A                                       | 2018                       | Financial Assistance Program |
| GRADUATE STUDIES   | VISAYAS STATE UNIVERSITY  | MS in Forestry (Minor Administration Management |   | 2021                          | Present  | 37 units earned                           | N/A                        | Science and Technology       |
| GRADUATE STUDIES   |   |   |   |                               |  |   |                            |                              |
|  |   | Continue on separate sheet if nece              | essary)   |                               |  |   | ı                          |                              |
| SIGNATURE  | gyelou  | *   |   | DA                            | TE   | July                                      | 1 29, 2023                 | ,                            |

| IV. CIVIL SI   | ERVICE ELIG               | IBILITY                   |                             |   |   |            |  |                      |                   |
|--|---------------------------|---------------------------|-----------------------------|---|---|------------|--|----------------------|-------------------|
| 27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER                                   |                           |                           | DATE OF                     | DI AGE OF EVAMINA                             | TION / OONEED   | ON ACTA IT | LICENSE (if applicable)                            |                      |                   |
| SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE  (If Applicable) |                           |                           | EXAMINATION /<br>CONFERMENT | PLACE OF EXAMINA                              | OF EXAMINATION / CONFERMENT                                     |            |  | Date of<br>Validity  |                   |
| LICENSU  | JRE EXAMINA               | TION IN FORESTER          | 87.85                       | 9/12/2018                                     | TACLOBAN  |            | 0012995  | 10/31/2022           |                   |
|  |                           |                           |                             |   |   |            |  |                      |                   |
|  |                           |                           |                             |   |   |            |  |                      |                   |
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| V WORK F   | VAERIENAE                 |                           | (Co                         | ntinue on separate sheet                      | if necessary)   |            |  |                      |                   |
|  | XPERIENCE ate employme    | nt. Start from your recei | nt work) Description        | on of duties should                           | be indicated in the attach                                      | ed Work Ex | perience she                                       | et.                  |                   |
|  | JSIVE DATES<br>m/dd/yyyy) | POSITION T                | ITLE                        | DEPARTMENT / AGI                              | ENCY / OFFICE / COMPANY   | MONTHLY    | SALARY/ JOB/ PAY<br>GRADE (if                      | STATUS OF            | GOVT              |
| From   | To                        | (Write in full/Do not     | abbreviate)                 |   | I/Do not abbreviate)  | SALARY     | applicable)& STEP<br>(Format "00-0")/<br>INCREMENT | APPOINTMENT          | SERVICE<br>(Y/ N) |
| 4/5/2021   | 7/31/2021                 | CLERK/SPIC IN             | -CHARGE                     | ENVIRONMENTAL                                 | T OF NATURAL AND<br>SCIENCE - COMMUNITY<br>ID NATURAL RESOURCE  | 14,000.00  | N/A  | Contratual           | Y                 |
|  |                           |                           |                             | (   | OFFICE  |            |  |                      |                   |
| 6/15/2020  | 4/2/2021                  | ENVIRONMEN                | T STAFF                     | MUN   | MENT UNIT - HILONGOS<br>IICIPALITY<br>FOF NATURAL AND           | 5,500.00   | N/A  | Contratual           | Y                 |
| 1/6/2020   | 3/30/2020                 | SURVEY                    | OR                          | ENVIRONMENTAL<br>ENVIRONMENT AN               | SCIENCE - COMMUNITY<br>ID NATURAL RESOURCE<br>OFFICE            | 15,000.00  | N/A  | Contratual           | Y                 |
| 2/4/2019   | 12/28/2019                | FOREST EXTENSI            | ON OFFICER                  | DEPARTMEN'<br>ENVIRONMENTAL<br>ENVIRONMENT AN | T OF NATURAL AND SCIENCE - COMMUNITY ID NATURAL RESOURCE DEFICE | 18,549.00  | N/A  | Contratual           | Y                 |
| 11/5/2018  | 12/28/2018                | INSPECTING (              | DFFICER                     | DEPARTMEN'<br>ENVIRONMENTAL<br>ENVIRONMENT AN | T OF NATURAL AND<br>SCIENCE - COMMUNITY<br>ID NATURAL RESOURCE  | 12,430.00  | N/A  | Contratual           | Y                 |
|  |                           |                           |                             |   | OFFICE  |            |  |                      |                   |
|  |                           |                           |                             |   |   |            |  |                      |                   |
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| SIGNA  | ATURE                     |                           | plant "                     | 211 Copulate Sindel                           | DATE  |            | July 29,   | 2023                 |                   |
|  |                           |                           |                             |   |   |            |  | FORM 212 (Revised 20 | 017), Page 2 of 4 |

| VI. VOLUI   | NTARY WORK OR INVOLVEMENT  | IN CIVIC / NON-GOVERNMENT                                   | / PEOPLE / \                  | VOLUNTARY                  | ORGANIZATI         | ION/S   |  |  |
|---|--|---|-------------------------------|----------------------------|--------------------|---|--|--|
| 29.   | NAME & ADDRESS OF O<br>(Write in full                                      |   |                               | VE DATES<br>Id/yyyy)<br>To | NUMBER OF HOURS    |   | POSITION / NATURE OF WORK                                  |  |
|   | N/A  |   | N/A                           | N/A                        | N/A                | N/A   |  |  |
|   |  |   |                               |                            |                    |   |  |  |
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|   |  |   |                               | sheet if necessary         | )                  |   |  |  |
|   | RNING AND DEVELOPMENT (L&D<br>e most recent L&D/training program and inclu |   |                               |                            | ief/Executive/Mana | agerial positions)                              |  |  |
|   |  |   | INCLUSIVE DATES OF ATTENDANCE |                            |                    | Type of LD                                      | CONDUCTED/ODONOODED DV                                     |  |
| 30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full) |  |   | (mm/d                         | ld/yyyy)                   | NUMBER OF HOURS    | ( Managerial/<br>Supervisory/<br>Technical/etc) | CONDUCTED/ SPONSORED BY (Write in full)                    |  |
|   | S CPD WEBINAR SERIES ON CURREI<br>METHODS MODULE 2: CHALLENGES             |   | From 4/26/203                 | T <sub>0</sub> 4/26/203    | 8                  | TECHNICAL                                       | VISAYAS STATE UNIVERSITY, BAYBAY                           |  |
|   | CES FROM THE GROUND  | THE ELECTION CENTRED AND                                    | 4/20/203                      | 4/20/203                   | 0                  | TEOTINICAL                                      | CITY, LEYTE VISAYAS STATE UNIVERSITY GRADUATE              |  |
|   | WORKSHOP ON PREPARING MA   |   | 3/29/2023                     | 3/31/2023                  | 17                 | TECHNICAL                                       | STUDENT SOCIETY AND THE GRADUATE SCHOOL                    |  |
| <b>FGOV 138</b>   | PROTECTION ACTIVITIES OF DEN   | ONS CLASS   | 3/23/2017                     | 3/23/2017                  | 8                  | TECHNICAL                                       | VISAYAS STATE UNIVERSITY, BAYBAY CITY, LEYTE               |  |
|   | GOVERNANCE INFLUENCES ON L<br>ABLE FOREST MANAGEMENT                       | IVELIHOOD AND   | 9/15/2016                     | 9/15/2016                  | 8                  | TECHNICAL                                       | VISAYAS STATE UNIVERSITY, BAYBAY<br>CITY, LEYTE            |  |
|   |  |   |                               |                            |                    |   |  |  |
|   |  |   |                               |                            |                    |   |  |  |
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|   |  | (00)  | ·                             | -h4 if m                   |                    |   |  |  |
| VIII. OTH   | ER INFORMATION   | (Con  | и он эврагате                 | sheet if necessary         |                    |   |  |  |
| 31.   | SPECIAL SKILLS and HOBBIES   | 32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full) |                               |                            |                    |   | 33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full) |  |
|   | DRESSMAKING  | N/A   |                               |                            |                    |   | N/A  |  |
|   | SINGING  |   |                               |                            |                    |   |  |  |
|   | VOLLEYBALL   |   |                               |                            |                    |   |  |  |
|   | PLAY GUITAR  |   |                               |                            |                    |   |  |  |
|   | DRAWING  |   |                               |                            |                    |   |  |  |
|   |  |   |                               |                            |                    |   |  |  |
|   |  | (Continue on separate sheet if necessary)                   |                               |                            |                    |   |  |  |
|   | SIGNATURE  | (Lon  |                               | aneet ii necessary         |                    | ATE   | July 29, 2023  |  |
|   |  |   |                               |                            |                    | CS FORM 212 (Paying 2017) Page 2 of             |  |  |

| 34. Are you related by consanguinity or affinity to the appointing chief of bureau or office or to the person who has immediate Bureau or Department where you will be apppointed, a. within the third degree?   |   | NO                                 |                 |  |  |  |  |
|--|---|------------------------------------|-----------------|--|--|--|--|
| b. within the fourth degree (for Local Government Unit - Car   |   | NO<br>NO                           |                 |  |  |  |  |
| 35. a. Have you ever been found guilty of any administrative of  | ☐ YES ☑ If YES, give details:                                   | NO                                 |                 |  |  |  |  |
| b. Have you been criminally charged before any court?  | ☐ YES ☑ If YES, give details:     Date Filed: Status of Case/s: | NO NO                              |                 |  |  |  |  |
| 36. Have you ever been convicted of any crime or violation of a by any court or tribunal?  | ☐ YES ☑ NO If YES, give details:                                |                                    |                 |  |  |  |  |
| 37. Have you ever been separated from the service in any of th retirement, dropped from the rolls, dismissal, termination, er 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 ele<br>Barangay election)?  | ection held within the last year (except                        | ☐ YES ☑ NO If YES, give details:   |                 |  |  |  |  |
| b. Have you resigned from the government service during the election to promote/actively campaign for a national or local  | ☐ YES ☑ NO If YES, give details:                                |                                    |                 |  |  |  |  |
| 39. Have you acquired the status of an immigrant or permanent  | ☐ YES ☑ NO If YES, give details (country):                      |                                    |                 |  |  |  |  |
| 40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) May 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972).   |   |                                    |                 |  |  |  |  |
| a. Are you a member of any indigenous group?   | ☐ YES If YES, please specify:                                   | ☑ NO                               |                 |  |  |  |  |
| b. Are you a person with disability?   | ☐ YES ☑ NO If YES, please specify ID No:                        |                                    |                 |  |  |  |  |
| c. Are you a solo parent?  |   | ☐ YES<br>If YES, please specify II | ☑ NO<br>D No:   |  |  |  |  |
| 41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)   |   |                                    |                 |  |  |  |  |
| NAME   | ADDRESS   | TEL. NO.                           |                 |  |  |  |  |
| Angelica P. Baldos   | VSU, Baybay City, Leyte   | 9196129821                         |                 |  |  |  |  |
| Dennis P. Peque  | VSU, Baybay City, Leyte   | 9277062843                         |                 |  |  |  |  |
| Filemon Alex V. Selor  Cebu City  9773724500  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.  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 (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)  PLEASE INDICATE ID Number and Date of Issuance  Government Issued ID: Driver's License  | <u> </u>  |                                    |                 |  |  |  |  |
| ID/License/Passport No.: <b>H05-21-200249</b>  | oox)  |                                    |                 |  |  |  |  |
| Date/Place of Issuance: MAASIN CITY, LEYTE   | Signature (Sign inside the t                                    |                                    | Right Thumbmark |  |  |  |  |
| SUBSCRIBED AND SWORN to before me this, affiant exhibiting his/her validly issued government ID as indicated above.  |   |                                    |                 |  |  |  |  |
| Person Administering Oath  |   |                                    |                 |  |  |  |  |
|  |   |                                    |                 |  |  |  |  |