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 READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM. 1. CS ID No. (Do not fill up. For CSC use only) Print legibly, Tick appropriate boxes () and use separate sheet if necessary, Indicate N/A if not applicable. DO NOT ABBREVIATE. 2. SURNAME SANCHEZ NAME EXTENSION (JR., SR) N/A ROMER ADRIAN FIRST NAME MIDDLE NAME SIERVO 3. DATE OF BIRTH 16. CITIZENSHIP 22/07/2000 **☑** Filipino ☐ Dual Citizenship (mm/dd/yyyy) by birth by naturalization Pls. indicate country: SOGOD, SOUTHERN LEYTE If holder of dual citizenship, 4. PLACE OF BIRTH please indicate the details w Female **✓** Male 5. SEX 0054 PUROK 1 17 RESIDENTIAL ADDRESS Married **✓** Single 6 CIVIL STATUS House/Block/Lot N ☐Widowed Separated PANDAN N/A Other/s: Barangay Subdivision/Villa SOUTHERN LEYTE SOGOD 7. HEIGHT (m) 168 cm City/Municipality Province 6606 70 kgs. ZIP CODE 8. WEIGHT (kg) 18. PERMANENT ADDRESS 0054 PUROK 1 9 BLOOD TYPE lo House/Block/Lot N PANDAN N/A N/A 10 GSIS ID NO Subdivision/Villa Barangay SOUTHERN LEYTE SOGOD 11. PAG-IBIG ID NO. 121319919885 City/Municipality Province 12. PHILHEALTH NO. 13-251737534-2 ZIP CODE 6606 19. TELEPHONE NO. N/A 0645858620 13 SSS NO. 638-260-569-00000 20. MOBILE NO. 09762913218 14. TIN NO 15 AGENCY EMPLOYEE NO N/A 21 F-MAIL ADDRESS (if any) romersanchez40@gmail.com 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) N/A 22. SPOUSE'S SURNAME AME EXTENSION (JR., SR) N/A N/A NA N/A FIRST NAME MIDDLE NAME N/A OCCUPATION N/A N/A EMPLOYER/BUSINESS NAME N/A **BUSINESS ADDRESS** N/A TELEPHONE NO SANCHEZ 24 FATHER'S SURNAME ME EXTENSION (JR., SR) NA FIRST NAME RONIE MIDDLE NAME SORIA 25. MOTHER'S MAIDEN NAME SIERVO SURNAME MERLY FIRST NAME ANDUYAN (Continue on separate sheet if necessary) MIDDLE NAME SCHOLARSHIE HIGHEST LEVEL BASIC EDUCATION/DEGREE/COURSE PERIOD OF ATTENDANCE ACADEMIC HONORS NAME OF SCHOOL UNITS EARNED LEVEL GRADUATED (Write in full) (Write in full) (If not graduated) RECEIVED From To CLASS 1ST SOGOD CENTRAL SCHOOL ELEMENTARY 01/06/2007 28/03/2013 N/A 2013 ELEMENTARY HONOR WITH HIGH HONORS/ SAINT JOSEPH COLLEGE SENIOR HIGH SCHOOL 13/06/2017 29/05/2019 N/A 2019 SECONDARY RESEARCH AWARDEE VOCATIONAL / N/A N/A N/A N/A N/A TRADE COURSE CUM LAUDE/ BACHELOR OF SCIENCE IN COLLEGE UNIVERSITY OF SAN JOSE-RECOLETOS 19/06/2019 20/05/2023 2023 DEAN'S MANAGEMENT ACCOUNTING LISTER N/A N/A **GRADUATE STUDIES** N/A N/A N/A Rom ch DATE JANUARY 29, 2024 SIGNATURE

	ERVICE ELIG							LICENSE (if a	nnlicahla)
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER RATING SPECIAL LAWS/ CES/ CSEE (If Applicable)			RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINA	TION / CONFER	RMENT	NUMBER	Date of
BARANGAY ELIGIBILITY / DRIVER'S LICENSE			38 W	22/10/2023	LAHUG, CEBU CITY			100107231669	Validity 20/05/202
PD 907 HONOR GRADUATE ELIGIBILITY N/A			04/04/2023				HO5-23-001426	04/04/202	
PROFESSIONAL DRIVER'S LICENSE			N/A	04/04/2023	MAASIN CITY, SOUTHERN LEYTE			HO3-23-001420	04/04/202
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		ent. Start from your rece	nt work) Descripti		d be indicated in the attac	hed Work E	SALARY/JOB/PAY		COLET
	(mm/dd/yyyy) POSITION TITLE (Write in full/Do not abbreviate)			GENCY / OFFICE / COMPANY full/Do not abbreviate)	MONTHLY SALARY	GRADE (# applicable)& STEP (Format "00-0")/	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)	
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29. NAME & ADDRESS OF ORGANIZATION (Write in full)		(mm/dd/yyyy)			POSITION / NATURE OF WORK	
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RED CROSS YOUTH STUDENT VOLUNTEER- SOUTHERN LEYTE CHAPTER			NIA	STUDENT	OLONICER	
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INTERVENTIONS/TRAINING PR	-	Name and Address of the Owner, where the Owner, which the	Visit Sale			
*				Type of LD		
TERVENTIONS/TRAINING PROGRAMS			NUMBER OF HOURS	Supervisory/	CONDUCTED/ SPONSORED BY (Write in full)	
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	25/01/2024	26/01/2014		TECHNICAL	MINDLUSTER ONLINE LEARNING COUR ALISON ONLINE LEARNING AND TRAINI	
ND DEST FRACTIOES	12/11/2023	12/11/2023	8.0	TECHNICAL	UNITED NATIONS INTERNATIONAL CHILDREN'S EMERGENCY FUND	
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	100000000000000000000000000000000000000		-		INSTITUTE OF MANAGEMENT ACCOUNTANT	
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	01/10/2023	01/10/2023		The residence of the second	MINDLUSTER ONLINE LEARNING COUR	
RENCE 2023	30/09/2023	30/09/2023	8.0	TECHNICAL	INSTITUTE OF MANAGEMENT ACCOUNTANT	
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32. NON-J	ACADEMIC DISTIN		NITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATIO (Write in full)	
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34.	Are you related by consanguinity or affinity to the appointing of chief of bureau or office or to the person who has immediate a Bureau or Department where you will be apppointed,							
	a. within the third degree?	☐ YES ☑ NO						
	b. within the fourth degree (for Local Government Unit - Caree	er Employees)?	YES If YES, give details	☑ NO s:				
35.	a. Have you ever been found guilty of any administrative offer	☐ YES ☑ NO						
		If YES, give details:						
			N					
	b. Have you been criminally charged before any court?	☐ 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							
30.	any court or tribunal?	☐ YES ☑ NO If YES, give details:						
			constants to B Make School					
37.	Have you ever been separated from the service in any of the	following modes: resignation, retirement,	YES	☑ NO				
	dropped from the rolls, dismissal, termination, end of term, fin	If YES, give detail						
_	in the public or private sector?	tion hold within the leatures (expent						
38.	A. Have you ever been a candidate in a national or local election. Barangay election)?	YES V NO If YES, give details:						
	b. Have you resigned from the government service during the	three (3)-month period before the last	YES V NO					
	election to promote/actively campaign for a national or local or	eandidate?	If YES, give details:					
39.	Have you acquired the status of an immigrant or permanent r	e you acquired the status of an immigrant or permanent resident of another country?						
			☐ YES ☑ NO If YES, give details (country):					
L								
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magi and (c) Solo Parents Welfare Act of 2000 (RA 8972), please							
a	Are you a member of any indigenous group?	☐ YES	☑ NO					
		If YES, please specify:						
b.	Are you a person with disability?	☐ YES ☑ NO If YES, please specify ID No:						
C.	Are you a solo parent?	∏ YES ☑ NO						
			If YES, please speci					
41	REFERENCES (Person not related by consanguinity or affinity to applicant	t /appointee)						
T	NAME	ADDRESS	TEL. NO.	The state of the s				
-	VERONICA L. REOMA	SOGOD, SOUTHERN LEYTE	9154823224					
H	JAYSON E. ORAIS	TOMAS OPPUS, SOUTHERN LEYTE	09855677554					
H			N/A					
L	DR. ROSEMARIE JACALAN	CEBU CITY						
42	I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertine	ent laws, rules and regulations of the	Republic of the	dender				
	Philippines, I authorize the agency head/authorized represe	ntative to verify/validate the contents stat	ed herein.	ROMER ADRIAN S. SANCHEZ				
	agree that any misrepresentation made in this document administrative/criminal case/s against me.	ment and its attachments shall caus	se the filing of	PHOTO				
L	and the section of th							
	Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)		10					
Ιŀ	PLEASE INDICATE ID Number and Date of Issuance							
	Government Issued ID: DRIVER'S LICENSE							
	ID/License/Passport No.: HO5-23-001428	oox)						
11	Date/Place of Issuance: 04/03/2023 MAASIN CITY,SO.LEYTE	JANUARY 29, 2024 Date Accomplished		Right Thumbmark				
H	SUBSCRIBED AND SWORN to before me this affiant exhibiting his/her validly issued government ID as indicated above.							
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