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. (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. 1. CS ID No. 2. SURNAME FERNANDEZ NAME EXTENSION (JR., SR) FIRST NAME LINDON MODINA MIDDLE NAME 3. DATE OF BIRTH 2/27/1992 16. CITIZENSHIP (mm/dd/yyyy) BRGY, PANGASUGAN BAYBAY CITY. If holder of dual citizenship, Pls. indicate country: 4. PLACE OF BIRTH LEYTE please indicate the details. 5 SEX 17. RESIDENTIAL ADDRESS 6 CIVIL STATUS House/Block/Lot No. Street PANGASUGAN Subdivision/Village Barangay BAYBAY CITY LEYTE 7. HEIGHT (m) 1.73 m City/Municipality Province 8. WEIGHT (kg) 73 kg ZIP CODE 06521 18. PERMANENT ADDRESS 9. BLOOD TYPE 0+ Street House/Block/Lot No. PANGASUGAN 10. GSIS ID NO. N/A Subdivision/Village Barangay BAYBAY CITY LEYTE 11. PAG-IBIG ID NO. 1212-0406-5098 City/Municipality Province 13-025205571-2 ZIP CODE 06521 12. PHILHEALTH NO. N/A 13. SSS NO. 06-3363070-8 19. TELEPHONE NO. 0939-764-8185 14. TIN NO. 452-660-903 20. MOBILE NO. N/A 21. E-MAIL ADDRESS (if any) lindonmf@gmail.com 15. AGENCY EMPLOYEE NO FAMILY BACKGROUND 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) 22. SPOUSE'S SURNAME N/A NAME EXTENSION (JR., SR) 9/5/2020 N/A JULIANA BRAIN FERNANDEZ FIRST NAME N/A MIDDLE NAME N/A OCCUPATION N/A EMPLOYER/BUSINESS NAME **BUSINESS ADDRESS** N/A TELEPHONE NO. N/A **FERNANDEZ** 24. FATHER'S SURNAME NAME EXTENSION (JR., SR) **ODON** FIRST NAME **GUCELA** MIDDLE NAME LILIA POSAS MODINA 25. MOTHER'S MAIDEN NAME **FERNANDEZ** SURNAME LILIA FIRST NAME MODINA (Continue on separate sheet if necessary) MIDDLE NAME SCHOLARSHIP HIGHEST LEVEL PERIOD OF ATTENDANCE BASIC EDUCATION/DEGREE/COURSE YEAR ACADEMIC 26. NAME OF SCHOOL UNITS EARNED LEVEL HONORS RECEIVED GRADUATED (Write in full) (Write in full) (if not graduated) From To PANGASUGAN ELEMENTARY SCHOOL N/A 1998 2004 N/A 2004 N/A ELEMENTARY 2008 N/A **BUNGA NATIONAL HIGHSCOOL** N/A 2004 2008 N/A SECONDARY VOCATIONAL / N/A N/A N/A N/A N/A N/A N/A TRADE COURSE BACHELOR OF SCIENCE IN HOTEL, RESTAURANT AND TOURISM MANAGEMENT VISAYAS STATE UNIVERSITY 2008 2012 N/A 2012 N/A COLLEGE N/A N/A N/A N/A N/A N/A N/A GRADUATE STUDIES DATE May 19, 2021 SIGNATURE

CAREER	R SERVICE/ RA 1	080 (BOARD/ BAR) UNDER	D. P. L.	DATE OF				LICENSE (if ap	plicable)
77. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE RATING (If Applicable)			EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT		MENT	NUMBER	Date of Validity	
DRIVER'S LICENSE 1.0			5/31/2018	LTO BAYBAY DISTRICT OFFICE		ICE	H1215001786	2/27/2023	
	VSU CLERIC	AL EXAM			VISAYAS STAT	E UNIVERSI	TY		
CAREER SERVICE ELIGIBILITY SUBPROFESIONAL			3/13/2022 LEYTE NORMAL UNIERS		SITY TACLO	DBAN CITY			
			(Co)	ntinue on separate shee	t if necessary)				
	KPERIENCE te employmer	nt. Start from your recent			e indicated in the attached	Work Exper	ience sheet.		
INCLUS (mm	SIVE DATES n/dd/yyyy)	POSITION TI (Write in full/Do not a	TLE	DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)		MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format *00-0*)/	STATUS OF APPOINTMENT	GOV'T SERVIC (Y/ N)
From 7/9/2042	To	PANGUET	AITER	CEBU PARKLANE INTERNATIONAL HOTEL			INCREMENT	ON CALL	
7/8/2012	9/20/2012	BANQUET W	**************************************	The state of the s	the contract of the contract o	6,000 Php	N/A	WAITER	N/A
4/1/2013	2/15/2013	PROPAGATOR/SCIEN		LEYLAM SHAWARMA PHILROOTCROPS/VISAYAS STATE		6,000 Php	N/A	CONTRACT	N/A
1/15/2014	9/30/2013	ASSISTAI FRONTDESK CLERK/H		UNIVERSITY VSU APPARTELLE		5,000 Php 6,000 Php	N/A	JOB ORDER JOB ORDER	Y
7/1/2017	PRESENT	ADMIN AIDE I / OFF		SUPPLY & PRO	PERTY MANAGEMENT	9,961.20 Php	N/A	JOB ORDER	Y
					OFFICE				
	-								
				onlinus on conservation of	at if nacapeani				
SIGN	ATURE	- II	\ (C)	ontinue on separate she	DATE	Г	May 19, 20	22	Г

I. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT	/PEOPLE/VO	LUNTARY O	RGANIZATION	//S	
29. NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE (mm/dd		NUMBER OF HOURS		POSITION / NATURE OF WORK
(Trice in tag)	From	То			
				35	
				- Indiana de la companya de la comp	
	-				
(C	ontinue on separate s	heet if necessary)		
VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING I					
Start from the most recent L&D/training program and include only the relevant L&D/training taken f			ief/Executive/Mana	gerial positions)	
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS	ATTEN	INCLUSIVE DATES OF ATTENDANCE		Type of LD (Managerial/	CONDUCTED/ SPONSORED BY
(Write in full)	(mm/d		NUMBER OF HOURS !	Supervisory/ Technical/etc)	(Write in full)
AND THE PROPERTY OF THE PROPER	From	To		Totaled	VISAYAS STATE UNIVERSITY
ORIENTATION WORKSHOP AMONG JO CLERKS & LABORATORY TECHNICIANS	1/15/2019	1/15/2019	8 hours	Technical	VISAYAS STATE UNIVERSITY / BUREAU OF FIRE
FIRE AWARENESS AND CONTROL SEMINAR	3/13/2010	3/13/2010	8 hours	Technical	PROTECTION PROTECTION
ORIENTATION SEMINAR FOR FOOD HANDLERS	10/22/2012	10/22/2012	8 hours	Technical	CITY HEALTH OFFICE, TACLOBAN CITY
LECTURE ON PERSONALITY DEVELOPMENT AND COMMUNICATION SKILLS	12/14/2010	12/14/2010	8 hours	Technical	WORLD OF ADVENTURES TRAVEL AND TOURS
			-		
		 	+		
	Continue on seperate	sheet if necessa	ry)		
VIII. OTHER INFORMATION					
31. SPECIAL SKILLS and HOBBIES 32.	NON-ACADEMIC DIST	INCTIONS / RECO	GNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	(
	(Continue on separat	e sheet if necess			
SIGNATURE			1	DATE	May 19, 2022
	AND DESCRIPTION OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED				CS FORM 212 (Revised 2017), Page 3 of

34.	Are you related by consanguinity or affinity to the appointin chief of bureau or office or to the person who has immedia Bureau or Department where you will be apppointed, a. within the third degree?				
	b. within the fourth degree (for Local Government Unit - Ca	If YES, give details:			
35.	a. Have you ever been found guilty of any administrative of	If YES, give details:			
	b. Have you been criminally charged before any court?	If YES, give details: Date Filed: Status of Case/s:			
36.	Have you ever been convicted of any crime or violation of any court or tribunal?	If YES, give details:			
	Have you ever been separated from the service in any of dropped from the rolls, dismissal, termination, end of term in the public or private sector?	If YES, give details:			
38.	a. Have you ever been a candidate in a national or local e Barangay election)? b. Have you resigned from the government service during	If YES, give details:			
	election to promote/actively campaign for a national or loc	If YES, give details:			
39.	Have you acquired the status of an immigrant or permane	If YES, give details (country):			
40. a.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) M 7277); and (c) Solo Parents Welfare Act of 2000 (RA 897); Are you a member of any indigenous group?	If YES, please specify:			
b.	Are you a person with disability?	If YES, please specify ID No:			
C.	Are you a solo parent?	If YES, please specify ID No:			
41.	REFERENCES (Person not related by consanguinity or affinity to applications)	ant /appointee)		_	
	NAME	ADDRESS	TEL. NO.		
	ALICIA M. FLORES	GUADALUPE BAYBAY CITY, LEYTE	9176341430	6 6	
- 10					
42.				LINDON M. FERNANDEZ PHOTO	
F	Covernment Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance				
H	Overnment Issued ID: DRIVERS LICENSE D/License/Passport No.: H1215001786	101			
lŀ	Date/Place of Issuance: 5/31/18 LTO BAYBAY	box) Right Thumbmark			
SUBSCRIBED AND SWORN to before me thisaffiant exhibiting his/her validly issued government ID as indicated above.					
	l	th			