CS Form No. 212 Revised 2017			NAL DAT							
WARNING: Any misrepresent concerned. READ THE ATTACHED GUIDE Print legibly. Tick appropriate boxe	E TO FILLING OUT TH es [] ) and use separate	IE PERSONAL DATA SE	HEET (PDS) BEFORE ACCOU	MPI ISHING T	HE PRO EN				p. For CSC use or	
I. PERSONAL INFORMATION	ON									
2. SURNAME	FULACHE									
FIRST NAME	NEIL BRYAN	L BRYAN NAME EXTENSI					NAME EXTENSION (	ION (JR., SR) N/A		
MIDDLE NAME	BARTULABA									
DATE OF BIRTH     (mm/dd/yyyy)	11/24/1999		16. CITIZENSHIP		☑ Filipino □ Dual Citizenship					
4. PLACE OF BIRTH	HILON	IGOS, LEYTE	If holder of dual citize	☑ by birth zenship, Pls. indi			☐ by naturalization cate country:			
5. SEX	☑ Male	☐ Female	please indicate the o	details.						
6 CIVIL STATUS	☑ Single ☐ Widowed ☐ Other/s:	☐ Married☐ Separated	17. RESIDENTIAL ADDRESS	Н	House/Block/Lot No.		Purok Santan Street Atabay			
7. HEIGHT (m)	1	105			Subdivision/Villag	90	Berangey			
		1.65			Hilongos City/Municipality			Leyte Province		
8. WEIGHT (kg)		70	ZIP CODE				6524			
9. BLOOD TYPE		N/A	18. PERMANENT ADDRESS	H	Purok Santan  House/Block/Lot No. Street					
10. GSIS ID NO.	N/A 1212-8550-6000			S	Subdivision/Village			Atabay Barangay		
11. PAG-IBIG ID NO.					Hilongos			Leyte		
12. PHILHEALTH NO.	13-250490271-8		ZIP CODE		City/Municipality 6524		6524	Province		
13. SSS NO.	N/A		19. TELEPHONE NO.		N/A					
14. TIN NO.	601-267-931-0000		20. MOBILE NO.		09854664296					
15. AGENCY EMPLOYEE NO.		N/A	21. E-MAIL ADDRESS (if any)		bryfulache@gmail.com					
II. FAMILY BACKGROUND										
22. SPOUSE'S SURNAME		N/A		23. NAME of CI	HILDREN (Write	e full name and	list all)	DATE OF BIF	RTH (mm/dd/yyyy)	
FIRST NAME		N/A	NAME EXTENSION (JR., SR)			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		FULACHE								
FIRST NAME	ARNEL		NAME EXTENSION (JR., SR) N/A							
MIDDLE NAME		BRONIO								
25. MOTHER'S MAIDEN NAME										
SURNAME		BARTULABA								
FIRST NAME	TESSIE									
MIDDLE NAME		MOLINA			(C	ontinue on se	parate sheet if neces	sary)		
III. EDUCATIONAL BACKGI	ROUND			CANE A						
26. LEVEL	The second secon	OF SCHOOL ite in full)	BASIC EDUCATION/DEGRE (Write in full)	PERIOD OF ATTENDANCE From To			HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED	
ELEMENTARY	HILONGOS SOUT	TH CENTRAL SCHOOL	ELEMENTARY		2007	2013		2013	N/A	
SECONDARY	SAINT JOS	SEPH COLLEGE	SENIOR HIGH SCHOOL		2013	2019		2019	N/A	
VOCATIONAL / TRADE COURSE		N/A	N/A		N/A	N/A		N/A	N/A	
COLLEGE	SOUTHERN LEYT	E STATE UNIVERSITY	BS COMPUTER ENGINE	EERING	2019	2023		2023	N/A	
GRADUATE STUDIES	N/A		N/A		N/A	N/A		N/A	N/A	

made

SIGNATURE

DATE

	SPECIAL LA	1080 (BOARD/ BAR) UNDER WS/ CES/ CSEE	RATING (If Applicable)	DATE OF EXAMINATION /	PLACE OF EXAMINA	ATION / CONFE	RMENT	LICENSE (if a	_
BARANGAY ELIGIBILITY / DRIVER'S LICENSE			(If Applicable)	CONFERMENT	, DIOC OF EXAMINA	TON / CONFE	INMEN!	NUMBER	Date Valid
	CSE PROFE	SSIONAL	84.59 AUGUST 20, 2023 MAASIN CITY, SOUTHERN LEYTE			N/A	N/A		
				Remarks.					
MODKE	XPERIENCE		(Co	ontinue on separate sheet if n	ecessary)				
		t. Start from your recent	work) Descriptio	n of duties should be in	dicated in the attache	d Work Exp	erience sheet.		
INCLU	SIVE DATES n/dd/yyyy)	POSITION TIT	LE	DEPARTMENT / AGENCY / OFFICE / COMPANY		MONTHLY	SALARY/ JOB/ PAY GRADE (If	STATUS OF	GOV
From	То	(Write in full/Do not a	bbreviate)	(Write in full/Do	not abbreviate)	SALARY	applicable)& STEP (Format *00-0*)/ INCREMENT	APPOINTMENT	SERVI (Y/N
7/01/2021	6/30/2022	SCIENCE RESEARCH	ASSISTANT	VISAYAS STAT	E UNIVERSITY	11,200		JOB ORDER	Y
)/15/2022	11/15/2022	STAFF WRIT	ER	SOUTHERN LEYTE	STATE UNIVERSITY	13,500		JOB ORDER	Y
/01/2023	PRESENT	MEDIA PRODUCTION	SPECIALIST	VISAYAS STAT	E UNIVERSITY	22,814		JOB ORDER	Y
				tinue on separate sheet if neo	cessary)		al Second		
SIGNAT	TURE	Product	tion		DATE		03-	28-202	и

IV. CIVIL SERVICE ELIGIBILITY

VI. VOLUNTARY WORK OR INVOLVEMEN		T/PEOPLE/V	OLUNTARY (	DRGANIZATIO	N/S		
	NAME & ADDRESS OF ORGANIZATION (Write in full)		INCLUSIVE DATES (mm/dd/yyyy)			POSITION / NATURE OF WORK	
Project Batang Hilo	ngosnon	2020	To Present		Volunteer		
VII. LEARNING AND DEVELOPMENT (L&D	LINTERVENTIONS/TRAINING B	ontinue on separate	sheet if necessary				
THE ELECTRICATION AND DEVELOT MENT (EAD	TINTERVENTIONS TRAINING P		DATES OF				
30. TITLE OF LEARNING AND DEVELOPMENT IN (Write in fu	ATTEN	DANCE d/yyyy)	NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)		
Workshop on Media Production and Management	02/03/2024	02/03/2024	8HRS	Technical Skills	San Lorenzo Ruiz College of Ormoc		
Design Thinking Wo	kshop	12/13/2023	12/14/2023	16HRS	Leadership/	VSU Quality Assurance Center	
2-Day Seminar-Workshop on Resear	ch Poster Presentation	10/12/2023	10/13/2023	16HRS	Managerial Technical	BiPSU Research and Development Office	
Training of Trainers on Dig	ital Literacy	02/22/2023	02/24/2023	24HRS	Leadership/	Department of Information and Communications	
					Managerial	Technology (DICT) Regional Office 8	
		Z. Anni					
/III. OTHER INFORMATION	(Con	ntinue on separate si	heet if necessary)				
	NON	I-ACADEMIC DISTIN	CTIONS / RECOGN	VITION		MEMBERSHIP IN ASSOCIATION/ORGANIZATION	
31. SPECIAL SKILLS and HOBBIES	32.	33. (Write in full)					
Video Editing & Directing	3rd Place Short Film Ma	N/A					
Webpage Designing	2nd Pla						
Desktop Publishing	1st Place, Collaborative Desktop Publishing, Area Sch. Press Conference, 2017						
News Writing	2nd Place, I						
SIGNATURE	Con	tinue on separate si	neet if necessary)	DA	TE I	03-28-2024	
	- Fried					CS FORM 212 (Revised 2017), Page 3 of 4	

Are you related by consanguinity or affinity to the appointin chief of bureau or office or to the person who has immediat Bureau or Department where you will be apppointed,	g or recommending authority, or to the te supervision over you in the Office,					
a. within the third degree?     b. within the fourth degree (for Local Government Unit - Ca	☐ YES ☑ NO ☐ YES ☑ NO If YES, give details:					
		11 123, give details.				
35, a. Have you ever been found guilty of any administrative of	☐ YES ☑ NO If YES, give details:					
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 a any court or tribunal?	☐ YES ☑ NO If YES, give details:					
37. Have you ever been separated from the service in any of the dropped from the rolls, dismissal, termination, end of term, f in the public or private sector?	e following modes: resignation, retirement, înished contract or phased out (abolition)	☐ YES ☑ NO If YES, give details:				
a. Have you ever been a candidate in a national or local elements are also as a second s		☐ YES ☑ NO If YES, give details:				
election to promote/actively campaign for a national or local	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?					
39. Have you acquired the status of an immigrant or permanent	☐ YES ☑ NO If YES, give details (country):					
<ul> <li>40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag and (c) Solo Parents Welfare Act of 2000 (RA 8972), please</li> <li>a. Are you a member of any indigenous group?</li> <li>b. Are you a person with disability?</li> <li>c. Are you a solo parent?</li> </ul>	☐ 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.				
Jed Asaph D. Cortes	Visca, Baybay City, Leyte	0977-8512-000				
Ulderico B. Alviola	Visca, Baybay City, Leyte	0917-8363-626	-30			
42. I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertine Philippines. I authorize the agency head/authorized represe agree that any misrepresentation made in this document administrative/criminal case/s against me.	ent laws, rules and regulations of the finattive to verify/validate the contents state	Republic of the difference of the	NEIL BRYAN B. FULACHE. 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: Driver's License	Antentra					
ID/License/Passport No.: H12-18-001946	Signature (Sign inside the bo	x)				
Date/Place of Issuance: 05/17/2023		Right Thumbmark				
SUBSCRIBED AND SWORN to before me this	, afflant exhibitir	ng his/her validly issued governme	ent ID as indicated above.			
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