CS Form No. 212 Revised 2017	PERSO	NAL DAT	A SH	IEE.	Γ			
concerned.	ation made in the Personal Data Sheet and the			_		criminal case/s a	gainst the pe	erson
Print legibly. Tick appropriate boxes	s () and use separate sheet if necessary. Indicate t				1. CS ID No.		(Do not fill up. F	For CSC use only
I. PERSONAL INFORMATION 2. SURNAME	AVELLANA							
FIRST NAME	JOSELITO					NAME EXTENSION (JR	, SR)	
MIDDLE NAME 3. DATE OF BIRTH	PARMIS							
(mm/dd/yyyy)	07/25/1997	16. CITIZENSHIP	✓ Filipino ☐ Dual Citizenship ☐ by birth ☐ by naturalizati			zation		
4. PLACE OF BIRTH	ORMOC CITY	If holder of dual citize	enship,			Pls. indicate c	country:	
5. SEX	✓ Male ☐ Female	please indicate the d	letails.					•
6 CIVIL STATUS	✓ Single	17. RESIDENTIAL ADDRESS		323 use/Block/Lot N N/A			Street ZONE 6	R ST.
7. HEIGHT (m)	1.64		BA'	bdivision/Villag	TY		Barangay LEYTE	
8. WEIGHT (kg)	65	ZIP CODE	С	ity/Municipality		6521	Province	
9. BLOOD TYPE	A	18. PERMANENT ADDRESS		323			EL PILAI	R ST.
10. GSIS ID NO.	N/A	-		use/Block/Lot N N/A			Street ZONE 6	
11. PAG-IBIG ID NO.	121264636560		BA'	bdivision/Villag YBAY CI City/Municipality			Barangay LEYTE Province	
12. PHILHEALTH NO.	13-250361605-3	ZIP CODE		нулминиранц	(6521	FIOVINCE	
13. SSS NO.	N/A	19. TELEPHONE NO.	N/A					
14. TIN NO.	759-534-095	20. MOBILE NO.	09064441864					
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)		jos	elito.avel	llana@vsu.ed	lu.ph	
II. FAMILY BACKGROUND								
22. SPOUSE'S SURNAME	N/A	Thurst Extension (ID, an)	23. NAME of CH	•		list all)	DATE OF BIRT	TH (mm/dd/yyyy)
FIRST NAME	N/A	NAME EXTENSION (JR., SR)			V/A		N	I/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	AVELLANA	NAME EXTENSION (JR., SR)						
FIRST NAME	JOSE	NAME EXTENSION (JR., SK)						
MIDDLE NAME	MODINA							
25. MOTHER'S MAIDEN NAME	PARMIS							
SURNAME	AVELLANA							
FIRST NAME	ZENAIDA							
MIDDLE NAME	CAHILIG			(C	ontinue on se _l	parate sheet if neces	sary)	
III. EDUCATIONAL BACKS	GROUND							SCHOLARSHIP/
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGR (Write in full)	EE/COURSE	PERIOD OF A	ATTENDANCE To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	ACADEMIC HONORS RECEIVED
ELEMENTARY	BAYBAY II CENTRAL SCHOOL	PRIMARY EDUC			2010	N/A		

SIGNATURE			DA	TE	12	2/23/2023	
(Continue on separate sheet if necessary)							
GRADUATE STUDIES	N/A	N/A		N/A		N/A	
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR IN SECONDARY EDUCATION	2014	2018	N/A	2018	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A N/A N/A		N/A		
SECONDARY	FRANCISCAN COLLEGE OF THE IMMACULATE	HIGH SCHOOL	2010	2014	N/A	2014	N/A

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IV. CIVIL S	ERVICE ELIG	BILITY							
27. CARE	ER SERVICE/ RA	1080 (BOARD/ BAR) UNDER	RATING	DATE OF				LICENSE (i	if applicable)
	RANGAY ELIGIBIL	WS/ CES/ CSEE ITY / DRIVER'S LICENSE	(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINA	TION / CONFER	RMENT	NUMBER	Date of Validity
		MINATION FOR LL TEACHERS	84.6	08/30/2018	TACLOB	AN CITY	<u>, </u>	1699853	07/27/20 22
V. WORK I	EXPERIENCE		(Co	ntinue on separate shee	t if necessary)				
(Include priv	ate employme	nt. Start from your recen	t work) Description	of duties should b	e indicated in the attache	ed Work Exp	erience shee	t.	
	USIVE DATES nm/dd/yyyy) To	POSITION T (Write in full/Do not			ENCY / OFFICE / COMPANY /Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)
08/16/2023	12/20/2023	Part-Time Ins	tructor		hematics, Visayas State	P 13,000.00	no cher	Job Order	Y
09/26/2022	1/2/2023	Part-Time Ins	tructor	Department of Mat	hematics, Visayas State niversity	P 13,000.00		Job Order	Y
09/14/2021	12/20/2021	Teacher	1	Makinhas Na	tional High School	P 23,877.00	11	Substitute	Υ
4/11/2019	10/2/2020	Teacher	1	Kagumay E	lementary School	P 20,754.00	11	Substitute	Υ
	<u> </u>								

(Continue on separate sheet if necessary)								
SIGNA	TURE			DATE	12/23/2023		3	

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VI. VOLU	INTARY WORK OR INVOLVEMENT	IN CIVIC / NON-GOVERNMENT	/PEOPLE/V	OLUNTARY	ORGANIZATI	ON/S	
	NAME & ADDRESS OF C		INCLUSIV				
29.	(Write in ful			d/yyyy)	NUMBER OF HOURS		POSITION / NATURE OF WORK
			From	То			
N/A							
		(Con	tinue on separate s	sheet if necessary))		
	RNING AND DEVELOPMENT (L&D) the most recent L&D/training program and inclu				hief/Executive/Man	agerial positions)	
			1	DATES OF		Type of LD	
30.	TITLE OF LEARNING AND DEVELOPMENT INTI (Write in ful		ATTEN (mm/d	DANCE d/yyyy)	NUMBER OF HOURS	(Managerial/ Supervisory/	CONDUCTED/ SPONSORED BY (Write in full)
			From	То		Technical/etc)	
N/A							
				h4"			
VIII. OTH	JED INFORMATION	(Con	tinue on separate s	sneet if necessary)		
	HER INFORMATION	NON	-ACADEMIC DISTIN	ICTIONS / RECOG	NITION		MEMBERSHIP IN ASSOCIATION/ORGANIZATION
31.	SPECIAL SKILLS and HOBBIES	32. 7th Placer in Leyte All Stars, 4t	(Write	e in full)		Placer in DES	33. (Write in full)
	Dancing		arketing Hipho				Baybay City Hipnotix
Ī	Work-Out						Olympic Gym

(Continue on separate sheet if necessary)					
SIGNATURE		DATE	12/23/2023		

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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?	e supervision over you in the Office, YES V NO YES NO		
b. within the fourth degree (for Local Government Unit - Car	reer Employees)?		
	☐ YES ✓ NO	If YES, give details:	
35. a. Have you ever been found guilty of any administrative off	fense?	If YES, give details:	
b. Have you been criminally charged before any court?	☐ YES ✓ NO	If YES, give details: Date Filed:	
	☐ YES ✓ NO	Status of Case/s:	
36. Have you ever been convicted of any crime or violation of a by any court or tribunal?	ny law, decree, ordinance or regulation YES NO	If YES, give details:	
	☐ YES ✓ NO		
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?	If YES, give details:		
38. a. Have you ever been a candidate in a national or local ele Barangay election)?	If YES, give details.	:	
 b. Have you resigned from the government service during the election to promote/actively campaign for a national or local 	If YES, give details:	:	
39. Have you acquired the status of an immigrant or permanent	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?			
h		If YES, please specify:	
b. Are you a person with disability?		If YES, please specify I	D No:
c. Are you a solo parent?		If YES, please specify I	
41. REFERENCES (Person not related by consanguinity or affinity to applican	t (annointee)		
NAME	•	TEL. NO.	
Daniel Joseph Tan	ADDRESS Baybay City, Leyte	9682621590	ID picture taken within the last 6 months 3.5 cm. X 4.5 cm
Karen Mendez	Baybay City, Leyte	9359469129	(passport size) With full and handwritten
Annelyn L. Nunez	Brgy Caridad, Baybay City, Leyte	9606647907	name tag and signature over printed name
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 reprint I agree that any misrepresentation made in this doc administrative/criminal case/s against me.	It is Personal Data Sheet which is a tent laws, rules and regulations of the esentative to verify/validate the content	Republic of the ts stated herein.	Computer generated or photocopied picture is not acceptable 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: PRC			
ID/License/Passport No.: 1699853	Signature (Sign inside the I	hox)	
Poto/Place of Issuesses 0.1/0.1/2010	12/23/2023	JUAJ	

Date/Place of Issuance: U1/U4/ZU19	Date Accomplished	Right Thumbmark
SUBSCRIBED AND SWORN to before me this	, affiant exhibiting his/her validly issued o	government ID as indicated above.
	Person Administering Oath	

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