	P	ERSOI	NAL DAT	A SH	IEE.	Г				
WARNING: Any misrepresental concerned.			-		_		/criminal case/s	against the p	oerson	
<b>READ THE ATTACHED GUIDE</b> Print legibly. Tick appropriate boxes	<ul><li>) and use separate sheet i</li></ul>				HE PDS FOR	1. CS ID No.		(Do not fill up. F	or CSC use only)	
I. PERSONAL INFORMATIO	1									
2. SURNAME	ACABO						NAME EXTENSION (JR	R. SR)		
FIRST NAME	MAC LHENRY							., ,		
MIDDLE NAME	MORALDE		•							
DATE OF BIRTH     (mm/dd/yyyy)	7/1/2001		16. CITIZENSHIP	✓ Filipino ☐ Dual Citizenship				zation		
4. PLACE OF BIRTH	IPHO, MAASIN CITY		If holder of dual citizenship,		Pls. indicate country:					
5. SEX	✓ Male	Female	please indicate the de	etails.					•	
6 CIVIL STATUS	✓ Single  ☐ Widowed  ☐ Other/s:	☐ Married ☐ Separated	17. RESIDENTIAL ADDRESS	N/A House/Block/Lot No. N/A		PUROK CAIMITO Street SAN JOAQUIN				
7. HEIGHT (m)	167 cm.			Subdivision/Village MACROHON		Barangay SOUTHERN LEYTE				
8. WEIGHT (kg)	77 kg.		ZIP CODE	C	City/Municipality		6601	Province		
9. BLOOD TYPE	N/A		18. PERMANENT ADDRESS		N/A			PUROK 1		
				Нои	House/Block/Lot No. N/A			Street CANTUTANG		
10. GSIS ID NO.	N/A			Sui	bdivision/Villag			Barangay	LEVEE	
11. PAG-IBIG ID NO.	N/A			C	PADRE BU ty/Municipality	IRGUS		SOUTHERN LEYTE Province		
12. PHILHEALTH NO.	N/A		ZIP CODE		6602		6602			
13. SSS NO.	N/A		19. TELEPHONE NO.	N/A						
14. TIN NO.	N/A		20. MOBILE NO.	09928932438						
15. AGENCY EMPLOYEE NO.	N/A		21. E-MAIL ADDRESS (if any)	piggymac	/mac649@gmail.com					
II. FAMILY BACKGROUND										
22. SPOUSE'S SURNAME	N/A			23. NAME of CH	CHILDREN (Write full name and list all)  DATE			DATE OF BIR	TH (mm/dd/yyyy)	
FIRST NAME	N/A					N/A		N	I/A	
FIRST NAME MIDDLE NAME	N/A N/A					N/A			I/A I/A	
						N/A N/A		N		
MIDDLE NAME	N/A					N/A N/A		N	I/A	
MIDDLE NAME OCCUPATION	N/A N/A					N/A N/A N/A N/A		h	N/A	
MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME	N/A N/A N/A					N/A N/A		h	N/A N/A N/A N/A	
MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS	N/A N/A N/A					N/A N/A N/A N/A		h	N/A N/A N/A	
MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO.	N/A N/A N/A N/A					N/A N/A N/A N/A		h	N/A N/A N/A N/A	
MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO. 24. FATHER'S SURNAME	N/A N/A N/A N/A N/A ACABO					N/A N/A N/A N/A		h	N/A N/A N/A N/A	
MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME	N/A N/A N/A N/A N/A N/A ACABO HENRY GRAFIL					N/A N/A N/A N/A		N N N N N N N N N N N N N N N N N N N	N/A N/A N/A N/A N/A	
MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO.  24. FATHER'S SURNAME FIRST NAME MIDDLE NAME	N/A N/A N/A N/A N/A N/A ACABO HENRY GRAFIL					N/A N/A N/A N/A		N N N N N N N N N N N N N N N N N N N	N/A N/A N/A N/A	
MIDDLE NAME  OCCUPATION  EMPLOYER/BUSINESS NAME  BUSINESS ADDRESS  TELEPHONE NO.  24. FATHER'S SURNAME  FIRST NAME  MIDDLE NAME  25. MOTHER'S MAIDEN NAME  SURNAME  FIRST NAME	N/A N/A N/A N/A N/A N/A ACABO HENRY GRAFIL  MORALDE HELEN					N/A N/A N/A N/A		5/10	N/A N/A N/A N/A N/A	
MIDDLE NAME  OCCUPATION  EMPLOYER/BUSINESS NAME  BUSINESS ADDRESS  TELEPHONE NO.  24. FATHER'S SURNAME  FIRST NAME  MIDDLE NAME  SURNAME  FIRST NAME  FIRST NAME  MIDDLE NAME  SURNAME  FIRST NAME  MIDDLE NAME	N/A N/A N/A N/A N/A N/A ACABO HENRY GRAFIL  MORALDE HELEN QUISADO					N/A N/A N/A N/A	parate sheet if neces	5/10	N/A N/A N/A N/A N/A	
MIDDLE NAME  OCCUPATION  EMPLOYER/BUSINESS NAME  BUSINESS ADDRESS  TELEPHONE NO.  24. FATHER'S SURNAME  FIRST NAME  MIDDLE NAME  25. MOTHER'S MAIDEN NAME  SURNAME  FIRST NAME	N/A N/A N/A N/A N/A N/A ACABO HENRY GRAFIL  MORALDE HELEN QUISADO				(cc	N/A N/A N/A N/A N/A N/A	parate sheet if neces	5/10	M/A M/A M/A M/A M/A M/A M/A M/A M/A M/A	
MIDDLE NAME  OCCUPATION  EMPLOYER/BUSINESS NAME  BUSINESS ADDRESS  TELEPHONE NO.  24. FATHER'S SURNAME  FIRST NAME  MIDDLE NAME  SURNAME  FIRST NAME  FIRST NAME  MIDDLE NAME  SURNAME  FIRST NAME  MIDDLE NAME	N/A N/A N/A N/A N/A N/A ACABO HENRY GRAFIL  MORALDE HELEN QUISADO	11)	(Write in full)		(cc	N/A N/A N/A N/A	parate sheet if neces	5/10	N/A N/A N/A N/A N/A	
MIDDLE NAME  OCCUPATION  EMPLOYER/BUSINESS NAME  BUSINESS ADDRESS  TELEPHONE NO.  24. FATHER'S SURNAME  FIRST NAME  MIDDLE NAME  25. MOTHER'S MAIDEN NAME  SURNAME  FIRST NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME	N/A N/A N/A N/A N/A N/A ACABO HENRY GRAFIL MORALDE HELEN QUISADO ROUND		(Write in full)  PRE ELEMENTARY TO GRADE	6	(C)	N/A N/A N/A N/A N/A N/A N/A N/A N/A		5/10 1/16	M/A	
MIDDLE NAME  OCCUPATION  EMPLOYER/BUSINESS NAME  BUSINESS ADDRESS  TELEPHONE NO.  24. FATHER'S SURNAME  FIRST NAME  MIDDLE NAME  25. MOTHER'S MAIDEN NAME  SURNAME  FIRST NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  LEVEL	N/A N/A N/A N/A N/A N/A N/A ACABO HENRY GRAFIL  MORALDE HELEN QUISADO ROUND (Write in fu	TARY SCHOOL	, ,		(CI PERIOD OF /	N/A N/A N/A N/A N/A N/A TENDANCE To		1/16 1/16 1/18	J/A J/A J/A J/A J/A J/1967 SCHOLARSHIP ACADEMIC HONORS RECEIVED	
MIDDLE NAME  OCCUPATION  EMPLOYER/BUSINESS NAME  BUSINESS ADDRESS  TELEPHONE NO.  24. FATHER'S SURNAME  FIRST NAME  MIDDLE NAME  25. MOTHER'S MAIDEN NAME  SURNAME  FIRST NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  LEVEL  ELEMENTARY	N/A N/A N/A N/A N/A ACABO HENRY GRAFIL  MORALDE HELEN QUISADO ROUND  (Write in fu	TARY SCHOOL	PRE ELEMENTARY TO GRADE ACCOUNTANCY BUSINESS AN		PERIOD OF / From 6/6/2005	N/A N/A N/A N/A N/A N/A TITENDANCE To 3/11/2011		1/16 1/16 2011	J/A J/A J/A J/A J/A J/1967 SCHOLARSHIP ACADEMIC HONORS RECEIVED	
MIDDLE NAME  OCCUPATION  EMPLOYER/BUSINESS NAME  BUSINESS ADDRESS  TELEPHONE NO.  24. FATHER'S SURNAME  FIRST NAME  MIDDLE NAME  25. MOTHER'S MAIDEN NAME  SURNAME  FIRST NAME  MIDDLE NAME  MIDDLE NAME  III. EDUCATIONAL BACKG  26. LEVEL  ELEMENTARY  SECONDARY	N/A N/A N/A N/A N/A N/A ACABO HENRY GRAFIL  MORALDE HELEN QUISADO ROUND  (Write in fu	TARY SCHOOL	PRE ELEMENTARY TO GRADE ACCOUNTANCY BUSINESS AN MANAGEMENT	D	PERIOD OF / From 6/6/2005	N/A N/A N/A N/A N/A N/A TITENDANCE To 3/11/2011		1/16 1/16 2011	J/A J/A J/A J/A J/A J/1967 SCHOLARSHIP ACADEMIC HONORS RECEIVED	
MIDDLE NAME  OCCUPATION  EMPLOYER/BUSINESS NAME  BUSINESS ADDRESS  TELEPHONE NO.  24. FATHER'S SURNAME  FIRST NAME  MIDDLE NAME  25. MOTHER'S MAIDEN NAME  SURNAME  FIRST NAME  MIDDLE NAME  MIDDLE NAME  III. EDUCATIONAL BACKG  LEVEL  ELEMENTARY  SECONDARY  TRADE COURSE	N/A N/A N/A N/A N/A N/A N/A N/A ACABO HENRY GRAFIL  MORALDE HELEN QUISADO ROUND  (Write in fu	TARY SCHOOL	PRE ELEMENTARY TO GRADE ACCOUNTANCY BUSINESS AN MANAGEMENT N/A	D	(C) PERIOD OF / From 6/6/2005 6/5/2017	N/A		1/16 1/16 1/16 2011 2019	J/A J/A J/A J/A J/A J/1967 SCHOLARSHIP ACADEMIC HONORS RECEIVED	

IV CIVILS	ERVICE ELIG	IRILITY								
	ER SERVICE/ RA 1	080 (BOARD/ BAR) UNDER	RATING	DATE OF				LICENSE (if applicable)		
SPECIAL LAWS/ CES/ CSEE  BARANGAY ELIGIBILITY / DRIVER'S LICENSE			RATING (If Applicable)	EXAMINATION / PLACE OF EXAMINATION / CONFERMENT CONFERMENT			RMENT	NUMBER	Date of Validity	
CAREER SERVICE PROFESSIONAL			80.3	6/19/2022	CCITY		N/A	N/A		
			(Con	tinue on separate sheet	if necessary)					
	EXPERIENCE		nt work) Descriptio	n of duties should	be indicated in the attach	and Work Fy	rnerience she	of		
28. INCLU	JSIVE DATES						SALARY/ JOB/ PAY		GOVT	
From	m/dd/yyyy) To	POSITION TITLE (Write in full/Do not abbreviate)		DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)		MONTHLY SALARY	applicable)& STEP (Format '00-0')/ INCREMENT	STATUS OF APPOINTMENT	SERVICE (Y/N)	
N/A	N/A	N/A			N/A	N/A	N/A	N/A	N/A	
No.	Nic.	, and			nis.		N/A	NA	nia.	
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			/Cox	ntinue on separate sheet	t if necessary)					
SIGN	ATURE				DATE		JULY 24, 2023	FORM 212 (Revised 2		

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATIONS								
29. NAME & ADDRESS OF C (Write in ful			VE DATES Id/yyyy)	NUMBER OF HOURS	POSITION / NATURE OF WORK			
(11100-11100	4	From	То					
ANGAT BUHAY PADRE BURGOS CHAPTER		12/6/2021	5/9/2022		VOLUNTEER			
CM SUPREME STUDENT COUNCIL		6/3/2019	3/9/2020		SENATOR			
CM SUPREME STUDENT COUNCIL		8/10/2020	4/5/2021		TREASURER			
CM SUPREME STUDENT COUNCIL		8/9/2021	5/13/2022		PRESIDENT			
			l	(Continue of	n separate sheet if necessary)			
VII. LEARNING AND DEVELOPMENT (L&D)	INTERVENTIONS/TRAINING PA							
30. TITLE OF LEARNING AND DEVELOPMENT INT	FRVENTIONS/TRAINING PROGRAMS		DATES OF IDANCE		Type of LD			
(Write in ful			ld/yyyy)	NUMBER OF HOURS	(Manageriali Supervisoryi Technicalietc)	CONDUCTED/ SPONSORED BY (Write in full)		
BFP FIRE DRILLS, TRAINING AND EXERCISE		From To		440 HOURS	TECHNICAL	BUREAU OF FIRE PROTECTION MAASIN CITY		
		6/4/2018	3/4/2019	110 HOURS				
SK YOUTH FEDERATION LEADERSHIP SEMINAR PHILIPPINE ASSOCIATION OF PRACTITIONERS OF S	STUDENT AFFAIRS AND SERVICES	3/24/2022	3/24/2022	4 HOURS	MANAGERIAL	SK YOUTH FEDERATION MAASIN CITY		
(PAPSAS) REGION VIII, INC. REGIONAL LEADERSHII		5/30/2022	5/31/2022	18 HOURS	MANAGERIAL, SUPERVISORY	PAPSAS REGION VIII INCORPORATED		
				(Continue o	n separate sheet if necessary)			
VIII. OTHER INFORMATION								
31. SPECIAL SKILLS and HOBBIES	32.	NON-ACADEM	(Write in full)	/RECOGNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)		
PLAYING VOLLEYBALL	CM HILL	CM HILLTOP PUBLICATION SPORTS WRITER SY 2022-2023			22-2023	CM SUPREME STUDENT COUNCIL		
KPOP FAN	CM JPIA VI	CE PRESIDENT	T FOR NON AC	ADEMICS AY	2019-2023	CM HILLTOP PUBLICATION		
	(Continue on separate sheet if necessary)							
SIGNATURE					DATE	JULY 24, 2023		
						CS EODM 313 (Paulant 2017) Book		

34.	Are you related by consanguinity or affinity to the appointing o chief of bureau or office or to the person who has immediate s Bureau or Department where you will be appointed,							
	a. within the third degree?	☐ YES □	√ NO					
	b. within the fourth degree (for Local Government Unit - Caree		☑ NO					
		If YES, give details						
35.	a. Have you ever been found guilty of any administrative offen	☐ YES [	√ NO					
		If YES, give details	_					
	b. Have you been criminally charged before any court?	YES If YES, give details	☑ NO					
		Date Filed:						
			Status of Case/s:					
36.	Have you ever been convicted of any crime or violation of any	law decree ordinance or regulation by						
30.	any court or tribunal?	ian, acaree, oraniance or regulation by	YES	✓ NO				
	•		If YES, give details					
-	Harmon and the state of the sta	t Handan and American de						
37.	Have you ever been separated from the service in any of the f retirement, dropped from the rolls, dismissal, termination, end		YES If VES give details	. ✓ NO				
	(abolition) in the public or private sector?	or term, imistred contract or priased out	If YES, give details:					
38	Have you ever been a candidate in a national or local election	on held within the last year (except						
30.	Barangay election)?	on noise mann one next year (except	YES If YES, give detail:	✓ NO s·				
	h Have you resistant from the anyone meet anning during the	three (2) month period before the last						
	<ul> <li>Have you resigned from the government service during the election to promote/actively campaign for a national or local ca</li> </ul>		YES NO If YES, give details:					
_			II 120, give detail					
39.	Have you acquired the status of an immigrant or permanent re	esident of another country?	YES	✓ NO				
			If YES, give details	(country):				
40								
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magni 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), pl							
а.	Are you a member of any indigenous group?	loade answer are removing items.						
	Are you a member of any magerious 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	☑ NO				
			If YES, please specify	ID No:				
41.	REFERENCES (Person not related by consanguinity or affinity to applicant /ap	ppointee)						
	NAME	ADDRESS	TEL. NO.	Contract of the Contract of th				
	ROSE AXEL FAJARDO	TUNGA-TUNGA, MAASIN CITY	9066945042					
	VIRGINIA MONTEDERAMOS	CANTUTANG, PADRE BURGOS	9355159632					
	LEONA CLAVEJO	HILONGOS, LEYTE	9152659702					
42.	I declare under oath that I have personally accomplished	this Personal Data Sheet which is a tr	rue, 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.  I agree that any misrepresentation made in this document and its attachments shall cause the filing of							
	administrative/criminal case/s against me.							
(	Sovernment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)							
ιн	PLEASE INDICATE ID Number and Date of Issuance							
Ιŀ	Government Issued ID: POSTAL ID							
l	D/License/Passport No.: PRNI68220315674P	oox)						
	Date/Place of Issuance: JUNE 03, 2022/JUNE 03, 2025		Right Thumbmark					
Г	SUBSCRIBED AND SWORN to before me this	affiant exhibiting	a his/her validly issued on	overnment ID as indicated above.				
I	CODOCHIDED AND OTTOTAL IN DEIDLE HIE HIS	dinair extiloitiii	gorner validity issued go					
I								
I								
I	<u> </u>	th						
		Person Administering Oa						