CS Form No. 212 Revised 2017	PERSOI	NAL DAT	A SH	IEE1	Γ				
WARNING: Any misrepresentati	on made in the Personal Data Sheet and the V	Work Experience Sheet shall	cause the filin	ng of admini	strative/crir	ninal case/s agair	nst the persor	n concerned.	
	TO FILLING OUT THE PERSONAL DATA SHEE								
Print legibly. Tick appropriate boxes (I. PERSONAL INFORMATION	and use separate sheet if necessary. Indicate N/	A if not applicable. DO NOT AB	BREVIATE.		1. CS ID No.		(Do not fill up.	For CSC use only	
2. SURNAME	MAGALLANES								
						NAME EXTENSION (JR	R., SR)		
FIRST NAME	DESSA						, ,		
MIDDLE NAME	JUSAY								
DATE OF BIRTH (mm/dd/yyyy)	09/09/2001	16. CITIZENSHIP	☑ Filipino ☐ Dual Citizenship ☐ by birth			by naturalization			
4. PLACE OF BIRTH	PASIG CITY, MANILA	If holder of dual citizer	zenship, Pls. indicate (country:			
5. SEX	☐ Male ☑ Female	please indicate the details.						•	
6 CMIL STATUS	✓ Single	17. RESIDENTIAL ADDRESS	Hou	N/A puse/Block/Lot No.			Purok Langka Street		
	Other/s:			N/A			San Roque		
7. HEIGHT (m)	1.56		Sut	ubdivision/Village Macrohon			Barangay Southern Leyte		
		7/D 000F	Ci	ty/Municipality		0004	Province		
8. WEIGHT (kg)	53	ZIP CODE 18. PERMANENT ADDRESS		N/A		6601	Purok Langka		
9. BLOOD TYPE	0+	10. I ENWANENT ADDICESS	House/Block/Lot No.				Street		
10. GSIS ID NO.	N/A		Sub	N/A odivision/Village	9		San Roque Barangay		
11. PAG-IBIG ID NO.	N/A			Macrohon			Southern Ley	rte	
12. PHILHEALTH NO.	N/A	ZIP CODE	Ci	ty/Municipality Province 6601					
13. SSS NO.	N/A	19. TELEPHONE NO.		N/A					
14. TIN NO.	N/A	20. MOBILE NO.	09305662498						
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	dessa09magallanes@gmail.com						
II. FAMILY BACKGROUND									
22. SPOUSE'S SURNAME	N/A		23. NAME of CHI	E of CHILDREN (Write full name and list all)				DATE OF BIRTH (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	MAGALLANES						+		
FIRST NAME	DINDO	NAME EXTENSION (JR., SR)							
MIDDLE NAME	JAPOS						†		
25. MOTHER'S MAIDEN NAME							+		
SURNAME	JUSAY								
FIRST NAME	LIZA								
MIDDLE NAME	SOLONIA			(Continue on separate sheet if neces			essary)		
III. EDUCATIONAL BACKGROUND									
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGRE (Write in full)	E/COURSE	PERIOD OF A	ATTENDANCE To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED	
ELEMENTARY	SAN ROQUE ELEMENTARY SCHOOL	Elementary Diploma		/2007		N/A	2014	N/A	
SECONDARY	SAINT JOSEPH COLLEGE	High School Diploma		/2014	/2020	N/A	2020	OWWA	
VOCATIONAL / TRADE COURSE	N/A	N/A		N/A	N/A	N/A	N/A	N/A	
COLLEGE	VISAYAS STATE UNIVERSITY	Bachelor of Science in Environ	mental Science	10/10/2020	07/02/2024	N/A	2024	DOST	
GRADUATE STUDIES	N/A	N/A		N/A	N/A	N/A	N/A	N/A	
	<u> </u>	Continue on separate sheet if nece	ssary)						

SIGNATURE

January 10, 2025

DATE

IV. CIVIL SERVICE ELIGIBILITY									
27. CARE		080 (BOARD/BAR) UNDER WS/CES/CSEE	RATING	DATE OF EXAMINATION /	PLACE OF EXAMINA	TION / CONFER	RMENT	LICENSE (if a	
BA	RANGAY ELIGIBIL	ITY / DRIVER'S LICENSE	(If Applicable)	CONFERMENT	FERMENT		NUMBER	Date of Validity	
	N/A	1	N/A	N/A	N	I/A		N/A	N/A
			(Con	tinue on separate sheet	if necessary)				
	EXPERIENCE	ent. Start from your recei	nt work) Doscriptic	on of duties should	he indicated in the attac	had Wark F	vnorioneo she	oof	
28. INCLI	USIVE DATES						SALARY/.IOR/.PAY		GOV'T
From	nm/dd/yyyy) To	POSITION TI (Write in full/Do not				MONTHLY SALARY	GRADE (if 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
		19/14				N/A	III/A	1975	IIIA
			(Con	tinue on separate sheet	if necessary)				
SIGN	ATURE	Melly	(Jour		DATE		Januar	y 10, 2025	
		1 1 9						S FORM 212 (Revised 2	017) Page 2 of 4

VI. VOLUNTARY WORK OR INVOLVEMENT I	N CIVIC / NON-GOVERNMENT /	/ PEOPLE / VO	DLUNTARY O	RGANIZATIOI	N/S		
29. NAME & ADDRESS OF OR (Write in full)		INCLUSIV (mm/d	/E DATES d/yyyy) To	NUMBER OF HOURS		POSITION / NATURE OF WORK	
N/A		N/A	N/A	N/A	N/A		
	(Con	tinue on separate s	shoot if nococcan				
VII. LEARNING AND DEVELOPMENT (L&D) I							
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)		INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy) From To		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
N/A		N/A	N/A	N/A	N/A	N/A	
	(Con	tinue on separate s	heat if passager				
VIII. OTHER INFORMATION	(Con	unue on separate s	sneet ii necessary,				
31. SPECIAL SKILLS and HOBBIES	32. NON-	-ACADEMIC DISTIN (Write	ICTIONS / RECOG e in full)	NITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
SIGNATURE	Melly (Con	tinue on separate s	sheet if necessary		ATE	January 10, 2025	

34.	Are you related by consanguinity or aminity 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?	☐ YES ☑ NO					
	b. within the fourth degree (for Local Government Unit - Car	YES If YES, give details	☑ NO ::				
35.	a. Have you ever been found guilty of any administrative off	☐ 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 th dropped from the rolls, dismissal, termination, end of term, in the public or private sector?	YES If YES, give details	☑ NO ::				
38.	A. Have you ever been a candidate in a national or local ele Barangay election)?	YES If YES, give detai	Is: NO				
	b. Have you resigned from the government service during the election to promote/actively campaign for a national or local	☐ YES ☑ NO If YES, give details:					
39.	Have you acquired the status of an immigrant or permanent	☐ YES ☑ NO If YES, give details (country):					
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Maand (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?	If YES NO NO If YES, please specify ID No:					
41.	REFERENCES (Person not related by consanguinity or affinity to applica	ant /appointee)					
	NAME	ADDRESS	TEL. NO.				
	lvic T. Maitem	Macrohon, Southern Leyte	9061678256				
	Eric Entuna	Maasin, Southern Leyte	9175700897	6			
	Milagrosa S. Rodas	Macrohon, Southern Leyte	9369000575				
42.	I declare under oath that I have personally accomplished complete statement pursuant to the provisions of perting Philippines. I authorize the agency head/authorized represagree that any misrepresentation made in this doc administrative/criminal case/s against me.	nent laws, rules and regulations of the centative to verify/validate the contents state	Republic of the ed herein.	РНОТО			
	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) LEASE INDICATE ID Number and Date of Issuance	\					
 	overnment Issued ID: National ID	Well.					
IC	0/License/Passport No.: 3587-9231-0625-4781	Signature (Sign inside the b	oox)				
D	ate/Place of Issuance: 09/28/2022		Right Thumbmark				
	SUBSCRIBED AND SWORN to before me this	iting his/her validly issued	d government ID as indicated above.				
		h					
Ī							