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. 1 CS ID No (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. BASCO 2. SURNAME IAME EXTENSION (JR., SR) MA. FE FIRST NAME MIDDLE NAME ORDIZ 3. DATE OF BIRTH 06/15/2003 16. CITIZENSHIP Dual Citizenship Filipino (mm/dd/yyyy) by birth by naturalization Pls. indicate country: 4. PLACE OF BIRTH MAASIN CITY, SOUTHERN LEYTE If holder of dual citizenship, please indicate the details. ✓ Female Philippines 5. SEX Male Tunghaon ✓ Single Married 17. RESIDENTIAL ADDRESS 6 CIVIL STATUS House/Block/Lot No. Widowed Separated Santo Rosario Other/s: Subdivision/Village Barangay Maasin City Southern Levie 7. HEIGHT (m) 1.53 City/Municipality Province 8. WEIGHT (kg) 52.5 6600 ZIP CODE Tungheon 18. PERMANENT ADDRESS 9. BLOOD TYPE House/Block/Lot No. 10. GSIS ID NO. Barangay Subdivision/Village Maasin City Southern Leyte 11. PAG-IBIG ID NO. City/Municipality 6600 12. PHILHEALTH NO. ZIP CODE 13. SSS NO. 19. TELEPHONE NO. 09062088060 651-220-591-00000 14 TIN NO 20. MOBILE NO mariafebasco77@gmail.com 15. AGENCY EMPLOYEE NO 21. E-MAIL ADDRESS (if any) 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) 22. SPOUSE'S SURNAME NAME EXTENSION (JR., SR) FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO. BASCO 24. FATHER'S SURNAME IAME EXTENSION (JR., SR) FIRST NAME **FELIX** LOSANO MIDDLE NAME MARITA OLOR ORDIZ 25. MOTHER'S MAIDEN NAME ORDIZ SURNAME MARITA FIRST NAME OLOR (Continue on separate sheet if necessary) MIDDLE NAME SCHOLARSHIP HIGHEST LEVEL PERIOD OF ATTENDANCE BASIC EDUCATION/DEGREE/COURSE YEAR ACADEMIC NAME OF SCHOOL UNITS EARNED LEVEL HONORS RECEIVED GRADUATED (Write In full) (Write in full) (if not graduated) From То 06/15/2010 03/15/2015 2015 Valedictorian ELEMENTARY Sto. Rosario Elementary School 07/15/2021 2021 With Honor Accountancy and Business Management 06/15/2019 SECONDARY The College of Maasin VIAMOITACOV TRADE COURSE Academic Bachelor of Science in Economics Major in COLLEGE 08/21/2021 07/25/2025 2025

Environmental and Development Economics

DATE

07/29/2025

Scholar

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Visayas State University

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GRADUATE STUDIES

SIGNATURE

CAR		RVICE/ RA 1080 (BOARD/ BAR) UNDER RATING DATE OF EXAMINATION / CONFERMENT EXAMINATION / PLACE OF EXAMINATION / CONFERMENT		RMENT	LICENSE (if a	Date of			
BARANGAY ELIGIBILITY / DRIVER'S LICENSE (If Applicable) CAREER SERVICE PROFESSIONAL ELIGIBILITY 84.4			CONFERMENT				NUMBER	Validity	
			84.4	AUGUST 11, 2024	SAINT JOSEPH COLLEGE, MAASIN CITY, SOUTHERN LEYTE				
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INC	LUSIVE DATES mm/dd/yyyy)	POSITION TI	TLE	DEPARTMENT / AGE	NCY / OFFICE / COMPANY	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (If applicable)& STEP	STATUS OF	GOVT SERVICE
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4/2024	5/8/2024	Intern			ENTAL MANAGEMENT GIONAL OFFICE 8	N/A	N/A	Intern/OJT	Y
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29 NAME & AD	DRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (menidolyyyy)		NAMED OF HOURS	POSITION / NATURE OF WORK		
		From	To 20 2026		SV Committee	Education Culture and Territor Durit	
angguniang Kabataan - Santo Rosar	no, Massin City	12-20-2023	12-20-2025		SK Councilor -	Education, Culture, and Tourism Dev't	
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H. LEARNING AND DEVELOPME	NT (LLD) INTERVENTIONS/TRAINING P				of the last		
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0. TITLE OF LEARNING AND DEVELO	PMENT INTERVENTIONS/TRAINING PROGRAMS	ATTE	E DATES OF NDANCE	NAMED OF HOLFS	Type of LD (Managerial/	CONDUCTED: SPONSORED BY	
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II. OTHER INFORMATION				u Trou		MEMBERSHIP IN ASSOCIATION/ORGANIZA	
81. SPECIAL SKILLS and HOBBIES	S 32 NO	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)					
Ultimate Frisbee	MVP - UI	timate Frisbee (UISB Sportsfer	st 2024)			
Ultimate Frisbee (UISB Sportsfest 2024) Volleyball MVP - Ultimate Frisbee (UISB Sportsfest 2025)							
Walking		Participant - Junior Philippine Economics Society Convention					
	, aradipant - duli			•			
		offinue on separate s	heet if necessary				
SIGNATURE	m.		DATE	1 00/2	19/2025	CS FORM 212 (Revised 2017), Page 3	

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? b. within the fourth degree (for Local Government Unit - Care] NO] NO !s:			
35 a. Have you ever been found guilty of any administrative off	YES [-	NO 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	ny law decree ordinance or regulation				
by any court or tribunal?	☐ YES ☑ NO If YES, give details:				
37. Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, er out (abolition) in the public or private sector?	YES NO If YES, give details:				
Barangay election)?	a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?				
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) Mag	gna Carta for Disabled Persons (RA				
7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), a Are you a member of any indigenous group?	please answer the following items:				
Are you a member of any indigenous group?	, we you a member of any margenous group?				
b. Are you a person with disability?	If YES, please specify: YES NO If YES, please specify ID No:				
c. Are you a solo parent?		YES YES Specif	y ID No:		
41. REFERENCES (Person not related by consanguinity or affinity to applicant	/appointee)				
NAME	ADDRESS	TEL. NO.			
LEMUEL S. PRECIADOS	VISCA, BAYBAY CITY, LEYTE	9620808975			
42. I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertin Philippines. I authorize the agency head / authorized repragree that any misrepresentation made in this docu administrative/criminal case/s against me.	ent laws, rules and regulations of the resentative to verify/validate the content	Republic of the s stated herein. I	MA. FE O. BASCO		
Government Issued ID (i.e Passport, GSIS, SSS, PRC, Driver's License, etc.)			SAN.		
PLEASE INDICATE ID Number and Date of Issuance Government Issued ID PhilSys ID					
ID/License/Passport No 6179-1392-4082-9420	Cincolum (Cincolum)				
Date/Place of Issuance 08/13/2022	Signature (Sign Inside the box 07/19/1251X Date Accomplished	()	Right Thumbmark		
SUBSCRIBED AND SWORN to before me this	, affiant exhibiti	ng his/her validly issued	government ID as indicated above.		
	Person Administering Oath				

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