CS Form No. 212 Revised 2017		PERSO	NAL DAT	A SH	IEET	inst,			
WARNING: Any misrepresent	ation made in the Persona	of Data Sheet and the	Work Experience Sheet s	hall cause the	filing of adm	inistrative/ci	riminal case/s ag	ainst the pers	100
concerned. READ THE ATTACHED GUIDE							Minne, Constitution		
Print legibly. Tick appropriate box	es) and use separate she	eet if necessary. Indica	te N/A if not applicable. DO N	OT ABBREVIA	TE.	1 CS ID No.		(Do not fill up. F	or CSC use only)
I. PERSONAL INFORMATI						2 3 3 3 3		Sept. (S.)	
2 SURNAME	OPON			44			NAME EXTENSION (JR.	CR)	
FIRST NAME	JON JAY						THE EXTENSION (SEC.	, sky	
MIDDLE NAME 3 DATE OF BIRTH	BOHOLST		L. A. Paris Haraco					2000	ALC 96.14
(mm/dd/yyyy)	08/30/2000		16. CITIZENSHIP		✓ Filipino ☐ Dual Citizenship ☐ by birth [☐ by naturalization	
4 PLACE OF BIRTH	PORO,CEBU		If holder of dual citizenship, please indicate the details.		Pls. indicate country:				-10-1
5. SEX	✓ Male	☐ Female	please indicate the	details.					~
6 CIVIL STATUS	Single Widowed Other/s:	☐ Married ☐ Separated	17. RESIDENTIAL ADDRESS		Block 6 xuse/Block/Lot No Holy Family			Street LUNA	
7 HEIGHT (m)	1.68				ormoc city		ev yeth.	Barangay LEYTE	
8. WEIGHT (kg)	67		ZIP CODE	-	City/Municipality		6541	Province	
	0+		18 PERMANENT ADDRESS		Block 6	54	0041	ARS	
9 BLOOD TYPE				Ho	use/Block/Lot No)		Street	
10 GSIS ID NO	N/A			S	Holy Family ubdivision/Village			LUNA Barangay	
11. PAG-IBIG ID NO	N/A				ORMOC CITY City/Municipality			LEYTE Province	
12 PHILHEALTH NO	N/A		ZIP CODE		6541				
13 SSS NO	N/A		19 TELEPHONE NO.	-					and a second second
14. TIN NO.	633-830-898-00000		20. MOBILE NO.			09	942365024		
15. AGENCY EMPLOYEE NO.	N/A		21. E-MAIL ADDRESS (if any)			jayopon	7@gmail.com		
II. FAMILY BACKGROUND)								400
22 SPOUSE'S SURNAME	N/A			23 NAME of Ch	HILDREN (Write	full name and i	st all)	DATE OF BIRT	TH (mm/dd/yyyy)
FIRST NAME			NAME EXTENSION (JR., SR)						
MIDDLE NAME					K- 6			-17	
OCCUPATION			and the management						
EMPLOYER/BUSINESS NAME								MARKE	
BUSINESS ADDRESS									
TELEPHONE NO.									7 1-2-1
24. FATHER'S SURNAME	OPON								
FIRST NAME	RIC		NAME EXTENSION (JR., SR)						The state of the s
MIDOLE NAME	GONZALES			-					
25 MOTHER'S MAIDEN NAME									
SURNAME	BOHOLST			H					
FIRST NAME	ERMELITA							C. reell	Les State
MODLE NAME	DELA CRUZ				(0	ontinue on sej	parate sheet if neces	sary)	
III. EDUCATIONAL BACKO	GROUND	THE STREET				4 15			
LEVEL .	NAME OF S (Write in		BASIC EDUCATION/DEGI (Write in full)		PERIOD OF	To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
ELEMENTARY	ORMOC ADVENTIST ELEME	NTARY SCHOOL	PRIMARY EDUCATION			03/22/2013		2013	ACADEMIC EXCELLENCE
SECONDARY	ORMOC CITY REGIONAL SP	ORTS ACADEMY	SENIOR HIGH SCHOOL		06/03/2013	04/03/2019		2019	WITH HONOR
VOCATIONAL / TRADE COURSE									
COLLEGE	VISAYAS STATE UNIVERSIT	Y	BACHELOR OF PHYSICAL ED	UCATION	06/01/2019	07/08/2024		2024	
GRADUATE STUDIES									
			Configue on apperate aheat if m	consery?					
SIGNATURE		Sp	af		DA	TE		May 27, 2025	No.

7. CAR	SERVICE ELIGIB	80 (BOARD/ BAR) UNDER		DATE OF		The State of the S		LICENSE (if a	applicable)
10 10 10 10 100	SPECIAL LAWS		RATING (If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT			NUMBER	Date of Validity
rivers Lice	ense		a regulation of the second	08/30/2018	Ormoc City	moc City			
icensure E	censure Examination for Teachers			03/23/2025		10/7			
							10 14 14 14 14 14 14 14 14 14 14 14 14 14		
	residence de la compa	estroya El ex-					tu, tel	- 2014 Hon	
	Spine 18	Ser 29	,c	ontinue on separate she	et If necessary)	2 411			
include pri		t. Start from your rece	nt work) Descript	tion of duties should	d be indicated in the attac	h ed W ork E			
	USIVE DATES nmldd/yyyy)	POSITION (Write in full/Do no			GENCY / OFFICE / COMPANY full/Do not abbreviate)	MONTHLY	SALARYI JOB PAY ORACE II SUNCHINA STEP FIRMA TO-DY NOTE MENT	STATUS OF APPOINTMENT	GOVT SERVICE (Y/N)
WA	N/A	N/A			N/A	N/A	N/A	N/A	N/A
									1014 1014
							78 CKOO		100 - 40 100 - 400 100 - 400
									1000
100		an garde	g A g a ser	207.55	64 (10 T) (10 T) Y	68) 6			
		79				**************************************			
				onlinue on separate she	et If necessary)				
			- 12			_	_		

VI. VOLUNTARY WORK OR INVOLVEMEN	T IN CIVIC / NON-GOVERNMENT /	PEOPLE / \	OLUNTARY (ORGANIZATION	VS .	
NAME & ADDRESS OF ORGANIZATION (Write in full)			SIVE DATES avddyyyy) To	NUMBER OF HOURS		POSITION / NATURE OF WORK
Philippine Red Cross Ormoc City Chapter		01/08/2018	01/07/2021	144.0	Volunteer	AND THE SECOND SECOND SECOND
			1.7			
	Land Circle			M. IEE.	Later Section	the Prince of the Asset of
	3 22-10, 373		1			
	en e		+	-	ar	Oracle Control Control Control
	SAME AND THE SAME	land base out	-			
	(Con	inue on separat	e sheet if necessar	N)		
VII. LEARNING AND DEVELOPMENT (L&C						
30 TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS		INCLUSIVE DATES OF ATTENDANCE		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY
(With in full)			n/dd/yyyy) To			(Write in full)
International Webinar "Artificial Intelligience in Phys	sical Education"	05/01/2025	05/01/2025	8.0	Developmental	Cagayan State University
Webinar: " Contemporary Issues and Trends in Hea	alth Education in the Philippines"	03/08/2025	03/08/2025	8.0	Developmental	National Association for Physical Education and Sports Science
Webinar: "Ethics and Positive Coaching Approach Periodization Training Load"	es for Long-Term Athletes Success and	03/08/2035	03/08/2025	8.0	Developmental	University of the Immaculate Conception
Water Safety and Rescue Training (WASAR)	an in I was	and the	of the section	Les per y fre	grane for	away acceptanging no cult 1
Philippine Red Cross Standard First Aid and BLS-C	PR with AED			100000000000000000000000000000000000000	Technical	Philippine Red Cross
PLDT Infoteach Outreach Program	237 1	06/18/2018	06/19/2018	50.0	Technical	PLDT
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			AT THE PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERT	314	10 1 18	engal transmission
30 3 1 1 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	alt in although an in-	ar 150 150	5 0, 45lah 3	19 19 19 19 19	104-100	L. J. D. Mark Dr. 1991 L. D. Scholler
	10 political energy de-	a amand.		ina nigna	int in equ	and the second of the second
	(Con	tinue on separat	e sheet if necessa	ny)		
VIII. OTHER INFORMATION		a .				sectation and the section of the sec
31. SPECIAL SKILLS and HOBBIES	32. NON		TINCTIONS / RECO	GNITION		33 MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
Photo Editing	12th	PICPA Acco	ounting Quiz Be	owl		Tunob sa mga Adventistang Maampingon sa Kinaiyahan (TAMAK)
Video Editing						SDA Masterguide Ormoc Chapter
Basic Troubleshooting			Same and the same of	L		
	at record and in built in Figure 4. In the				. A max	FREEZING SENT RESIDENCE STATE
		action of the con-				
					**	
			n tin Ar	- 1	2	
CIONATURE			e sheet if necessa		ATE	11
SIGNATURE	-01	nat		0.	ATE	May 27, 2026

34 Are you related by consanguinity or affinity to the appoint chief of bureau or office or to the person who has immedia						
Bureau or Department where you will be apppointed, a. within the third degree?						
 a. within the third degree? b. within the fourth degree (for Local Government Unit - C 	☐ YES ☑ NO					
D. Within the fourth degree (for Local Government Girl - G	☐ YES ☑ NO If YES, give details:					
35 a. Have you ever been found guilty of any administrative	offense?					
35 a. Have you even book found gains of any adminioration	Jileiiso i	☐ YES ☑ NO If YES, give details:				
b. Have you been criminally charged before any court?	YES V NO If YES, give details: Date Filed:					
		Status of Case/s:				
36. Have you ever been convicted of any crime or violation of any court or tribunal?	any law, decree, ordinance or regulation by	☐ YES ☑ NO If YES, give details:				
37. Have you ever been separated from the service in any of dropped from the rolls, dismissal, termination, end of term in the public or private sector?		☐ YES ☑ NO If YES, give details:				
38 a. Have you ever been a candidate in a national or local e Barangay election)?	election held within the last year (except	☐ YES ☑ NO If YES, give details:				
 b. Have you resigned from the government service during election to promote/actively campaign for a national or loc 	☐ YES ☑ NO If YES, give details:					
39. Have you acquired the status of an immigrant or permane	☐ YES ☑ NO If YES, give details (country):					
Are you a person with disability? Are you a solo parent?						
41. REFERENCES (Person not related by consanguinity or affinity to applie	cant /appointee)	If YES, please specify ID No:				
NAME	ADDRESS	TEL. NO.	4			
Sheena Eunice B. Tabudlong	Baybay City , Leyte	9209585002				
Leonida T. Tumulak	Ormoc City, Leyte	9359317590	-			
Ria Faustine M. Lagare	Valencia , Bohol	9936509885				
42 I declare under oath that I have personally accomplish complete statement pursuant to the provisions of peri Philippines I authorize the agency head/authorized repre agree that any misrepresentation made in this do administrative/criminal case/s against me.	tinent laws, rules and regulations of the esentative to verify/validate the contents state	Republic of the ed herein.	HOTO.			
Government issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance	A CONTRACTOR OF THE STATE OF TH		1 . 12 10			
Government Issued ID: Drivers License	Government Issued ID: Drivers License					
ID/License/Passport No.: H03-19-000190	ID/License/Passport No. H03-19-000190 Signature (Sign inside the b					
Date/Place of Issuance 08/30/2023 Ormoc City		Right Thumbmark				
SUBSCRIBED AND SWORN to before me this	, affiant exhibiting	g his/her validly issued government ID a				
	Person Administering Oat	n				