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 concerned. READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM Print legibly. Tick appropriate boxes 🔲) and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. (Do not fill up. For CSC use only) I. PERSONAL INFORMATION 2. SURNAME VILLAFLORES NAME EXTENSION (JR., SR) FIRST NAME SHYN LUEGE MIDDLE NAME 3. DATE OF BIRTH 9/9/1999 16. CITIZENSHIP ✓ Filipino ☐ Dual Citizenship (mm/dd/yyyy) \square by birth \square by naturalization 4. PLACE OF BIRTH MACROHON, SOUTHERN LEYTE If holder of dual citizenship, Pls. indicate country: please indicate the details. ☐ Male 5. SEX ☐ Married 17. RESIDENTIAL ADDRESS ZAMORA ST. ✓ Single 6 CIVIL STATUS House/Block/Lot No. Street ☐ Widowed Separated ZONE 1 ☐ Other/s: Subdivision/Village Barangay SOGOD SOUTHERN LEYTE 7. HEIGHT (m) 1.49 City/Municipality ZIP CODE 8. WEIGHT (kg) 45 6606 ZAMORA ST. 18. PERMANENT ADDRESS 9. BLOOD TYPE 0+ House/Block/Lot No. Street ZONE 1 10. GSIS ID NO. Subdivision/Village Barangay SOUTHERN LEYTE SOGOD 11. PAG-IBIG ID NO. 121304154079 City/Municipality Province 130255838114 12. PHILHEALTH NO. ZIP CODE 6606 13. SSS NO. 06-4429421-4 19. TELEPHONE NO. 14. TIN NO. 20. MOBILE NO. 09207515439 15. AGENCY EMPLOYEE NO. 21. E-MAIL ADDRESS (if any) shynluege@gmail.com II. FAMILY BACKGROUND 22. SPOUSE'S SURNAME 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME **BUSINESS ADDRESS** TELEPHONE NO. 24. FATHER'S SURNAME DUAG AME EXTENSION (JR., SR) FIRST NAME MELOUIE BAROLA MIDDLE NAME 25. MOTHER'S MAIDEN NAME **VILLAFLORES** SURNAME **GERALDINE** FIRST NAME MIDDLE NAME **TOLIBAS** (Continue on separate sheet if necessary)

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III. EDUCATIONAL BACKGROUND									
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGRE (Write in full)	E/COURSE	PERIOD OF ATTENDANCE		HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED		
				From	To	(ii flot graduated)		RECEIVED	
ELEMENTARY	LARAY ELEMENTARY SCHOOL						12012	VALEDICTO RIAN	
SECONDARY	SAINT JOSEPH COLLEGE	HUMANITIES AND SOCIAL SCIENCE	CE					WITH HONORS	
VOCATIONAL / TRADE COURSE									
COLLEGE	SOUTHERN LEYTE STATE UNIVERSITY TOMAS OPPUS	BACHELOR OF SECONDARY MAJOR IN ENGLIS						CUM LAUDE	
GRADUATE STUDIES									
(Continue on separate sheet if necessary)									
SIGNATURE	sloillaf			DATE September 2, 2		ptember 2, 2022			

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