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. 1. CS ID No. (Do not fill up. For CSC use only I. PERSONAL INFORMATION 2. SURNAME AGORDO NAME EXTENSION (JR., SR) FIRST NAME DYAN MIDDLE NAME 3. DATE OF BIRTH 06/27/1997 16. CITIZENSHIP Dual Citizenship Filipino (mm/dd/yyyy) by birth by naturalization 4. PLACE OF BIRTH USON, MASBATE If holder of dual citizenship, Pls. indicate country: please indicate the details. ✓ Female 5. SEX Male ✓ Single Married 17 RESIDENTIAL ADDRESS 6 CIVIL STATUS House/Block/Lot No. Street Widowed Separated MAYBOG ✓ Other/s: Subdivision/Village Barangay **BAYBAY CITY LEYTE** 7. HEIGHT (m) 1.25 City/Municipality Province 8. WEIGHT (kg) 45 **ZIP CODE** 6521 18. PERMANENT ADDRESS 9. BLOOD TYPE 0+ House/Block/Lot No Street MAYBOG 10. GSIS ID NO. N/A Barangay Subdivision/Village **BAYBAY CITY LEYTE** 11. PAG-IBIG ID NO. 1212-5348-9655 City/Municipality Province 12. PHILHEALTH NO 1202-5834-0979 ZIP CODE 6521 13. SSS NO. 06-4318924-9 19. TELEPHONE NO. N/A 14. TIN NO. 359-619-730-00000 09565357337 20. MOBILE NO. 15. AGENCY EMPLOYEE NO. N/A 21. E-MAIL ADDRESS (if any) dzaiyan12@gmail.com **FAMILY BACKGROUND** DATE OF BIRTH (mm/dd/yyyy) 22 SPOUSE'S SURNAME 23. NAME of CHILDREN (Write full name and list all) NAME EXTENSION (JR., SR) FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME **BUSINESS ADDRESS** TELEPHONE NO SILAO 24. FATHER'S SURNAME NAME EXTENSION (JR., SR) DAVID FIRST NAME SAURO MIDDLE NAME **ARTEMIA SACAY AGORDO** 25. MOTHER'S MAIDEN NAME SILAO SURNAME ARTEMIA FIRST NAME **AGORDO** (Continue on separate sheet if necessary) MIDDLE NAME **EDUCATIONAL BACKGROUND** SCHOLARSHIP

NAME OF SCHOOL LEVEL/ 26. PERIOD OF ATTENDANCE BASIC EDUCATION/DEGREE/COURSE YEAR ACADEMIC LEVEL (Write in full) GRADUATED HONORS UNITS (Write in full) From То RECEIVED ELEMENTARY CARIDAD ELEMENTARY SCHOOL **GRADUATE** 6/26/2004 5/2/2010 WITH HONOR **CARIDAD NATIONAL HIGH SCHOOL GRADUATE** ONORABLE SECONDARY 6/2/2010 7/6/2014 N/A **VISAYAS STATE UNIVERSITY** AB - ENGLISH LANGUAGE 6/7/2015 7/14/2019 CUM LAUDE COLLEGE **GRADUATE STUDIES SIGNATURE** DATE CS FORM 212 (Revised 2017), Page 1 of 4

IV. CIVIL S	SERVICE EL	IGIBILITY							
27. CAREE	R SERVICE/ RA	1080 (BOARD/ BAR) UNDER	RATING	DATE OF	011/001/555		LICENSE (if applicable)		
SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE			(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINAT	ON / CONFERMENT		NUMBER	Date of Validity
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b. within the fourth degree (for Load Government Unit - Career Employees)? VES ves No If VES give details.	If YES, give details: 35. a. Have you ever been found guilty of any administrative offense? Description: Description: If YES, give details: Description: If YES, give details: Description: If YES, give details: Date Filed:				
If YES, give details	b. Have you been criminally charged before any court? YES NO If YES, give details: Date Filed:				
If YES, give details: Date Filed: Status of Casels:	If YES, give details: Date Filed:				
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reterment, dropped from the rolls, dismissal, termination, end of term, finished contract or phased out (abolition) in the public or private sector? 38. 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 three (3)-month period before the last election to promote/actively campaign for a national or local candidate? 39. Have you acquired the status of an immigrant or permanent resident of another country? 40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), please answer the following a. Are you a member of any indigenous group? 41. REFERENCES (Penon not related by consequency or affinity to applicant Appointee) 42. I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct and complete statement pursuant to the provisions of perfinent laws, rules and regulations of the Republic of the Philippines. I authorize the agency head-furthorized representative to verify/validate the contents stated herein. 42. I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct and complete statement pursuant to the provisions of perfinent laws, rules and regulations of the Republic of the Philippines. I authorize the agency head-furthorized representative to verify/validate the contents stated herein. 42. I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct and complete statement pursuant to the provisions of perfinent laws, rules and regulations of the Republic of the Philippines. I authorize the agency head-furthorized representative to verify/validate the contents stated herein. 42. I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct and complete statement pursuant to the provisions of pe	regulation by any court or tribunal?				
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(RA 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), please answer the following a. Àre you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? 42. I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, 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. Overminent issued ID: Philihealth DiLicense/Passport SS. 253. Proc. Limits 1 Larges. Date Accomplished Date Accomplished Right Thumbmark Right Thumbmark		<u> </u>			
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SUBSCRIBED AND SWORN to before me this, affiant exhibiting his/her validly issued government ID as indicated above.	Date/Place of Issuance: AUGUST 2019 Date Accomplished Right Thumbmark				
	SUBSCRIBED AND SWORN to before me this, affiant exhibiting his/her validly issued government ID as indicated above.				
Person Administering Oath	Person Administering Oath				