CS Form No. 212

PERSONAL DATA SHEET

VARNING: 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 () on NOT ABBREVIATE. 1. CS ID No. MAZO 2. SURNAME NAME EXTENSION (JR., SR) FIRST NAME NIKKA MARIE MILLEZA MIDDLE NAME DATE OF BIRTH (mm/dd/yyyy) 16. CITIZENSHIP MARCH/29/2001 4. PLACE OF BIRTH ANTIPOLO CITY, RIZAL If holder of dual citizenship Pls. indicate country: please indicate the details. 5. SEX 17. RESIDENTIAL ADDRESS 6 CIVIL STATUS 7. HEIGHT (m) 1.58 8. WEIGHT (kg) 53 18. PERMANENT ADDRESS 9. BLOOD TYPE 0+ NA House/Block/Lot No. N/A SITIO SI-ONG GAKAT Barangay 11. PAG-IBIG ID NO. LEYTE N/A City/Municipality 13-250350089-6 12. PHILHEALTH NO. ZIP CODE 6521 13. SSS NO. 19. TELEPHONE NO. N/A 14. TIN NO. 656-275-315-00000 20. MOBILE NO. 09945448864 15. AGENCY EMPLOYEE NO. 21. E-MAIL ADDRESS (if any) nikkamariemazofficial@gmail.com II. FAMILY BACKGROU 22. SPOUSE'S SURNAME 23. NAME of CHILDREN (Write full name and list all) NAME EXTENSION (JR., SR) N/A FIRST NAME N/A N/A N/A MIDDLE NAME N/A N/A N/A OCCUPATION N/A N/A N/A EMPLOYER/BUSINESS NAME N/A N/A N/A BUSINESS ADDRESS N/A TELEPHONE NO. N/A N/A FATHER'S SURNA MAZO N/A NAME EXTENSION (JR., SR) Ν/Δ FIRST NAME PEDRO N/A N/A MIDDLE NAME HOYUMPA N/A N/A 25. MOTHER'S MAIDEN NAME N/A N/A SURNAME MILLEZA N/A N/A WILMA N/A PIAMONTE MIDDLE NAME III. EDUCATIONAL BACKO PERIOD OF ATTENDANCE LEVEL CATION/DEGREE/COURSE (Write in full) (Write in full) 1ST HONORABLE ELEMENTARY GABAS CENTRAL SCHOOL PRIMARY EDUCATION 2013 SECONDARY BAYBAY CITY SENIOR HIGH SCHOOL HUMANITIES AND SOCIAL SCIENCES 6/6/2013 7/4/2019 GRADE 12 WITH HONORS AGRICULTURAL CROP PRODUCTION NCII NCII 4/20/2024 6/16/2024 NA 2024 COMPETENT VISAYAS STATE UNIVERSITY BACHELOR OF SECONDARY EDUCATION 12/9/2019 3/8/2023 FOURTH YEAR N/A N/A N/A GRADUATE STUDIES N/A N/A N/A N/A N/A SIGNATURE DATE

CS FORM 212 (Revised 2017), Page 1 of 4

IV. CIVIL SERVICE ELIGIBILITY									
								LICENSE (if ap	plicable)
LAME/OFC/OFF PARAMONY KATIN			RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT PLACE OF EXAMINATION / CONFERMENT			IENT	NUMBER	Date of
LICENSURE EXAMINATION FOR TEACHERS			87.0	MARCH 17, 2024	TACLOBAN CITY			2199274	Validity 6/24/2024
				, ,		-			
			(C	ontinue on separate sheet if	necessary)				
V. WORK EX		Start from your recent work	k) Description of duti	ies should be indicated	d in the attached Work Expe	rience sheet.			
28. INCLU	ISIVE DATES			ENCY / OFFICE / COMPANY			OTATI IO OF	GOVT	
From	m/dd/yyyy) To	E (Write in full/Do not abbreviate) Enumerator		(Write in ful	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	(Y/ N)	
7-15-2024	8-30-2024			PSA Ta	8000.00	N/A	JOB ORDER	Υ	
			(C)	ontinue on separate sheet if	necessary)				
SIGNATURE			(0)		DATE				

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S								
29.	NAME & ADDRESS OF ORGANIZATION full)	(mm/dd/yyyy) From To		NUMBER OF HOURS	POSITION / NATURE OF WORK			
VIII	LEARNING AND DEVELOPMENT (LED) INTE		ntinue on separate s	heet if necessary)				
30.	VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAM. 30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)			d/yyyy)	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	:ONDUCTED/ SPONSORED BY (Write in full)	
	BASIC RESERVE OFFICER TRA	INING CORPS	2019	To 2020	1 year	TECHNICAL	VISAYAS STATE UNIVERSITY ROTC UNIT	
					1200 HRS/50			
	CADET OFFICER QUALIFYING CO		2019	2020	Days 336 HRS/2	TECHNICAL	VISAYAS STATE UNIVERSITY ROTC UNIT	
	ROTC SUMMER CAMP TRAIN		2020	2020	Weeks	TECHNICAL	8TH REGIONAL COMMUNITY DEFENSE GROUP	
	ADVANCE RESERVE OFFICER TR		2019	2022	3 years 336 HRS/2	SUPERVISORY	VISAYAS STATE UNIVERSITY ROTC UNIT	
	PHILIPPINE ARMY ADVANCE ROTC ACADEMIC		2021	2021	Weeks 1080 HRS/45	TECHNICAL	8TH REGIONAL COMMUNITY DEFENSE GROUP	
	AGRICULTURAL CROP PRODU		7-29-2024	2024	Days	TECHNICAL	CHANDRIA INTEGRATED FARM	
ADVANCE COMPUTER LITERACY				8-16-2024	120 HRS	TECHNICAL	INFINITECH TRAINING CENTER	
	ADMINISTRATIVE SKILLS TRAINING WITH	I COMPREHENSIVE ICT	8-19-2024	8-30-2024	80 HRS	TECHNICAL	INFINITECH TRAINING CENTER	
		(Co.	ntinue on separate s	heet if necessary)				
VIII.	OTHER INFORMATION							
31.	. SPECIAL SKILLS and HOBBIES	32. I-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)					33. SOCIATION/ORGANIZATION (Write in full)	
	DANCING	Certificate of Merit - HONOR AWARD					VSU- ROTCU TRAINING STAFF	
READING Certificate			of Merit - AWARD OF LOYALTY MEDAL					
	(Continue on separate sheet if necessary)							
	SIGNATURE	,,,,,			D	ATE		

34.	Are you related by consanguinity or affinity to the appointing or re chief of bureau or office or to the person who has immediate super Bureau or Department where you will be apppointed,							
	a. within the third degree?							
	b. within the fourth degree (for Local Government Unit - Career En	If YES, give details:						
35.	a. Have you ever been found guilty of any administrative offense?	If YES, give details:						
	b. Have you been criminally charged before any court?	Date Filed:						
36.	Have you ever been convicted of any crime or violation of any law or tribunal?							
37.	Have you ever been separated from the service in any of the follo from the rolls, dismissal, termination, end of term, finished contract private sector?	If YES, give details:						
38.	a. Have you ever been a candidate in a national or local election I election)?	If YES, give details:						
	b. Have you resigned from the government service during the thre promote/actively campaign for a national or local candidate?	If YES, give details:						
39.	Have you acquired the status of an immigrant or permanent resident	If YES, give details (country):						
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Ca Solo Parents Welfare Act of 2000 (RA 8972), please answer the fo							
а	Are you a member of any indigenous group?	If YES, please specify:						
b	Are you a person with disability?	If YES, please specify ID N	lo:					
c.	Are you a solo parent?	If YES, please specify ID N	lo:					
41.	REFERENCES (Person not related by consanguinity or affinity to applicant /appoi	ntee)						
	NAME	ADDRESS	TEL. NO.					
	Noel V. Moscatiles	Baybay City, Leyte	9700683389					
	Glenda Arradaza	Baybay City, Leyte	9977735600	Va all				
	Novelyn Mendoza	Baybay City, Leyte	9557538168					
42.	I declare under oath that I have personally accomplished this Personally	_I sonal Data Sheet which is a true, correct and co	I omplete statement					
	РНОТО							
	Sovernment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance							
G	sovernment Issued ID: PRC							
ID/License/Passport No.: 2199274 Signature (Sign inside the			x)					
Di	late/Place of Issuance: 6/24/2024,ROBINSONS ORMOC CITY		Right Thumbmark					
SUBSCRIBED AND SWORN to before me this , affiant ex			his/her validly issued governme	ent ID as indicated above.				
		Person Administering Oath						