CS Form No. 212 Revised 2017	PERSOI	NAL DAT	A SH	IEE	Γ			
WARNING: Any misrepresenta	ntion made in the Personal Data Sheet and the	e Work Experience Sheet sl	hall cause the	filing of ad	ministrative	e/criminal case/s	against the p	erson
concerned. READ THE ATTACHED GUIDE	TO FILLING OUT THE PERSONAL DATA SH	EET (PDS) BEFORE ACCO	MPLISHING TH	HE PDS FOR	RM.			
	and use separate sheet if necessary. Indicate	N/A if not applicable. DO NOT	ABBREVIATE.		1. CS ID No.		(Do not fill up. F	or CSC use only
I. PERSONAL INFORMATIO 2. SURNAME	VILLALUZ							
	-					NAME EXTENSION (JR	R., SR)	
FIRST NAME	SHELLAMIE					·		
MIDDLE NAME 3. DATE OF BIRTH	GARJAS			1				
(mm/dd/yyyy)	09/14/2001	16. CITIZENSHIP	✓ Filipino ☐ Dual Citizenship ☐ by birth ☐ by naturalization				ization	
4. PLACE OF BIRTH	ORMOC CITY	If holder of dual citizer	nship,			Pls. indicate of	country:	
5. SEX	☐ Male ✓ Female	please indicate the de	etails.					•
6 CIVIL STATUS	✓ Single	17. RESIDENTIAL ADDRESS	SITIO GREENFIELD House/Block/Lot No. Subdivision/Village		Street SAN ISIDRO			
7. HEIGHT (m)	1.54		(ORMOC CITY		Barangay LEYTE		
8. WEIGHT (kg)	50	ZIP CODE	Ci	ty/Municipality	y/Municipality 654		Province 6541	
9. BLOOD TYPE	A	18. PERMANENT ADDRESS	SITI	IO GREENFIELD				
10. GSIS ID NO.	N/A		House/Block/Lot No.			Street SAN ISIDRO		
		-	Sul	bdivision/Village ORMOC CITY		Barangay LEYTE		
11. PAG-IBIG ID NO.	N/A		C	ity/Municipality			Province	
12. PHILHEALTH NO.	N/A ZIP CODE		6541					
13. SSS NO.	N/A	19. TELEPHONE NO.	N/A					
14. TIN NO.	N/A	20. MOBILE NO.	09300239038					
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)		<u>vill</u>	aluzshell	amie@gmail.	.com	
II. FAMILY BACKGROUND								
22. SPOUSE'S SURNAME		NAME EXTENSION (JR., SR)	23. NAME of CH	ILDREN (Write	e full name and	l list all)	DATE OF BIR	TH (mm/dd/yyyy)
FIRST NAME		NAME EXTENSION (J.C., SIV)						
MIDDLE NAME								
OCCUPATION								
EMPLOYER/BUSINESS NAME								
BUSINESS ADDRESS								
TELEPHONE NO.								
24. FATHER'S SURNAME	VILLALUZ	SR.						
FIRST NAME	SAMUEL							
MIDDLE NAME	LAGUNA							
25. MOTHER'S MAIDEN NAME	CARIAG							
SURNAME	GARJAS							
FIRST NAME	DELIA EMPIMO		(Continue on separate sheet if necessary)					
MIDDLE NAME III. EDUCATIONAL BACKG				(CC	onunue on se _l	parate sheet ii neces	ssary)	
26.				DEDIOD OF	ATTENDANCE	HIGHEST LEVEL/		SCHOLARSHIP/
LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGRE (Write in full)	EE/COURSE	PERIOD OF ATTENDANCE From To		UNITS EARNED (if not graduated)	YEAR GRADUATED	ACADEMIC HONORS RECEIVED
ELEMENTARY	LINAO CENTRAL SCHOOL	ELEMENTARY		2009	2014	GRADUATED	2014	FIFTH HONORABLE MENTION
SECONDARY	LINAO NATIONAL HIGH SCHOOL	HIGH SCHOOL		2014	2018	COMPLETED	2018	WITH HONORS
SENIOR HIGH	LINAO NATIONAL HIGH SCHOOL	ACCOUNTANCY, BUSING MANAGEMENT		2018	2020	GRADUATED	2020	WITH HIGH HONORS
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN BIOLOGY		2020	2024	GRADUATED	2024	
GRADUATE STUDIES								
	Harrison (C	Continue on separate sheet if nece	essary)					
SIGNATURE	4			DA	\TE	Al	JGUST 13, 2024	

IV. CIVIL SERVICE ELIGIBILITY									
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER RATING SPECIAL LAWS/ CES/ CSEE (#Analicable)			DATE OF EXAMINATION /	TION / CONFER	RMENT	LICENSE (if applicable)			
ВА	SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE		(If Applicable)	CONFERMENT	TION OON E	(WLIVI	NUMBER	Date of Validity	
L WORK			(Cor	l ntinue on separate sheet	if necessary)				
	EXPERIENCE vate employme	ent. Start from your recer	nt work) Descriptio	on of duties should	be indicated in the attach	ned Work Ex	perience she	et.	
28. INCLU	USIVE DATES				ENCY / OFFICE / COMPANY	MONTHLY	SALARY/ JOB/ PAY GRADE (if	STATUS OF	GOV'T
From	nm/dd/yyyy) To	POSITION TITLE (Write in full/Do not abbreviate)		(Write in ful	SALARY	applicable)& STEP (Format "00-0")/ INCREMENT	APPOINTMENT	SERVICE (Y/ N)	
SIGN	(Continue on separate sheet if necessary) SIGNATURE DATE AUGUST 13, 2024								

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S							
29. NAME & ADDRESS OF OR	WOLLOW F DATES						
(Write in full)		(mm/d From	d/yyyy) To	NUMBER OF HOURS	POSITION / NATURE OF WORK		
PEER FACILITATOR - LINAO NATIONAL HIGH SCHOOL	DL	10/12/2018	03/12/2019		PRESIDENT		
SUPREME STUDENT GOVERNMENT - LINAO NATIONAL HIGH SCHOOL			02/18/2020		PRESIDENT		
THE SEA BREEZE - LINAO NATIONAL HIGH SCHOOL			03/04/2020		WRITER/ EDITOR	R-IN-CHIEF	
		06/17/2019					
VII. LEARNING AND DEVELOPMENT (L&D)		tinue on separate s ROGRAMS A)			
30. TITLE OF LEARNING AND DEVELOPMENT INTE (Write in full)	RVENTIONS/TRAINING PROGRAMS	ATTEN (mm/d		NUMBER OF HOURS	Type of LD (Managerial/ CONDUCTED/ SPONSORED BY Supervisory/ (Write in full) Technical(etc)		
PREVENTION OF WILDLIFE TRAFFICKING		From 10/12/2022	To 10/12/2022	3.0	TECHNICAL	FIATA: TRAAFFIC INTERNATIONAL	
MOLECULAR EVOLUTIONARY ANALYSIS OF INDIGENOUS ANIMA		04/09/2023	04/09/2023	2.0	TECHNICAL	VISAYAS STATE UNIVERSITY - COLLEGE OF	
SUSTAINABLE AGRICULTURE IN SOUTHEAST ASIA AND ITS UTILL GENDER SENSITIVITY AND ANTI-SEXUAL HARASSMENT SI	ZATION: CHICKEN, PIGS, AND WILD ANIMALS	06/26/2023	06/26/2023		MANAGERIAL	AGRICULTURE AND FOOD SCIENCE VISAYAS STATE UNIVERSITY - COLLEGE OF ARTS AND	
		00/20/2020	00/20/2020	0.0	MANAGENIAE	SCIENCES	
	(Cont	tinue on separate :	sheet if necessary				
VIII. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full) NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full) 33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)						
WRITING	ORGANIZATION OF BIOLOGY STUDENTS - VISAYAS STATE UNIVERSITY						
TRAVELLING	KABATAAN KONTRA DROGA AT TERORISMO						
	(Cont	tinue on separate :	sheet if necessary,				
SIGNATURE	1			Di	ATE	AUGUST 13, 2024 CS FORM 212 (Revised 2017), Page 3 of 4	

CS FORM 212 (Revised 2017), Page 3 of 4

34. 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?	YES NO					
b. within the fourth degree (for Local Government Unit - Cal	YES VNO					
5. Walling the location degree (for 2000) Government of the	If YES, give details:					
35. a. Have you ever been found guilty of any administrative of	fense?	☐ YES ☑ 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?	ny law, acoree, oranianee or regulation	☐ YES ☑ NO If YES, give details:				
		ii i Eo, give details.				
37. Have you ever been separated from the service in any of th	e following modes: resignation.	YES NO				
retirement, dropped from the rolls, dismissal, termination, en		If YES, give details:				
out (abolition) in the public or private sector?						
38. a. Have you ever been a candidate in a national or local ele Barangay election)?	ection held within the last year (except	☐ YES ✓ NO				
		If YES, give details:				
 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						
39. That o you adquired the status of all limingrant of politicals.	crostatine or another country.	☐ YES ☑ NO If YES, give details (country):				
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma						
7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972)						
a. Are you a member of any indigenous group?	☐ YES ☑ NO If YES, please specify:					
b. Are you a person with disability?						
		If YES, please specify ID No:				
c. Are you a solo parent?	☐ YES ☑ NO If YES, please specify ID No:					
44 DEFENDENCE (Proposed training the control of the						
41. REFERENCES (Person not related by consanguinity or affinity to applicant	T	TELNO				
NAME	ADDRESS	TEL. NO.				
MARIMEL V. SENEFROTA	BRGY. MABINI, ORMOC CITY					
QUENNIE CERIALES	BRGY. MILAGRO, ORMOC CITY					
EUNICE KENEE L. SERINO	BAYBAY CITY					
42. I declare under oath that I have personally accomplished	I I this Personal Data Sheet which is a tr	rue, 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.	anone and no attachments chair cast					
0						
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance	Marina					
Government Issued ID:						
ID/License/Passport No.:	ox)					
Date/Place of Issuance:						
	Right Thumbmark					
SUBSCRIBED AND SWORN to before me this, affiant exhibiting his/her validly issued government ID as indicated above.						
I – –	th					