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 (Do not fill up. For CSC use only 1. CS ID No Print legibly. Tick appropriate boxes 🔲) and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE, I. PERSONAL INFORMATION **NAPOLES** 2. SURNAME NAME EXTENSION (JR., SR) FIRST NAME HEIDI LYNN MIDDLE NAME PUERIN DATE OF BIRTH 12/17/1998 16. CITIZENSHIP ■ Dual Citizenship (mm/dd/yyyy) ✓ Filipino by birth by naturalization 4. PLACE OF BIRTH BAYBAY, LEYTE Pls. indicate country: If holder of dual citizenship. please indicate the details 5. SEX Male ✓ Female W ✓ Single Married 17. RESIDENTIAL ADDRESS PUROK 2 6 CIVIL STATUS ☐ Widowed ☐ Separated House/Block/Lot No Street GABAS Other/s: Subdivision/Village Barangay BAYBAY CITY LEYTE 7. HEIGHT (m) 1.57 City/Municipality Provino 8. WEIGHT (kg) 62 ZIP CODE 6521 18. PERMANENT ADDRESS PUROK 2 9. BLOOD TYPE 0 House/Block/Lot No. Street GABAS 10. GSIS ID NO. N/A Subdivision/Village Barangay BAYBAY CITY LEYTE 11. PAG-IBIG ID NO. City/Municipality Province 13-025590867-8 12. PHILHEALTH NO ZIP CODE 6521 13. SSS NO. 35-1720235-6 19. TELEPHONE NO N/A 14. TIN NO. 607-925-941 20. MOBILE NO. 09677010998 15. AGENCY EMPLOYEE NO N/A 21. E-MAIL ADDRESS (if any) heidilynnnapoles@gmail.com II. FAMILY BACKGROUND 22. SPOUSE'S SURNAME N/A 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) N/A N/A FIRST NAME N/A MIDDLE NAME N/A OCCUPATION N/A EMPLOYER/BUSINESS NAME N/A **BUSINESS ADDRESS** N/A TELEPHONE NO. 24. FATHER'S SURNAME **NAPOLES** NAME EXTENSION (JR., SR) HENRY FIRST NAME MARQUEZ MIDDLE NAME 25 MOTHER'S MAIDEN NAME **PUERIN** SURNAME LYDIA FIRST NAME **TAGUD** (Continue on separate sheet if necessary) MIDDLE NAME EDUCATIONAL BACKGROUND SCHOLARSHIP HIGHEST LEVEL 26 PERIOD OF ATTENDANCE BASIC EDUCATION/DEGREE/COURSE NAME OF SCHOOL ACADEMIC LEVEL GRADUATED (Write in full) (Write in full) HONORS (if not graduated) RECEIVED From To SALUTATO GABAS CENTRAL SCHOOL PRIMARY EDUCATION ELEMENTARY 2005 2011 N/A 2011 RIAN WITH VISAYAS STATE UNIVERSITY LABORATORY HIGH SECONDARY HIGH SCHOOL 2011 2015 N/A 2015 SCHOOL HONORS N/A N/A N/A N/A N/A N/A N/A TRADE COURSE COLLEGE **VISAYAS STATE UNIVERSITY-MAIN CAMPUS** BACHELOR OF SCIENCE IN BIOTECHNOLOGY 2021 N/A 2015 2021 N/A **GRADUATE STUDIES** N/A N/A N/A N/Δ N/A N/A N/A (Continue on separate sheet if necessary) 03/03/2024 SIGNATURE DATE

V. CIVIL SE	RVICE ELIGI	BILITY		A STATE OF THE STATE OF					
7. CAREE	R SERVICE/ RA 10	80 (BOARD/ BAR) UNDER	RATING	DATE OF				LICENSE (if a	pplicable)
SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE (If Applicable)				CONFERMENT	EXAMINATION / PLACE OF EXAMINATION / CONFERMENT			NUMBER	Date of Validity
CAREER SERVICE PROFESSIONAL 88.71			06/19/2022	NEW ORMOC CITY NA ORM	N/A	N/A			
NON-PROFESSIONAL DRIVER'S LICENSE N/A			N/A	01/17/2024	LAND TRANSPORTATION OFFICE-BAYBAY DISTRIC			H12-24-000300	12/17/2028
		A CONTRACTOR OF THE CONTRACTOR	(Cor	ntinue on separate shee	t if necessary)		y - Maji Khili ke-		
	XPERIENCE ate employmen	t. Start from your recen	t work) Descriptio	n of duties should	be indicated in the attach	ned Work Ext	erience shee	t.	
	SIVE DATES m/dd/yyyy)	POSITION TI (Write in full/Do not a			SENCY / OFFICE / COMPANY	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOVT SERVICE (Y/N)
7/3/2022	05/30/2022	PART-TIME INST	RUCTOR		TE STATE UNIVERSITY-	170.00 PER HOUR	N/A	CONTRACT OF SERVICE	NO
06/13/2022	07/29/2022	PART-TIME INST	RUCTOR	SOUTHERN LEY	170.00 PER HOUR	N/A	CONTRACT OF SERVICE	NO	
8/8/2022	12/16/2022	PART-TIME INST	RUCTOR	BONTOC CAMPUS SOUTHERN LEYTE STATE UNIVERSITY- BONTOC CAMPUS		170.00 PER HOUR	N/A	CONTRACT OF SERVICE	NO
01/16/2023	05/19/2023	PART-TIME INST	RUCTOR	SOUTHERN LEY BONT	270.00 PER HOUR	N/A	CONTRACT OF SERVICE	NO	
06/13/2023	07/21/2023	PART-TIME INST	RUCTOR	SOUTHERN LEY BONT	270.00 PER HOUR	N/A	CONTRACT OF SERVICE	NO	
08/14/2023	12/16/2023	PART-TIME INST	RUCTOR		TE STATE UNIVERSITY- TOC CAMPUS	270.00 PER HOUR	N/A	CONTRACT OF SERVICE	NO
. A. 18									
									S.
						-			
				Mayo on any	t If nonnegeral				
SIGNA	TURE		74	ntinue on separate shee	DATE	T	03/03	12029	
			-/-					FORM 212 (Revised 20)17), Page 2 of 4

VI. VOLUNTARY WORK OR INVOLVEMENT	IN CIVIC / NON-GOVERNMENT /	PEOPLE / VO	DLUNTARY O	RGANIZATION	l/S	
29. NAME & ADDRESS OF C (Write in ful			/E DATES	NUMBER OF HOURS		POSITION / NATURE OF WORK
PHILIPPINE RED CROSS-SOUTHERN LEYTE CHAPTER, ABGAO, MAASIN CITY			11/15/2023	3.0		BLOOD DONOR
VII. LEARNING AND DEVELOPMENT (L&D)		linue on separate :)		
		INCLUSIVE	DATES OF		Type of LD	
30. TITLE OF LEARNING AND DEVELOPMENT INT (Write in ful		(mm/d	DANCE d/yyyy)	NUMBER OF HOURS	(Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
		From	То	Add to select	1, 15400	DEVELOPMENT ACADEMY OF THE PHILIPPINES UNDER
GETTING GROUNDED ON	ANALYTICS	03/31/2021	03/31/2021	3.0	TECHNICAL	PROJECT SMARTER PHILIPPINES THROUGH DATA ANALYTICS, R&D, TRAINING AND ADOPTION
BEST PRACTICES IN WRITING AND PUBLISH GOING BEYOND THE FUNDAMENTALS OF JOURNA		04/16/2021	04/16/2022	3.0	TECHNICAL	ELSEVIER PUBLISHING AND DEPARTMENT OF SCIENCE AND TECHNOLOGY
RESEARCH	AL PUBLISHING-REPRODUCIBILITY IN	2/6/2021	2/6/2021	3.0	TECHNICAL	ELSEVIER PUBLISHING SOUTHERN LEYTE STATE UNIVERSITY-BONTOC
INSTRUCTORS CAPABILITY BUILDING THRO	UGH THE USE OF MOODLE LMS	6/9/2022	7/9/2022	8.0	TECHNICAL	CAMPUS
	100				_	
	7					
				2		
****				A 11 1 1		
	7.7					
	N. A. C.					
	(Cont	inue on separate s	heet if necessary)			
VIII. OTHER INFORMATION	NON	ACADEMIC DISTIN	CTIONS / RECOGN	NITION		MEMBERSHIP IN ASSOCIATION/ORGANIZATION
31. SPECIAL SKILLS and HOBBIES	32.		in full)	ATTION		33. (Write in full)
RESEARCH WRITING						N/A
COMPUTER SKILLS						
PROBLEM-SOLVING						
ORAL AND WRITTEN COMMUNICATION						
RECORDKEEPING AND ORGANIZATION						
DATA VISUALIZATION AND ANALYSIS					_	
	Cont	nue on separate s	heat if naces sand			
SIGNATURE	7	1		DA	TE	03/03/2024
						CS FORM 212 (Revised 2017), Page 3 of 4

 Are you related by consanguinity or affinity to the appointing 	g or recommending authority, or to the		aliani kindun dalambi dan makan makan da		
chief of bureau or office or to the person who has immediate	e supervision over you in the Office,				
Bureau or Department where you will be apppointed,					
a. within the third degree?	YES N				
b. within the fourth degree (for Local Government Unit - Car	reer Employees)?	YES IN	0		
		If YES, give details:			
5. a. Have you ever been found guilty of any administrative of	fense?	☐ YES ☑ N	0		
		If YES, give details:			
b. Have you been criminally charged before any court?		☐ YES ☑	NO		
b. Have you been criminally charged before any court	If YES, give details:				
[생활] 나는 사람은 생활 경기 다른	Date Filed:				
		Status of Case/s:			
6. Have you ever been convicted of any crime or violation of a any court or tribunal?	any law, decree, ordinance or regulation by	☐ YES ☑ NO			
any count of unburial:		If YES, give details:			
7. Have you ever been separated from the service in any of the			NO		
dropped from the rolls, dismissal, termination, end of term, the public or private sector?	finished contract or phased out (abolition) in	If YES, give details:			
38. a. Have you ever been a candidate in a national or local elements. Barangay election)?	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	If YES, give details:				
election to promote/actively campaign for a national or loca 39. Have you acquired the status of an immigrant or permaner	election to promote/actively campaign for a national or local candidate?				
ge Trave you acquired the status of an infinity and of permaner	☐ YES ☑ NO If YES, give details (country):				
40 Duran ant to (a) in diagrams December Act (DA 0074), (b) M	Ot- (Dit-I I D (DA 7077)				
 Pursuant to: (a) Indigenous People's Act (RA 8371); (b) M and (c) Solo Parents Welfare Act of 2000 (RA 8972), pleas 					
Are you a member of any indigenous group?		☐ YES [✓ NO		
		If YES, please specify:			
Are you a person with disability?	Are you a person with disability?				
Are you a solo parent?	If YES, please specify ID No: ☐ YES ☑ NO				
		If YES, please specify ID N	0:		
41. REFERENCES (Person not related by consanguinity or affinity to applic	ant /appointee)				
NAME	ADDRESS ADDRESS	TEL. NO.			
ALIEZA O. DEL SOCORRO	SAN RAMON, BONTOC, SOUTHERN LEYTE	09770136743			
JIMMY E. SALAMIDA	SAN RAMON, BONTOC, SOUTHERN LEYTE	09295122968			
LOURD FRANZ M. GABUNADA	BAYBAY CITY, LEYTE	09273333897			
42. I declare under oath that I have personally accomplish complete statement pursuant to the provisions of per Philippines. I authorize the agency head/authorized repre- agree that any misrepresentation made in this do administrative/criminal case/s against me.	rtinent laws, rules and regulations of the esentative to verify/validate the contents sta	Republic of the ted herein.	HEIDI LYNN P. NAPOLES		
Government Issued ID (i.e Passport, GSIS, SSS, PRC, Driver's License, etc.)					
PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: DIGITAL NATIONAL ID	My				
ID/License/Passport No.: 5831-5472-8175-0964	box)				
Date/Place of Issuance: 04/28/2023	9	Right Thumbmark			
SURSCRIPED AND SWORM to before the	-10-	N. M	112		
SUBSCRIBED AND SWORN to before me this	, attant exh	ioiting his/her validly issued go	vernment ID as indicated above.		
	Person Administering O	ath			