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 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 IMPROSO 2. SURNAME FIRST NAME SHEILAS MIDDLE NAME MANCIA 3. DATE OF BIRTH 16. CITIZENSHIP ☑ Filipino ☐ Dual Citizenship (mm/dd/yyyy) ☐by birth ☐by naturalization 4. PLACE OF BIRTH BUNAWAN, AGUSAN DEL SUR If holder of dual citizenship. Pls. indicate country: please indicate the details. 5. SEX ☐ Male • ☑ Single ☐ Married 17. RESIDENTIAL ADDRESS CAMATCHILI STREET 6 CIVIL STATUS House/Block/Lot No. Street ☐ Widowed \square Separated POBLACION ☐ Other/s: Subdivision/Village Barangay BAYUGAN CITY AGUSAN DEL SUR 7. HEIGHT (m) 1.60 City/Municipality Province 47 8. WEIGHT (kg) ZIP CODE 8502 CAMATCHILI STREET 18. PERMANENT ADDRESS 9. BLOOD TYPE B+ House/Block/Lot No Street POBLACION 10. GSIS ID NO. N/A Subdivision/Village Barangay AGUSAN DEL SUR BAYUGAN CITY 11. PAG-IBIG ID NO N/A City/Municipality Province 12. PHILHEALTH NO. N/A ZIP CODE 8502 13. SSS NO. N/A 19. TELEPHONE NO. N/A 14. TIN NO. N/A 09462133011 20. MOBILE NO. 15. AGENCY EMPLOYEE NO. N/A 21. E-MAIL ADDRESS (if any) sheilasimproso23@gmail.com II. FAMILY BACKGROUND 23. NAME of CHILDREN (Write full name and list all) 22. SPOUSE'S SURNAME DATE OF BIRTH (mm/dd/yyyy) N/A FIRST NAME N/A MIDDLE NAME N/A OCCUPATION N/A EMPLOYER/BUSINESS NAME N/A **BUSINESS ADDRESS** TELEPHONE NO. N/A **IMPROSO** 24. FATHER'S SURNAME NAME EXTENSION (JR., SR) FIRST NAME AMADOR **ANSANO** MIDDLE NAME 25. MOTHER'S MAIDEN NAME SURNAME MANCIA **RAQUEL** FIRST NAME MIDDLE NAME VILLAVER (Continue on separate sheet if necessary) EDUCATIONAL BACKGROUND SCHOLARSHIP HIGHEST LEVEL/ PERIOD OF ATTENDANCE 26. NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE YEAR ACADEMIC I FVFI UNITS EARNED (Write in full) GRADUATED (Write in full) (if not graduated) То RECEIVED From ELEMENTARY EAST BUNAWAN CENTRAL ELEMENTARY SCHOOL ELEMENTARY 2014 2014 5th Honors 2008 With High JUNIOR HIGH SCHOOL SENIOR HIGH SCHOOL 2018 **BAYUGAN NATIONAL COMPREHENSIVE HIGH** 2014 2018 SECONDARY Honors SCHOOL 2018 2020 2020 VOCATIONAL / N/A N/A N/A N/A TRADE COURSE BS AGRICULTURAL AND BIOSYSTEMS CARAGA STATE UNIVERSITY-MAIN CAMPUS 2024 **CUM LAUDE** COLLEGE 2020 2024 **ENGINEERING** GRADUATE STUDIES N/A N/A N/A N/A DATE SIGNATURE January 1, 2025 EMPROSO

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Title Clade private employment. Start from your recont work) Description of duties should be indicated in the attached Work Experience's freeze. POLISING TUTE				(Cor	ntinue on separate sheet	if necessary)				
POSITION TO POSITION T				t work) Description	of duties should h	e indicated in the attache	d Work Eyne	arianca shaat		
Continue on agentate should be recessary	28. INCLU	JSIVE DATES						SALARY/ JOB/ PAY		GOV'T
Colitions on assertate threat of necessary)		(Write in full/Do not abbrev					applicable)& STEP (Format "00-0")/		SERVICE	
	FIOIII	10						INCREMENT		
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VI. VOL	UNTARY WORK OR INVOLVEMENT	IN CIVIC / NON-GOVERNMENT			RGANIZATIOI	N/S	
29. NAME & ADDRESS OF O (Write in ful				INCLUSIVE DATES (mm/dd/yyyy) From To		POSITION / NATURE OF WORK	
			FIOIII	10			
VII. LEA	ARNING AND DEVELOPMENT (L&D)		ntinue on separate ROGRAMS AT		()		
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PI		ERVENTIONS/TRAINING PROGRAMS	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		Type of LD (Managerial/Supervisory/	CONDUCTED/ SPONSORED BY (Write in full)	
	(11110-11110-111	,	From	То	_	Technical/etc)	(Wile II ldii)
		(Cor	ntinue on separate	sheet if necessary	<i>)</i>		
VIII. OT	HER INFORMATION						
31.	SPECIAL SKILLS and HOBBIES	32. NON	N-ACADEMIC DISTII (Writ	NCTIONS / RECOG e in full)	GNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
		(Cor	ntinue on separate	sheet if necessar.	()		
	SIGNATURE	(00)	ao on ocparate	occ.n noocoodly		Δ <i>TF</i>	I

34. Are you related by consanguinity or affinity to the appoir chief of bureau or office or to the person who has immed Bureau or Department where you will be apppointed,					
a. within the third degree?		☐ YES ☑ NO			
b. within the fourth degree (for Local Government Unit -	Career Employees)?	☐ YES ☑ NO			
	If YES, give details:				
35. a. Have you ever been found guilty of any administrative	e offense?	☐ 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 any law, decree, ordinance or regulation	☐ YES ☑ NO			
by any court or tribunal?		If YES, give details:			
37. Have you ever been separated from the service in any of		☐ YES ☑ NO			
retirement, dropped from the rolls, dismissal, termination	n, end of term, finished contract or phased	If YES, give details:			
out (abolition) in the public or private sector?	alastian hald with the last				
38. a. Have you ever been a candidate in a national or local Barangay election)?	election held within the last year (except	☐ YES ☑ NO			
,		If YES, give details:			
	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 le		If YES, give details:			
39. Have you acquired the status of an immigrant or perman	nent resident of another country?	☐ YES ☑ NO			
		If YES, give details (country):			
 Pursuant to: (a) Indigenous People's Act (RA 8371); (b) 7277); and (c) Solo Parents Welfare Act of 2000 (RA 89) 					
Are you a member of any indigenous group? a. Are you a member of any indigenous group?	72), please answer the following items.				
7 to you a momber of any marganous group:		☐ YES ☑ NO If YES, please specify:			
b. Are you a person with disability?	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:			
		II TEO, picase specify in No.			
41. REFERENCES (Person not related by consanguinity or affinity to app	olicant /appointee)				
NAME	ADDRESS	TEL. NO.			
42. I declare under oath that I have personally accomplis					
complete statement pursuant to the provisions of pe					
Philippines. I authorize the agency head/authorized in agree that any misrepresentation made in this					
administrative/criminal case/s against me.	document and its attachments shall caus				
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance	1				
	SHEIL AS M. JIM				
	OHEILING MINISTER	12020			
ID/License/Passport No.: p7681270C	oox)				
Date/Place of Issuance: Aug 9, 2024 DFA Butuan City	Right Thumbmark				
	Date Accomplished				
	Date Accomplished				
SUBSCRIBED AND SWORN to before me this		ting his/her validly issued government ID as indicated above.			
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