CS Form No. 212 Revised 2017					100			
-6-00		NAL DAT						
WARNING: Any misrepresentati	ion made in the Personal Data Sheet and the V	Work Experience Sheet shall	cause the filin	g of adminis	strative/crim	inal case/s agains	st the person	concerned.
	TO FILLING OUT THE PERSONAL DATA SHELL (and use separate sheet if necessary. Indicate No.			PDS FORM.	1 CS ID No		(Do not fill on 1	or CSC use only)
I. PERSONAL INFORMATION		The second of the			310 110		(coo not nill up.)	or Cac use only)
2 SURNAME	ZARCO							
FIRST NAME	JELLY JR.							
MIDDLE NAME	CAMPOS							
3 DATE OF BIRTH (mm/dd/yyyy)	07/05/1999	16. CITIZENSHIP	☑ Filipino ☐ Dual Cittzenship)		
4. PLACE OF BIRTH	BUTUAN CITY, AGUSAN DEL NORTE	If holder of dual citizenship,		hy hirth			by naturalization	
5 SEX	Male Female	please indicate the details.		Pls. indicate c			Journaly.	
		17. RESIDENTIAL ADDRESS	218			Alle		
6 CIVIL STATUS	✓ Single	II. RESIDENTIAL ADDRESS	Ho	ous/block/lot no.		R.V. FULACHE STREET Street		
	Other/s:		Sut	odivision/Village	9		CENTRAL Barangay	
7. REIGHT (iii)	152			HILONGOS			LEYTE	
8. WEIGHT (kg)	48	ZIP CODE		цулминстранцу		6524	Province	
9. BLOOD TYPE	0	18. PERMANENT ADDRESS		218	V 1 3 1 3	R.V. FULACHE STREE		ET
10. GSIS ID NO.	N/A	1	Hou	se/Diock/Lot N	D.		Street CENTRAL	
11. PAG-IBIG ID NO.	N/A			bdivisio/Village ILONGOS			Barangav LEYTE	
12. PHILHEALTH NO.	18-250042606-4	ZIP CODE	Ci	City/Municipality 6524			Province	
13. SSS NO.	N/A	19. TELEPHONE NO.		0535679373				
14. TIN NO.	N/A	20. MOBILE NO.		09483933312				
15. AGENCY EMPLOYEE NO.	N/A	Z1. E-MAIL ADDRESS (if any)		jelly.zarco@gmail.com				
II. FAMILY BACKGROUND	·							
22. SPOUSE'S SURNAME	N/A	NAME EXTENSION (JR., SR)	23. NAME of CHI	3. NAME of CHILDREN (Write full name and list all) DATE OF BI			DATE OF BIR	TH (mm/dd/yyyy)
FIRST NAME	N/A	Total Bright (Br., 5rt)	N/A			N/A		
MIDDLE NAME	N/A							
OCCUPATION FACE NAME	N/A							
EMPLOYER/BUSINESS NAME	N/A							
BUSINESS ADDRESS TELEPHONE NO.	N/A							
24. FATHER'S SURNAME	ZARCO		-					
FIRST NAME	NATHANIEL		-					
MIDDLE NAME	TANTUAN							
25. MOTHER'S MAIDEN NAME	TANTOAN		-					
SURNAME	CAMPOS		-					
FIRST NAME	BERNIESITA							
MIDDLE NAME	SCALANTE		-					
	ROUND			(C	ontinue on se	parate sheet if neces	isary)	
26.								SCHOLARSHIP
LEVEL NAME OF SCHOOL (Write in full)		BASIC EDUCATION/DEGREE/COURSE (Write in full)		UNIT		HIGHEST LEVEL/ UNITS EARNED (if not graduated)	RNED YEAR	ACADEMIC HONORS
ELEMENTARY	BUTUAN CENTRAL ELEMENTARY SCHOOL	PRIMARY EDUCAT	TION	2006	2012	GRADUATED	2012	N/A
SECONDARY	AMA COMPUTER LEARNING CENTER	SECONDARY EDUC	ATION	2015	2018	GRADUATED	2018	HONOR
VOCATIONAL / TRADE COURSE	N/A	N/A		N/A	N/A	N/A	N/A	N/A
COLLEGE	CARAGA STATE UNIVERSITY	BACHELOR OF SCIENCE IN APPLIES	MATHEMATICS	2018	2022	GRADUATED	2022	CUMLAUDE
GRADUATE STUDIES	₩A	197		N/A	N/A	N/A	N/A	N/A
SIGNATURE	100	Continue on separate sheet if nec	essary)		TE			
	188			L	TE		FORM 212 (Revise	nd 2017). Page 1 of a

7. CAR	SERVICE ELIG	1080 (BOARD/ BAR) UNDER	RATING	DATE OF	DI AGE OF EVALUATION	TIONLING	DMENE	LICENSE (if a	_
	SPECIAL LA	WS/ CES/ CSEE TY / DRIVER'S LICENSE	(îř Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINA	TION / CONFE	RMENT	NUMBER	Date Validi
		GIBILITY (CUMLAUDE)		07/20/2022	CARAGA STATE UNIVERSITY				
HONORC				1					
							343		
									N.E
						-		,	-
			(Co	ontinue on separate sheet i	f necessary)			engelon en cons	
							rience sheet		
	USIVE DATES						SALARY/ JOB/ PAY GRADE (if	6747116.05	GOV
	m/dd/yyyy)	POSITION TI (Write in full/Do not a			NCY / OFFICE / COMPANY Do not abbreviate)	MONTHLY	applicable)& STEP (Format "00-0")/	STATUS OF APPOINTMENT	SERV (Y/1
From	To FEBRUARY 5,	ODADINO DECISIONE	OLIDED #42.55			40000	INCREMENT	DECULAD.	NI A
2022	2023	GRAPHIC DESIGNER	SUPERVISOR)	MASTERPIECE CREATIV	'ES (FREELANCE COMPANY)	10000.00	N/A	REGULAR	N/A
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		1							
			(Cor	ntinue on separate sheet if i	necessary)				
SIGNA	TURE	0	~.		DATE		March 7	, 2023	
		X					CSF	ORM 212 (Revised 201)	7), Page 2

VI. VOLUNTARY WORK OR INVOLVEMENT	IN CIVIC / NON-GOVERNME	NT / PEOPLE /	VOLUNTAR	Y ORGANIZAT	IONS	Market State 1	
29 NAME & ADDRESS OF OR (Write in full)	RGANIZATION	INCLUSIV (mm/di	E DATES	NUMBER OF HOURS		POSITION / NATURE OF WORK	
		From N/A	To N/A	N/A	N/A		
N/A		N/A	N/A	N/A		N/A	
		-					
	K	ontinue on separat	e sheet if necessa	ry)			
VIL LEARNING AND DEVELOPMENT (LEO) INTERVENTIONS/TRAINING	PROGRAMS	ATTENDED				
(Sand South Security Control of LED Participating programs) and limited	de only the relevant L4D/training taken	INCLUSIVE			,		
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)		ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
		From	From To				
N/A	Professional Control	N/A	N/A	N/A	N/A	N/A	
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		Continue on separat	e sheet if naces	nd			
VIII. OTHER INFORMATION		or separat	i i	-1/			
31. SPECIAL SKILLS and HOBBIES	32 N	ON-ACADEMIC DIST	TINCTIONS / RECO	OGNITION		MEMBERSHIP IN ASSOCIATION/ORGANIZATION	
COMPUTER LITERATE		(W	(Write in full)				
GRAPHIC DESIGNS		N/A					
WATCHING MOVIES							
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			January I.		-,		
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	4	Continue on separal	e sheet if necessa	ny)			
SIGNATURE				DA	ITE	March 07, 2023	
	10	0	-		and the second	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	or recommending authority, or to the supervision over you in the Office,					
Bureau or Department where you will be apppointed,						
a. within the third degree?	☐ YES ☑ NO					
b. within the fourth degree (for Local Government Unit - Care	The second secon	NO				
	If YES, give details:					
35. a. Have you ever been found guilty of any administrative offe	☐ 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 an	y law, decree, ordinance or regulation by	☐ YES ☑ NO				
any court or tribunal?		If YES, give details:				
 Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, er 		YES give detailer	□ NO			
(abolition) in the public or private sector?	If YES, give details: FINISHED CONTRACT					
38. a. Have you ever been a candidate in a national or local elec	etion held within the last year (except	☐ YES ☑ NO				
Barangay election)?	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	☐ YES ☑ NO					
	If YES, give details	(country):				
 Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), 						
Are you a member of any indigenous group?	☐ YES ☐ NO If YES, please specify:					
b. Are you a person with disability?	☐ YES ☑ NO					
c. Are you a solo parent?	If YES, please specify ID No: NO					
you a one paronn	If YES, please specify					
41. REFERENCES (Person not related by consanguinity or affinity to applicant	nt /appointee)					
NAME	ADDRESS =	TEL. NO.				
DR. ESAMEL M. PALUGA	CARAGA STATE UNIVERSITY	N/A				
DR. RUTH U. RETULLA	HILONGOS SOUTH DISTRICT	N/A	00			
GREGORIO M. BALUGO JR.	HINDANG NATIONAL HIGH SCHOOL	9331571779				
42. I declare under oath that I have personally accomplished						
complete statement pursuant to the provisions of pertin Philippines. I authorize the agency head/authorized represe	_		7-11-12			
agree that any misrepresentation made in this docu			JELLY & ZARCO			
administrative/criminal case/s against me.						
Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)	0.0					
PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: PHIL HEALTH		a marin make				
	ID/License/Passnort No.: 18.250042606.4					
Date/Place of Issuance: DECEMBER 12, 2022 BUTUAN CITY	Signature Sign inside the March 07, 2023	box)				
DECEMBER 12, 2022 BUTUAN CITY	Date Accomplished					
SUBSCRIBED AND SWORN to before me this	, affiant exhi	piting his/her validly issued	d government ID as indicated above.			
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