CS Form No. 212 Revised 2017		NAL DATA SHI				
WARNING: Any misrepresentation made in the			iministrativ e	/criminal case/s ag	ainst the person	concerned.
READ THE ATTACHED GUIDE TO FILLING OUT THE Print legibly. Tick appropriate boxes () (E PERSONAL DATA SHEET (PDS) BEFORE ACCOM	APUSHING THE PDS FORM.				
I. PERSONAL INFORMATION	a state supplies street in the cessed y. Indice	die N/A il noi applicable. DO	NOI ABBRE	VIATE. 1. CS II	סאק וַס	o not fill up. For CSC use of
2. SURNAME	TABUDLONG					
FIRST NAME	MARY LOURINE	****	NAME EXTENSION (JR., SR)			
MIDDLE NAME	HAGONOS					
3. DATE OF BIRTH (mm/dd/yyyy)	3/5/1994	16. CITIZENSHIP		Filipino	□Dual Citizensh	ip
4. PLACE OF BIRTH	BAYBAY CITY, LEYTE	If holder of dual citiz	enship,		Pls. indicate country:	
5. SEX	☐Male	please Indicate the	details.	Philippines		•
6 CIVIL STATUS	✓Single	17. RESIDENTIAL ADDR				
	☐Widowed ☐Separated ☐Other/s:		House	/Block/Lot No.		Street
The second second second	Louis,			vision/Village		Kan-ipa
7. HEIGHT (m)	5'0		_	Baybay		Barangay Leyte
8. WEIGHT (kg)	54	ZIP CODE	City	(Municipality		Province
9. BLOOD TYPE	0+	18. PERMANENT ADDR	-			
		House/Block/Lot No.			Street	
10 GSIS ID NO.	N/A	- U	Subdi	vision/Village		Kan-ipa Barangay
11 PAG-IBIG ID NO.	N/A			Baybay Municipality		Leyte Province
2. PHILHEALTH NO.	13-025338747-6	ZIP CODE	6521		Tiovince	
3. SSS NO.	06-3735307-8	19. TELEPHONE NO.	NA NA			
14. TIN NO.	N/A	20. MOBILE NO.		01	351227905	
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if			ail com	
II. FAMILY BACKGROUND	(1) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		THE REAL PROPERTY.	Programme and		or let to be a service of
22 SPOUSE'S SURNAME	N/A		23. NAME and list al	OF CHILDREN (W	nie tuil name	Imm/dd/wwy
FIRST NAME	N/A	NAME EXTENSION (JR.,		60	I/A	N/A
MIDDLE NAME	N/A					
OCCUPATION	N/A					
EMPLOYER/BUSINESS NAME	N/A					
BUSINESS ADDRESS	. N/A					
TELEPHONE NO.	N/A					
24 FATHER'S SURNAME	TABUDLONG	NAME EXTENSION (ID				
FIRST NAME	DOMINADOR	NAME EXTENSION (JR.,		SR.		
MIDDLE NAME	AVELLANA					
25 MOTHER'S MAIDEN NAME SURNAME	HAGONOS					

FIRST NAME GODOY MIDDLE NAME (Confinue on separate sheet if necessary) III. EDUCATIONAL BACKGROUND HOHES BASIC PERIOD OF YEAR NAME OF SCHOOL LEVEL/ 26. EDUCATION/DEGREE/COURSE RSHIP/ LEVEL ATTENDANCE GRADU (Write in full) UNITS ACADEM (Write in full) ATED From To EARNED With CAN-IPA ELEMENTARY SCHOOL ELEMENTARY **Primary Education** 2000 2006 2006 NA Honors BAYBAY NATIONAL HIGH High School SECONDARY 2006 2010 NA 2010 NA SCHOOL VOCATIONAL / SAINT MICHAEL COLLEGE of **Professional Education** 2017 2018 21 units 2018 NA HINDANG LEYTE TRADE COURSE Bachelor of Science COLLEGE VISAYAS STATE UNIVERSITY 2010 2014 NA 2014 NA inAgribusiness NA NA **GRADUATE STUDIES** NA NA NA NA NA (Continue on separ ate sheet if necessary) SIGNATURE 03/26/2023

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MARIBEL

	ER SERVICE/RA 1080	(BOARD/ BAR) UNDER	RATING	DATE O			TO 1 1 001 1550		LICENSE (if a	
	SPECIAL LAWS/ RANGAY ELIGIBILITY /	CES/ CSEE	(If Applicable)	CONFERM		PLACE OF EXAMINATION / CONFERMENT		MENT	NUMBER	Date of Validity
	SURE EXAMIN	NATION FOR	79.60	2019		CEBI	CEBU CITY		1804606	12/16/20
	TEACHER									
		- American								
				<u> </u>						-
					_					-
WORKE	XPERIENCE		(Co	ntinue on separa	ate sheet if	necessary)				
CATALOGUE DE L'ANTINGE	CALL STREET, S	ingly beautiful of depice should	e indicated in the amplified	Mod Espaining char	-					
	SIVE DATES	POSITION TO	TLE	DEPARTME	ENT / AGEN	CY/OFFICE/COMPANY	MONTHLY	SALARY/ JOB/ PAY GRADE (II	STATUS OF	SERVIC
From	То	(Write in full/Do not a	abbreviate)	(4	Vrite in ful/0	o not abbreviate)	SALARY	eppicable # STEP (Formal *00-0") INCREMENT	APPOINTMENT	(Y/N)
1/28/2022	08/30/2022	Administrative	Officer	CDJ Gro		uction & Development oration	15,000.00	NA	Contractual	NO
9/01/2020	10/03/2020	Enumerat	or			udolph Falle	15,000.00	NA	Contractual	YES
11/3/2015	08/30/2019	Personal Sec	retary		Ma. Milagr	osa G. Dieza	10,000.00	NA	Contractual	NO
04/01/2014	6/15/2017	Administrative	Officer	CDJ Gro		uction & Development loration	15,000.00	NA	Contractual	NO
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SIGNA	TURE		Who was	_		DATE	03	120 520:)]	112

29. NAME & ADDRESS OF ORGANIZATION (White in full)		INCLUSIVE DATES (mm/dd/yyyy) NUMBER OF HOURS From To		1	POSITION / NATURE OF WORK		
SOCIETY OF AGRIBUSINESS STUDENTS	7/6/2010			MEMBER			
	· V				***************************************		
		10.0					
		-					
	Continue on separate	sheel if necessary					
VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAI Start from the most recent LAD training programs and backets only the relevant LAD training	NING PROGRAMS AT	TENDED	na mang in semina	Toleran Service			
	INCLUSIVA	E DATES OF		Type of LD			
 TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROOF (Write in full) 		ATTENDANCE (mm/dd/yyyy)		(Managerial/ Supervisory/	CONDUCTED/ SPONSORED BY (White in full)		
Panchica Cartification Training Deserved	From	То		Technicalielc)			
ranchise Certification Training Program IFT OF MOBLITY: Updating Skills and Sharing of Good Practices in Pandemic Settin	09/19/2022 9 08/03/2022	09/23/2022	40.0 24.0	Participant Participant	Columbia Tower, Ortigas Ave. Mandaluyong Piazza Zicarelli, Gamu, Isabela		
Census of Population and Household CPH2020	08/03/2020	08/07/2020	45.0	Participant	WOMEN'S TRAINING CENTER BRGY COGON BAYBA		
Bookkeeping NCIII	10/21/2019	12/12/19	292.0	Scholar	ACLC COLLEGE OF ORMOC-Ormoc City		
Organic Agriculture Production NCII	09/03/2019	09/10/19	232.0	Scholar	GODOY'S ORGANIC LAND AND DIVERSIFICATION		
Agricultural Crop Production NCII	07/17/2019	06/09/19	336.0	Scholar	FARM- BRGY KAN-IPA BAYBAY LEYTE GODOY'S ORGANIC LAND AND DIVERSIFICATIO		
groundial Group Floododor Holl	diffizors	COCOSTS	3.00	SCHOLA	FARM- BRGY, KAN-IPA BAYBAY LEYTE		
					Name and the second sec		
The state of the s							
tilles make				iene L			
	(Continue en separale	sheet if necessary	0				
VIII. OTHER INFORMATION		TO A VICE OF	0.00	ton a comme			
31. SPECIAL SKILLS and HOBBIES 32	NON-ACADEMIC DISTI		SNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATIO		
	(Wri	te in full)			(Write in full)		
Vriting		VSU ALUMNI ASSOCIATION, INC					
Drawing					PAFTE Inc.		
Dancing							
	-						
		-					
	(Continue on separate	sheet if necessar	y)				
SIGNATURE	MANRUE	5	D	ATE	03/26/2823		

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Are you related by consanguinity or affinity to the appointing or a chief of bureau or office or to the person who has immediate sur			
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	☐ YES ☑ NO If YES, give details:		
a. Have you ever been found guilty of any administrative offens	☐ 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:		
. Have you ever been convicted of any crime or violation of any I	aw decree ordinance or regulation by		
any court or tribunal?	an, decide, definance of regulation by	☐ YES ☑ NO If YES, give details:	pa (More)
Have you ever been separated from the service in any of the for dropped from the rolls, dismissal, termination, end of term, finis in the public or private sector?		YES	
a. Have you ever been a candidate in a national or local election Barangay election)?	☐ YES ☑ NO If YES, give details:		
 b. Have you resigned from the government service during the telection to promote/actively campaign for a national or local ca 	☐ YES ☑ NO If YES, give details:		
 Have you acquired the status of an immigrant or permanent re 	☐ YES ☑ NO If YES, give details (country):		
and (c) Solo Parents Welfare Act of 2000 (RA 8972), please a Are you a member of any indigenous group? Are you a person with disability? Are you a solo parent?	☐ YES ☐ If YES, please specify: ☐ YES ☐ If YES, please specify ID No: ☐ YES ☐ If YES, please specify ID No:	NO	
 REFERENCES (Person not related by consanguinity or affinity to applicant / 	appointee)		
NAME	ADDRESS	TEL. NO.	
Marlyn Liagao	Baybay City, Leyte	0916-431-7747	
Merci Grace Fernandez	Baybay City, Leyte	0917-901-4405	=
Evelyn Cabahit	Baybay City, Leyte	0916-321-7994	
12. I declare under eath that I have personally accomplished this Person pursuant to the provisions of pertinent laws, rules and regulation head/authorized representative to verify/validate the contents stated document and its attachments shall cause the filing of administrative.	ns of the Republic of the Philippines. I a d herein. I agree that any misreprese	uthorize the agency	NARY LOURING & TABUTIONS PHOTO
Government Issued ID (i.e Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance			
Government Issued ID: PRC-LICENSE	the due	<u>/ </u>	
ID/License/Passport No.: 1804606	e box)		
Date/Place of Issuance: 12/16/2019 ORMOC CITY	March 19, 2018 Date Accomplishe		Right Thumbmark
SUBSCRIBED AND SWORN to before me this	17th day of April 2017, affiant exhibiting his/her	validity issued government ID as indica	ted above.
		-	
	Person Administering	Oath	