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 concerned. READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM. Print legibly. Tick appropriate boxes (  $\square$  and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. (Do not fill up. For CSC use only) 1. CS ID No. . PERSONAL INFORMATION LISONDRA 2. SURNAME NAME EXTENSION (JR., SR) FIRST NAME **APRIL ANNE** MIDDLE NAME **HERMOSILLA** 3. DATE OF BIRTH 04/27/1995 16. CITIZENSHIP ☑ Filipino ■ Dual Citizenship (mm/dd/yyyy) ☑ by birth □ by naturalization **CEBU CITY** 4. PLACE OF BIRTH If holder of dual citizenship, Pls. indicate country: please indicate the details. ☑ Female ■ Male 5. SEX ☑ Single ■ Married 17. RESIDENTIAL ADDRESS 6 CIVIL STATUS House/Block/Lot No. Street ■ Widowed □ Separated SSS VILLAGE SAN PABLO ☐ Other/s: Subdivision/Village Barangay ORMOC CITY LEYTE 7. HEIGHT (m) 1.59 City/Municipality Province 8. WEIGHT (kg) 65 ZIP CODE 6541 18. PERMANENT ADDRESS BLOOD TYPE B+ House/Block/Lot No. Stroot SSS VILLAGE SAN PABLO 10. GSIS ID NO. N/A Subdivision/Village Barangay ORMOC CITY LEYTE 11. PAG-IBIG ID NO. 1211-9374-4661 City/Municipality Province 13-250758026-6 ZIP CODE 6541 12. PHILHEALTH NO. 06-4035605-9 N/A 13. SSS NO. 19. TELEPHONE NO 14. TIN NO. 335-675-324-000 09338585528 20. MOBILE NO. marchapreelmay@gmail.com 15. AGENCY EMPLOYEE NO. N/A 21. E-MAIL ADDRESS (if any) **FAMILY BACKGROUND** SPOUSE'S SURNAME DATE OF BIRTH (mm/dd/yyyy) 22. N/A 23. NAME of CHILDREN (Write full name and list all) NAME EXTENSION (JR., SR) FIRST NAME N/A MARIAH ALTHEA SYD L. CAYA 05/15/2020 N/A MIDDLE NAME OCCUPATION N/A EMPLOYER/BUSINESS NAME N/A N/A **BUSINESS ADDRESS** N/A TELEPHONE NO. LISONDRA FATHER'S SURNAME NAME EXTENSION (JR., SR) **HELENITO** FIRST NAME **TEVES** MIDDLE NAME 25. MOTHER'S MAIDEN NAME HILDA ESPERE HERMOSILLA SURNAME LISONDRA HILDA FIRST NAME HERMOSILLA MIDDLE NAME (Continue on separate sheet if necessary) III. EDUCATIONAL BACKGROUND SCHOLARSHIP PERIOD OF ATTENDANCE LEVEL/ 26 BASIC EDUCATION/DEGREE/COURSE NAME OF SCHOOL YEAR ACADEMIC LEVEL UNITS (Write in full) (Write in full) GRADUATED HONORS EARNED RECEIVED From То (if no

SIGNATURE			DAT	E							
(Continue on separate sheet if necessary)											
BACCALAUREATE	ST. PETER'S COLLEGE OF ORMOC	TEACHER CERTIFICATE PROGRAM	2019	2019	18	N/A	N/A				
COLLEGE	ST. PETER'S COLLEGE OF ORMOC	BACHELOR OF SCIENCE IN ACCOUNTANCY	2015	2016	N/A	2016	N/A				
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A				
SECONDARY	ST. PETER'S COLLEGE OF ORMOC	BASIC EDUCATION	2007	2011	N/A	2011	WITH HIGH HONORS				
ELEMENTARY	ST. PAUL'S SCHOOL OF ORMOC FOUNDATION INC.	BASIC EDUCATION	2000	2007	N/A	2007	N/A				

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