

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 ( ) 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

2. SURNAME	CORNICO								
	FIRST NAME	MYRA MAE				NAME EXTENSION (JR., SR)	N/A		
	MIDDLE NAME	N/A							
3. DATE OF BIRTH (mm/dd/yyyy)	12/3/1999	16. CITIZENSHIP  If holder of dual citizenship, please indicate the details.	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:						
4. PLACE OF BIRTH	BAYBAY CITY								
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female								
6 CIVIL STATUS  <input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	N/A							
		House/Block/Lot No. Street							
		LOPFA KILIM							
		Subdivision/Village Barangay							
		BAYBAY CITY LEYTE							
		City/Municipality Province							
7. HEIGHT (m)	149.5 cm.	ZIP CODE	6521						
8. WEIGHT (kg)	50 kg.								
9. BLOOD TYPE	N/A		18. PERMANENT ADDRESS	N/A					
				House/Block/Lot No. Street					
10. GSIS ID NO.	N/A			ZIP CODE	LOPFA KILIM				
					Subdivision/Village Barangay				
11. PAG-IBIG ID NO.	121280579750	BAYBAY CITY LEYTE			City/Municipality Province				
					6521				
12. PHILHEALTH NO.	13-251919102-8								
13. SSS NO.	06-4487184-4		19. TELEPHONE NO.		N/A				
14. TIN NO.	N/A		20. MOBILE NO.	09309299066					
15. AGENCY EMPLOYEE NO.	N/A		21. E-MAIL ADDRESS (if any)	myra.cornico@vsu.edu.ph					

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)
	FIRST NAME	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	LOBRINO			
	FIRST NAME	ROLANDO		
	MIDDLE NAME	MEDALLO		
25. MOTHER'S MAIDEN NAME	CORNICO			
	SURNAME			
	FIRST NAME	MYRA		
	MIDDLE NAME	MORENO		

III. EDUCATIONAL BACKGROUND

26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE		HIGHEST LEVEL/ UNITS EARNED	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	GABAS INTEGRATED SCHOOL	ELEMENTARY	2006	2012	GRADUATED	2012	WITH HONOR
SECONDARY	FRANCISCAN COLLEGE OF THE IMMACULATE CONCEPCION	SECONDARY	2016	2018	GRADUATED	2018	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF PHYSICAL EDUCATION	2018	2022	GRADUATED	2022	CUM LAUDE
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

SIGNATURE

DATE

July 17, 2024

CS FORM 212 (Revised 2017), Page 1 of 4

#### IV. CIVIL SERVICE ELIGIBILITY

27.	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
					NUMBER	Date of Validity
	<b>LICENSURE EXAMINATION FOR TEACHERS</b>		<b>3/19/2023</b>	<b>TACLOBAN CITY</b>	<b>2183582</b>	<b>12/3/2027</b>
	<b>PD 907 - HONOR GRADUATE</b>	<b>N/A</b>	<b>N/A</b>	<b>N/A</b>	<b>N/A</b>	<b>N/A</b>

(Continue on separate sheet if necessary)

## V. WORK EXPERIENCE

*(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.*

[illegible]

(Continue on separate sheet if necessary)

<b>SIGNATURE</b>		<b>DATE</b>	July 17, 2024
------------------	---	-------------	---------------

29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		
	VISAYAS STATE UNIVERSITY DANCE COMPANY	8/16/2018	8/22/2023	N/A	DANCER

*(Continue on separate sheet if necessary)*





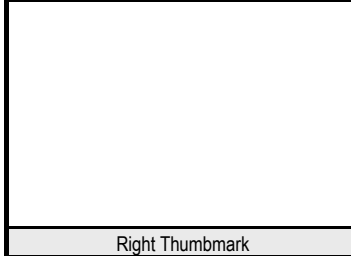

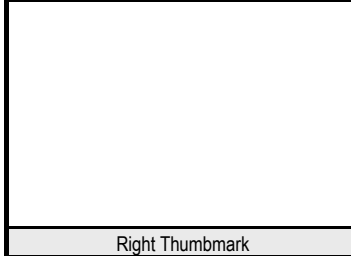

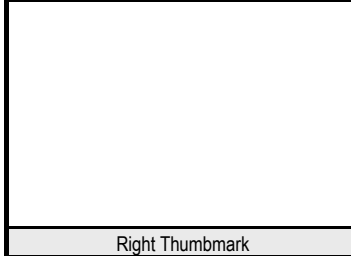
[illegible]

*(Continue on separate sheet if necessary)*

31.	SPECIAL SKILLS and HOBBIES	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	ATHLETICS OFFICIATING	N/A		SANGGUNIANG KABATAAN TREASURER
	FOLK DANCING			
	PLAYING BADMINTON			
	INTERPERSONAL SKILLS			
	COMMUNICATION SKILLS			

(Continue on separate sheet if necessary)

<b>SIGNATURE</b>		<b>DATE</b>	<b>July 17, 2024</b>
------------------	---	-------------	----------------------

34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to chief of bureau or office or to the person who has immediate supervision over you in the Bureau or Department where you will be appointed. a. within the third degree? b. within the fourth degree (for Local Government Unit - Career Employees)?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
35. a. Have you ever been found guilty of any administrative offense?  b. Have you been criminally charged before any court?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: Date Filed: _____ Status of Case/s: _____</div>												
36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
37. Have you ever been separated from the service in any of the following modes: resignation, retirement, dropped from the rolls, dismissal, termination, end of term, finished contract or phased out (abolition) in the public or private sector?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
38. 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 the three (3)-month period before the last election to promote/actively campaign for a national or local candidate?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
39. Have you acquired the status of an immigrant or permanent resident of another country?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details (country): _____</div>												
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), please answer the following a. Are you a member of any indigenous group?  b. Are you a person with disability?  c. Are you a solo parent?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div>												
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)													
<table><tr><td>NAME</td><td>ADDRESS</td><td>TEL. NO.</td></tr><tr><td>KEVIN R. SUMAYANG</td><td>Visca, Baybay City, Leyte</td><td></td></tr><tr><td>SHEENA EUNICE TABUDLONG</td><td>Visca, Baybay City, Leyte</td><td></td></tr><tr><td></td><td></td><td></td></tr></table>		NAME	ADDRESS	TEL. NO.	KEVIN R. SUMAYANG	Visca, Baybay City, Leyte		SHEENA EUNICE TABUDLONG	Visca, Baybay City, Leyte				
NAME	ADDRESS	TEL. NO.											
KEVIN R. SUMAYANG	Visca, Baybay City, Leyte												
SHEENA EUNICE TABUDLONG	Visca, Baybay City, Leyte												
42. I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I authorize the agency head/authorized representative to verify/validate the contents stated herein. I agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me.													
<table><tr><td>Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</td></tr><tr><td>Government Issued ID: PASSPORT</td></tr><tr><td>ID/License/Passport No.: P1710912C</td></tr><tr><td>Date/Place of Issuance: SEPTEMBER 17, 2022</td></tr></table>	Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance	Government Issued ID: PASSPORT	ID/License/Passport No.: P1710912C	Date/Place of Issuance: SEPTEMBER 17, 2022	<table><tr><td></td></tr><tr><td>Signature (Sign inside the box)</td></tr><tr><td>July 17, 2024</td></tr><tr><td>Date Accomplished</td></tr></table>		Signature (Sign inside the box)	July 17, 2024	Date Accomplished				
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance													
Government Issued ID: PASSPORT													
ID/License/Passport No.: P1710912C													
Date/Place of Issuance: SEPTEMBER 17, 2022													
													
Signature (Sign inside the box)													
July 17, 2024													
Date Accomplished													
<table><tr><td></td></tr><tr><td>PHOTO</td></tr><tr><td></td></tr><tr><td>Right Thumbmark</td></tr></table>			PHOTO		Right Thumbmark								
													
PHOTO													
													
Right Thumbmark													
SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.													
<table><tr><td></td></tr><tr><td>Person Administering Oath</td></tr></table>			Person Administering Oath										
Person Administering Oath													