

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. <input type="checkbox"/> CS ID N (Do not fill up. For CSC use only)													
I. PERSONAL INFORMATION													
2. SURNAME		ROSILLO											
FIRST NAME		ELGIN FRANCIS						NAME EXTENSION (LR, SR)					
MIDDLE NAME		POLQUIT											
3. DATE OF BIRTH (mm/dd/yyyy)		8/17/1992		16. CITIZENSHIP		FILIPINO							
4. PLACE OF BIRTH		BAYBAY CITY, LEYTE		If holder of dual citizenship, please indicate the details.		Pls. indicate country:							
5. SEX		MALE											
6. CIVIL STATUS		SINGLE		17. RESIDENTIAL ADDRESS		N/A							
						House/Block/Lot No. Street							
						N/A GUADALUPE							
						Subdivision/Village Barangay							
						BAYBAY CITY LEYTE							
						City/Municipality Province							
7. HEIGHT (m)		1.67m		ZIP CODE		6521							
8. WEIGHT (kg)		68kg											
9. BLOOD TYPE		AB+		18. PERMANENT ADDRESS		N/A							
						House/Block/Lot No. Street							
						N/A GUADALUPE							
						Subdivision/Village Barangay							
						BAYBAY CITY LEYTE							
						City/Municipality Province							
10. GSIS ID NO.		N/A		ZIP CODE		6521							
11. PAGIBIG ID NO.		N/A											
12. PHILHEALTH NO.		090257318817											
13. SSS NO.		34-97886753		19. TELEPHONE NO.		N/A							
14. TIN NO.		774-285-896-000		20. MOBILE NO.		09279512097							
15. AGENCY EMPLOYEE NO.		N/A		21. E-MAIL ADDRESS (if any)		elginrosillo@gmail.com							
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		NAME EXTENSION (LR, SR)		N/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		ROSILLO											
FIRST NAME		JIMMY		NAME EXTENSION (LR, SR)									
MIDDLE NAME		RUAYA											
25. MOTHER'S MAIDEN NAME													
SURNAME		POLQUIT											
FIRST NAME		ERLINDA											
MIDDLE NAME		IRIL											
(Continue on separate sheet if necessary)													
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 (if not graduated)		YEAR GRADUATED		SCHOLARSHIP / ACADEMIC HONORS RECEIVED	
						From To							
ELEMENTARY		VISCA FOUNDATION ELEMENTARY SCHOOL		ELEMENTARY		1995 2006		N/A		2006		N/A	
SECONDARY		HOLY CROSS OF MALITA, INC.		HIGH SCHOOL		2010 2011		N/A		2010		N/A	
VOCATIONAL / TRADE COURSE		N/A		N/A		N/A N/A		N/A		N/A		N/A	
COLLEGE		MINDOROSTATE COLLEGE OF AGRICULTURE AND TECHNOLOGY		BACHELOR OF SCIENCE IN INFORMATION TECHNOLOGY		2016 2020		N/A		2020		N/A	
GRADUATE STUDIES		N/A		N/A		N/A N/A		N/A		N/A		N/A	
(Continue on separate sheet if necessary)													
SIGNATURE						DATE		February 19, 2024					

IV. CIVIL SERVICE ELIGIBILITY

[illegible]

(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)

<i>SIGNATURE</i>		<i>DATE</i>	<i>February 19, 2024</i>
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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

[illegible]

(Continue on separate sheet if necessary)

VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

[illegible]

(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	PHOTOGRAPHY		N/A		N/A
	VIDEOGRAPHY				
	PHOTO EDITING				
	VIDEO EDITING				

(Continue on separate sheet if necessary)

<i>(Submit in separate sheet, if necessary)</i>			
<i>SIGNATURE</i>		<i>DATE</i>	<i>February 19, 2024</i>

34. Are you related by consanguinity or affinity to the appointing or recommending chief of bureau or office or to the person who has immediate supervision over Bureau or Department where you will be appointed,
a. within the third degree?
b. within the fourth degree (for Local Government Unit - Career Employees)?

If YES, give details:

35. a. Have you ever been found guilty of any administrative offense?

b. Have you been criminally charged before any court?

If YES, give details:

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 by any court or tribunal?

If YES, give details:

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?

If YES, give details:

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?

If YES, give details: _____
If YES, give details: _____

39. Have you acquired the status of an immigrant or permanent resident of another country?

If YES, give details (country):

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 items:
a. Are you a member of any indigenous group?
b. Are you a person with disability?
c. Are you a solo parent?

If YES, please specify: _____
If YES, please specify ID No: _____
If YES, please specify ID No: _____

41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)

NAME	ADDRESS	TEL. NO.
JOHN EDGAR S. ANTHONY, MSIT	ALCATE, VICTORIA, ORIENTAL MINDORO	09177169707
PAOLO MICHAEL M. LAFUENTE, MSIT	ALCATE, VICTORIA, ORIENTAL MINDORO	09159636080
CIRILE DOMINIC A. HORLADOR, MIT	ALCATE, VICTORIA, ORIENTAL MINDORO	09068598467

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.

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. P2595033B

Date/Place of Issuance: DFA BATANGAS 07/19/2019

Signature (Sign inside the box)

Date Accomplished

ID picture taken within the last 6 months
4.5 cm. X 3.5 cm
(passport size)

Computer generated or photocopied picture is not acceptable

PHOTO

Right Thumbmark

SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.

Person Administering Oath

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

Yes/No	Cstat	Gender
Yes	Single	Male
No	Married	Female
	Separated	
	Widowed	