cs	Form	No.	21
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PERSONAL DATA SHEET

WARNING: Any misrepresenta	tion made in the Person	al Data Sheet and the	Work Experience Sheet shall	l cause the filin	g of admin	istrative/crin	ninal case/s again	st the person	concerned.
READ THE ATTACHED GUIDE Print legibly. Tick appropriate bot PERSONAL INFORMATIO	xe and use separat					1. CS ID No.		(Do not fill up. F	or CSC use only
2. SURNAME	NARVIOS								
FIRST NAME	CHELSEA						NAME EXTENSION (JR	., SR)	N/A
MIDDLE NAME	ROA		· · · · · · · · · · · · · · · · · · ·						
3. DATE OF BIRTH (mm/dd/yyyy)		8/1997	16. CITIZENSHIP	Alge	☑ Filipi	no 🗆	Dual Citizenship		
4. PLACE OF BIRTH	HILONG	OS LEYTE	if holder of dual citiz	enship,			□ by birth □ Pls. indicate] by naturaliza country:	ition
5. SEX	☐ Male	☑ Female	please indicate the	details.		13 3			~
6 CIVIL STATUS	☑ Single ☐ Widowed ☐ Other/s:	☐ Married☐ Separated☐	17. RESIDENTIAL ADDRESS		0428 se/Block/Lot N/A odivision/Villa			RUBIO STR Street CENTRAL Barangay	EET
7. HEIGHT (m)	1.6	51 m	A STATUS AND PROPERTY.	F	IILONGO	S		LEYTE	
8. WEIGHT (kg)	5	5 kg	ZIP CODE	- G	ty/Municipali	9	6524	Province .	54
9. BLOOD TYPE	TY	PE B	18. PERMANENT ADDRESS		0428		AFR	UBIO STRE	ET
10. GSIS ID NO.		N/A		Hou	se/Block/Lot N/A	No.		Street CENTRAL	
11. PAG-IBIG ID NO.	-	182-12804		Sul	bdivision/Villa	age HILONG	SOS	Barangay LEYTE	
12. PHILHEALTH NO.		740863-1	ZIP CODE	Ci	ty/Municipali 6524	ty		Province	
13. SSS NO.	-	50273-4	19. TELEPHONE NO.			(05:	3) 520-2017		
14. TIN NO.		012-443	20. MOBILE NO.				776128031		
15. AGENCY EMPLOYEE NO.		N/A	21. E-MAIL ADDRESS (if any)				rios@gmail.c	om	
II. FAMILY BACKGROUND)								
22. SPOUSE'S SURNAME		N/A		23. NAME o	of CHILDE	REN (Write	full name and		F BIRTH
FIRST NAME		N/A	NAME EXTENSION			N/A		N	I/A
MIDDLE NAME		N/A				N/A		N	/A
OCCUPATION		N/A	S			N/A		N	I/A
EMPLOYER/BUSINESS NAME		N/A			N/A			N/A	
BUSINESS ADDRESS		N/A		ļ	N/A			N/A	
TELEPHONE NO.		N/A		1	N/A			N/A	
24. FATHER'S SURNAME		NARVIOS	NAME EXTENSION (JR., SR) N/A		CHELSEA ROA NARVIOS			10/18/1997	
FIRST NAME	WIL	FREDO	NAME EXTENSION (JR., SK) N/A	-		ROA NAR		01/26	5/2002
MIDDLE NAME		RABE			ZELFRED ROA NARVIOS			04/19/2008	
25. MOTHER'S MAIDEN NAME	T					ROA NAR			3/1997
SURNAME		ROA				ROA NAR			3/2002
FIRST NAME		MA. RAZEL							9/2008
MIDDLE NAME III. EDUCATIONAL BACKS	SPOUND	GULTIANO				(Continue on se	parate sheet if neces	sary)	
26. LEVEL	NAME	OF SCHOOL te in full)	BASIC EDUCATION/DEGF		PERIOD O	F ATTENDANCE	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIPI ACADEMIC HONORS RECEIVED
ELEMENTARY	SOGOD SI	PED CENTER	PRIMARY EDUCATION	l	2004	2010	N/A	2010	N/A
SECONDARY		SA SCHOOL OF DNGOS	HIGH SCHOOL		2010	2014	N/A	2014	WITH
VOCATIONAL / TRADE COURSE		N/A	N/A		N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STA	ATE UNIVERSITY	BS HOTEL, RESTAU		2014	2018	N/A	2018	N/A
GRADUATE STUDIES		N/A	N/A	1	N/A	N/A	N/A	N/A	N/A
	1	A	(Continue on separate sheet if ne	cessary)			Γ Ι	i	
SIGNATURE		100				ATE	02/	19/20	2 d 2017) Page 1 of

7 CADE	ED SEDVICEI DA 10	nen /powpor pwpt (swinch	The state of the s	DATE OF				LICENSE (if ap	oficable)
 CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE 		WS/ CES/ CSEE	RATING (If Applicable)	DATE OF EXAMINATION / PLACE OF EXAMINATION CONFERMENT		TION / CONFERMENT		NUMBER	Date of Validity
	N/A		N/A	N/A	N	N/A		N/A	N/A
	N/A		N/A	N/A	N.	I/A		N/A	N/A
	N/A		N/A	N/A	N	Α		N/A	N/A
	N/A		N/A	N/A	N	/A		N/A	N/A
	N/A		N/A	N/A	N	/A	-	N/A	N/A
	N/A		N/A	N/A	N	A		N/A	N/A
	N/A		N/A	N/A	N.	/A		N/A	N/A
			(C	ontinue on separate sheet if	necessary)				
. WORKE	XPERIENCE			Make the Name of Street		19190	150015		teams
include priv	ate employmen	t. Start from your recent	work) Descriptio	n of duties should be it	ndicated in the attached	Work Expe	rience sheet.		
	USIVE DATES m/dd/yyyy/	POSITION TO (Write in full/Do not			ICY / OFFICE / COMPANY to not abbreviate)	MONTHLY	SALARYI JOBI PAY GRADE (If applicable)& STEP (Formet *00-0*)/	STATUS OF APPOINTMENT	GOV'T SERVICE
From	To	INVENTED			Monte		INCREMENT		(11/10)
10/25/2021	PRESENT	ONLINE ESL T	ACHER		TALK	₽15,000	N/A	TEMPORARY	NO
0/12/2020	12/30/2020	REGISTRATION	OFFICER I		ISTICS AUTHORITY - ILSYS	P20,903	10-5	CONTRACTUAL	YES
9/17/2018	01/25/2020	FRONT DESK	CLERK		PLAZA HOTEL	P12,464	02-3	PERMANENT	NO
2/13/2018	04/28/2018	500 HOURS ON-THE-	JOB-TRAINEE	PRINCESA	CITY TOURISM DEPARTMENT OF PUERTO PRINCESA, PALAWAN		N/A	TEMPORARY	YES
4/06/2018	04/21/2018	BOOKING A	GENT	PUERTO PRINCESA SUBTERRANEAN RIVER NATIONAL PARK BOOKING OFFICE		N/A	N/A	TEMPORARY	YES
7/01/2017	07/31/2017	TOURISM OFFICE	TRAINEE	BAYBAY CITY TOURISM AND INVESTMENT PROMOTION OFFICE		N/A	N/A	TEMPORARY	YES
						-			
				-					
					27.00				
					The file				
					1011				
					2.7				
		14							
				1			1		

SIGNATURE

(Continue on separate sheet if necessary)

DATE

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/I. VOLUNTARY WORK OR INVOLVEMENT I			VE DATES		1 1 1 1 1 1 1 1 1 1 1		
9. NAME & ADDRESS OF OF (White in full)	GANIZATION	NIZATION INCLUSING (mm/d		NUMBER OF HOURS	Manager of the	POSITION / NATURE OF WORK	
00000000000000000000000000000000000000	The state of the s	From	To			The span bont of rights A	
N/A	E	N/A	N/A	N/A	PER PER LUCIS	N/A	
N/A	N/A	N/A	N/A		N/A		
N/A			N/A.	N/A	- mad year	N/A	
N/A	Call of Early	N/A	N/A	N/A		N/A N/A	
N/A		N/A	N/A	N/A			
N/A		N/A	N/A	N/A		N/A	
N/A		N/A	N/A	N/A		N/A	
	(Co	ntinue on separate :	sheel if necessary)	galos-sid	in the first		
TITLE OF LEARNING AND DEVELOPMENT INTE (Write in full)		ATTEN	DATES OF DANCE d/yyyy)	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
		From	То	Lastribuser	ex maga	EST CONTROL OF STREET	
PHILIPPINE IDENTIFICATION SYSTEM PRE	REGISTRATION TRAINING	10/01/2020 N/A	10/03/2020 N/A	24 N/A	N/A N/A	PHILIPPINE STATISTICS AUTHORITY N/A	
N/A		N/A	N/A	N/A N/A	N/A N/A	N/A	
N/A N/A		-	N/A			N/A	
		N/A		N/A	N/A	177	
NA		N/A	N/A	N/A	N/A	N/A	
N/A		N/A	N/A	N/A	N/A	N/A	
N/A		N/A	N/A	N/A	N/A	N/A	
NA		N/A	N/A	N/A	N/A	N/A	
	(Cc	ontinue on separate	sheet if necessary)	UJESZINI		
III. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES	32 NO	N-ACADEMIC DISTII (Writ	NCTIONS / RECOG	SNITION	HARLIS AND RE	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATIO (Write in full)	
CONSISTENTLY MEETS DEADLINES	EVENT MANAGER IN AS		200100	ATHLON MIXE	RELAY	LEAGUE OF TOURISM STUDENTS OF TH	
EXCELLENT ORGANIZATIONAL AND MULTI- TASKING ABILITIES	EVENT (DEPARTMENT OF CONSUMERS AND HOSPITALITY MANAGEMENT FOOD FLAIR)				PHILIPPINES (BAGUIO CITY CHAPTER SOCIETY OF HOSPITALITY STUDENTS		
SUPERB WRITTEN AND VERBAL	RGANIZER OF P		SEMINAR		N/A		
COMMUNICATION SKILLS INCREDIBLY DETAIL ORIENTED	G A BUSINESS SUCH AS MOTORPARTS SHOP AND MINI				N/A		
CREATIVE, PROBLEM SOLVER AND TECH		CONVENIEN		N/A			
SAVVY GOOD UNDERSTANDING IN OFFICE ADMINISTRATION AND		N/A N/A			N/A		
BASIC BOOKKEPING PRACTICES HIGH-LEVEL OF CUSTOMER SERVICE		N/A				N/A	
	(0)	ontinue on separate					
SIGNATURE	1			D.	ATE	02/19/2021	

34. Are you related by consanguinity or affinity to the appoin chief of bureau or office or to the person who has immed Bureau or Department where you will be apppointed,					
a. within the third degree?		☐ YES ☑ NO			
b. within the fourth degree (for Local Government Unit - 0	☐ YES ☑ NO				
	If YES, give details:				
5. a. Have you ever been found guilty of any administrative	offense?	☐ YES ☑ NO			
		If YES, give details:			
b. Have you been criminally charged before any court?		☐ YES ☑ NO)		
	If YES, give details: Date Filed:				
	J AR J AN	Status of Case/s:			
6. Have you ever been convicted of any crime or violation o regulation by any court or tribunal?	f any law, decree, ordinance or	☐ YES ☑ N If YES, give details:	0		
7. Have you ever been separated from the service in any of retirement, dropped from the rolls, dismissal, termination phased out (abolition) in the public or private sector?		YES N	O RESIGNATION		
8. a. Have you ever been a candidate in a national or local e	lection held within the last year	LI AEC E			
(except Barangay election)?		☐ YES ☑ NO If YES, give details:			
 b. Have you resigned from the government service during the last election to promote/actively campaign for a natio 	☐ YES ☑ NO If YES, give details:				
9. Have you acquired the status of an immigrant or permane	ent resident of another country?	☐ YES ☑ NO			
		If YES, give details (co			
 Pursuant to: (a) Indigenous People's Act (RA 8371); (b) M 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972 					
Are you a member of any indigenous group?		☐ YES ☑ If YES, please specify:	NO		
Are you a person with disability?		NO NO			
Are you a solo parent?	☐ YES ☑ NO If YES, please specify ID No:				
REFERENCES (Person not related by consanguinity or affinity to applic	ant /appointee)				
NAME	ADDRESS	TEL. NO.			
JANICE ANOG	CEBU CITY	9171468221			
PATRICK JAMES BUTE	CEBU CITY	9659508373	(36)		
NIÑO JAY A. LAMADORA	HILONGOS, LEYTE	9661356904			
I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertin Philippines. I authorize the agency head/authorized re herein. I agree that any misrepresentation made in filing of administrative/criminal case/s against me.	ent laws, rules and regulations of the epresentative to verify/validate the o	Republic of the contents stated	CHELSTA P. MARVIOS		
Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of	12				
dc.) PLEASE INDICATE ID Number and Date of Government Issued ID: POSTAL ID	/ ax				
ID/License/Passport No.: PRN I13180414025	Signature (Sign inside the	box)			
Date/Place of Issuance: 07/04/2021	∂2 119 20 Date Accomplished		Right Thumbmark		
SUBSCRIBED AND SWORN to before me this	, affiant exhibiti	ng his/her validly issued gove	rnment ID as indicated above.		
	Person Administering Oa	th			