CS Form No. 212 Revised 2017	PERSO	NAL DATA	A SH	EET	Γ		*		
	tion made in the Personal Data Sheet and the	Work Experience Sheet shall	II cause the fi	ling of adm	ninistrative/d	riminal case/s ag	gainst the per	rson	
	TO FILLING OUT THE PERSONAL DATA SHE								
	and use separate sheet if necessary. Indica	te N/A if not applicable. DO NOT	ABBREVIATI	E.	1. CS ID No.		(Do not fill up.	For CSC use only	
I. PERSONAL INFORMATIO							XI.		
2 SURNAME	ARCELO					NAME EXTENSION (JR	L, SR)	T. EL 23 III	
FIRST NAME	MA. THERESA								
MIDDLE NAME	ATOL	T							
DATE OF BIRTH (mm/dd/yyyy)	November 14, 2000	16. CITIZENSHIP		Filipino Dual Citizenship			by naturalization		
4. PLACE OF BIRTH	Abuyog, reyte	If holder of dual citizenship,		Pls. indicate country			country:		
5. SEX	☐ Male	please indicate the det	tails.					•	
6 CIVIL STATUS	☑ Single ☐ Married ☐ Widowed ☐ Separated ☐ Other/s:			se/Block/Lot No. Pang			Street A SMAAN Berangay		
7. HEIGHT (m)	1.49 m		B	aybay ty/Municipality			Leyte		
8. WEIGHT (kg)	55 kg			152			Province		
9. BLOOD TYPE	8+						Montiman		
10. GSIS ID NO.	N/A			se/Block/Lot N		Street Palanogan Berangay			
11. PAG-IBIG ID NO.	12/2535/97/8				bdivisionVillage Mahap laa			Barangay Veyte Province	
12. PHILHEALTH NO.	12-026/48437-9	ZIP CODE			Mahap lag ityMunicipality 5 12			Province	
13. SSS NO.	06-4678406-0								
14. TIN NO.	433-325-842	20. MOBILE NO.	N/A 09311524240		10				
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)	arcclomatheresa @ gmail.com						
II. FAMILY BACKGROUND									
22. SPOUSE'S SURNAME	N/A		23. NAME of CHI	LDREN (Write	e full name and	ist all)	DATE OF BIR	TH (mm/dd/yyyy)	
FIRST NAME	N/A	NAME EXTENSION (JR., SR)	TENSION (JR., SR)		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	ARCELD								
FIRST NAME	CEULIO	NAME EXTENSION (JR., SR)			Name and Associated				
MIDDLE NAME	CAPAROSO								
25. MOTHER'S MAIDEN NAME	OALLALIOS								
SURNAME	AYDC								
FIRST NAME	ALICIA								
MIDDLE NAME	CAGABHION			(Continue on separate sheet if nec					
III. EDUCATIONAL BACKG									
26.	NAME OF COLOOK	BASIC EDUCATION DE CORE	- ACOLUDE E	PERIOD OF	ATTENDANCE	HIGHEST LEVEL/		SCHOLARSHIP/	
LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)		PERIOD OF ATTENDANCE From To		UNITS EARNED (if not graduated)	YEAR GRADUATED	ACADEMIC HONORS RECEIVED	
ELEMENTARY	Mahaplag Central School			2006	2013		2013	With Honor	
SECONDARY	Academia del Christifidelis			2017	2019		2019	with Hmor	
VOCATIONAL / TRADE COURSE		41							
COLLEGE	visayas State University	Bs in Dwelopment	Communicate	1 2019	2023		2023	cumlande	
GRADUATE STUDIES							- :		
		Continue on separate sheet if neces	ssary)			1111		12 4 A T L	
SIGNATURE	mahias.			DA	TE	March:	25, 202	.5	

27. CAF						DATE TITLE	16	LICENSE (2	poliochle)
	SPECIAL L	ERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE GAY ELIGIBILITY / DRIVER'S LICENSE RATING (If Applicable) DATE OF EXAMINATION / CONFERMENT DATE OF EXAMINATION / CONFERMENT			LICENSE (if a	Date of Validity			
Honor G	Swaduate Eli	aibility PD no. 907		11/29/2024	CSC RO V	111			
		5.5		12.12.22.1	V III V				
				,					
			(Co	ntinue on separate sheet if	necessary)				
	EXPERIENCE								
		ent. Start from your recer	t work) Descripti	on of duties should b	e indicated in the attac	hed Work E	SALARY/JOB/PAY	et.	
	(mm/dd/yyyy)				MONTHLY	GRADE (if applicable)& STEP	STATUS OF	GOV'T SERVICE	
From	То	(Write in full/Do not	abbreviate)	(vvrite in tulivi	Do not abbreviate)	SALARY	(Format "00-0") INCREMENT	APPOINTMENT	(Y/N)
09/06/202	23 01 27 202	Agent austom	er semict	Qualf	on, Ceby	15,000			N
			presentative	May Gen-Far		13,000		JO	
1 1	29 12 31 2024	Alternati Deput	Downent	VSU, Ew-Farr Managen				Y	
01 10 20	25 Present	Alternate Deputy and Records Con-	holler	VSU, En -Fair	ment institute	15,000		ot	4
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SIGI	NATURE	maria	<i>እ</i> '		DATE	Mai	-ch 25	2025	

29. NAME & ADDRESS OF ORGANIZATION	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK		
(Write in full)	From	To	ST INUIS		SOME OF WORK	
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	ontinue on separate					
LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING P	ROGRAMS AT	TENDED				
TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS		E DATES OF		Type of LD	COMPLICATED CHANGES BY	
TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	(Managerial/ Supervisory/	CONDUCTED/ SPONSORED BY (Write in full)	
	From	To		Technical/etc)		
Audio Production Workshop	02/22/200	02/22/2023	2hrs		VSU Development communic	
Audio Production Workshop minar Workplace	110	111		141		
ATT A THE CONTRACT	07/20/2024	1 1			president for pascarch, Extrasion	
on suicide prevention	10/16/2024	10/16/2024	4 hrs		VSU, Studente somie affin	
Projenic Agriculture Production NC 11	12/02/2024	01/10/2015	48 hrs		TESDA at uy integrated for	
ACE Against Suicide: A Gatepeepe's Training on Suicide prevention Droganic Agriculture Production NC 11 Agricultural Crops Production NC 11	25/22/200	06/29/2024			TESDA at UYINtgrated to,	
ignational crops recting the 10011	05 27 204	00/04/104	48hrs		12304 af a (Integration for	
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(Co	ntinue on separate	sheet if necessary				
I. OTHER INFORMATION						
11. SPECIAL SKILLS and HOBBIES 32 NO	N-ACADEMIC DISTIN		NITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION	
11. SPECIAL SKILLS and HOBBIES 32.		e in full)			33. (Write in full)	
		N				
		-			<u> </u>	
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(Co	ntinue on separate :	sheet if necessary				
	•			TE		
SIGNATURE	ntinue on separate	sheet if necessary	DA	TE	CS FORM 212 (Revised 2017), Pa	

34.	Are you related by consanguinity or affinity to the appointing of chief of bureau or office or to the person who has immediate a Bureau or Department where you will be apppointed,							
	a. within the third degree?	☐ YES ☑ NO						
	b. within the fourth degree (for Local Government Unit - Caree	YES NO If YES, give details:						
35	a. Have you ever been found guilty of any administrative offer	☐ YES ☑ NO						
56.		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:						
36.	Have you ever been convicted of any crime or violation of any any court or tribunal?	☐ YES ☐ NO If YES, give details:						
37.	Have you ever been separated from the service in any of the dropped from the rolls, dismissal, termination, end of term, fin in the public or private sector?	☐ YES ☐ NO If YES, give details:						
38.	a. Have you ever been a candidate in a national or local elect Barangay election)?	☐ YES ☐ NO If YES, give details:						
	b. Have you resigned from the government service during the election to promote/actively campaign for a national or local c	☐ YES						
39.	Have you acquired the status of an immigrant or permanent re	☐ YES ☐ NO If YES, give details (country):						
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magn							
a.	and (c) Solo Parents Welfare Act of 2000 (RA 8972), please a Are you a member of any indigenous group?	☐ YES ☐ NO						
b.	Are you a person with disability?	If YES, please specify: YES NO If YES, please specify ID No:						
C.	Are you a solo parent?	YES NO NO If YES, please specify ID No:						
41.	41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)							
	NAME	ADDRESS	TEL. NO.					
	Christina A. Gabrillo	Visayas State University	0970994873					
42.	I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertine Philippines. I authorize the agency head/authorized represer	ent laws, rules and regulations of the l ntative to verify/validate the contents state	Republic of the d herein.					
	agree that any misrepresentation made in this docume administrative/criminal case/s against me.	nent and its attachments shall cause	s the niling of					
P	overnment Issued ID (i.e Passport, GSIS, SSS, PRC, Drive's License, etc.) LEASE INDICATE ID Number and Date of Issuance							
I H	overnment Issued ID: Pass port							
ID	VLicense/Passport No.: P7723415C)X)						
Di	ate/Place of Issuance: Ang. 29, 2024 DFA Tacloban	Right Thumbmark						
	SUBSCRIBED AND SWORN to before me this	g his/her validly issued government ID as indicated above.						
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		Person Administering Oat						