CS Form No. 212 Revised 2017	PERSO	NAL DAT	A SH	HEET				
	ation made in the Personal Data Sheet and t	he Work Experience Sheet sh	all cause the	filing of administrative/cr	riminal case/s aga	ainst the pers	on	
concerned. READ THE ATTACHED GUIDE	E TO FILLING OUT THE PERSONAL DATA SI	HEET (PDS) BEFORE ACCOM	PLISHING TH					
Print legibly. Tick appropriate boxe I. PERSONAL INFORMATION	es () and use separate sheet if necessary. Indica	te N/A if not applicable. DO NOT	ABBREVIATE.	1. CS ID No.		(Do not fill up. F	For CSC use only	
2. SURNAME	VERDIDA							
FIRST NAME	CRISSA		N/A					
MIDDLE NAME	COQUILLA							
3. DATE OF BIRTH		40 OLETZENOUS		T				
(mm/dd/yyyy)	9/28/2002	16. CITIZENSHIP		☑ Filipino □	Dual Citizenship	76		
4. PLACE OF BIRTH	ANAHAWAN, SOUTHERN LEYTE	If holder of dual citize	enship,		☑by birth [Pls. indicate c	⊒by naturaliza ountrv:	5	
5. SEX	☐ Male ☑ Female	please indicate the d	letails.	Philippines		,	_	
	✓ Single	17. RESIDENTIAL ADDRESS	Г	42-A		N/A		
6 CIVIL STATUS	☐ Widowed ☐ Separated		H	louse/Block/Lot No.		Street AYAHAG		
	☐ Other/s:		_	Subdivision/Village		Barangay		
7. HEIGHT (m)	1.49		1	SAINT BERNARD City/Municipality	SO	OUTHERN LEYTE Province		
8. WEIGHT (kg)	39	ZIP CODE			6613			
9. BLOOD TYPE	0	18. PERMANENT ADDRESS		42-A louse/Block/Lot No.		N/A Street		
10. GSIS ID NO.	N/A					AYAHAG		
I1. PAG-IBIG ID NO.	N/A		Subdivision/Village SAINT BERNARD		Barangay SOUTHERN LEYTE			
		_	City/Municipality		Province			
12. PHILHEALTH NO.	N/A	ZIP CODE	6613					
13. SSS NO.	N/A	19. TELEPHONE NO.	N/A		N/A			
14. TIN NO.	N/A	20. MOBILE NO.	09506972028		9506972028	72028		
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	verdidacrissa28@gmail.com					
II. FAMILY BACKGROUNI	D							
22. SPOUSE'S SURNAME	N/A		23. NAME of C	CHILDREN (Write full name and	list all)	DATE OF BIRT	TH (mm/dd/yyyy)	
FIRST NAME	N/A	N/A		N/A		N	I/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	VERDIDA							
FIRST NAME	VICENTE	N/A						
MIDDLE NAME	SIBLOS							
25. MOTHER'S MAIDEN NAME	GEMMA LIMBO CO	QUILLA						
SURNAME	VERDIDA							
FIRST NAME	GEMMA							
MIDDLE NAME	COQUILLA	A		(Continue on se	parate sheet if neces	ssary)		
III. EDUCATIONAL BACK	GROUND						PONOLABOUR	
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGR (Write in full)	REE/COURSE	PERIOD OF ATTENDANCE From To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP ACADEMIC HONORS RECEIVED	
			To the second se		i -		WITH	

I. EDUCATIONAL BACKGI	ROUND						
S. 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	SCHOLARSH ACADEMIC HONORS
			From	То	(ii not graduated)		RECEIVED
ELEMENTARY	AYAHAG ELEMENTARY SCHOOL	PRIMARY EDUCATION	6/1/2015	4/3/2019	GRADUATED	2019	WITH
SECONDARY	UNITED INSTITUTE, INC.	HIGH SCHOOL	6/3/2019 4/30/2021		GRADUATED	2021	WITH
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN STATISTICS	9/13/2021	7/24/2025	GRADUATED	2025	CHED
GRADUATE STUDIES	N/A N/A		N/A	N/A	N/A	N/A	N/A
		Continue on separate sheet if necessary)					
SIGNATURE	(Mudray			ATE	August 11, 2025		

7. CARE		IBILITY 1080 (BOARD/ BAR) UNDER		DATE OF				LICENSE (if ap	pplicable)
	SPECIAL LA	WS/ CES/ CSEE ITY / DRIVER'S LICENSE	RATING (If Applicable)	EXAMINATION / PLACE OF EXAMINATION / CONFERMENT			NUMBER	Date of	
		-	22.2					200050	Validity
CAREER SE	RVICE PROFE	SSIONAL EXAMINATION	80.6	8/11/2024	TACLOB	ANGIT		382052	10/15/202
									2
	EXPERIENCE	nt. Start from your recent		ntinue on separate sheet i		Work Expe	rience sheet		
	USIVE DATES						SALARY/ JOB/ PAY		GOV'T
From (m	nm/dd/yyyy) To	POSITION TIT (Write in full/Do not a			NCY / OFFICE / COMPANY Do not abbreviate)	MONTHLY SALARY	GRADE (if applicable)& STEP (Format *00-0*)/ INCREMENT	STATUS OF APPOINTMENT	SERVICE (Y/N)
5/12/2025	6/9/2025	INDEPENDENT RESEA	RCH ANALYST	1	N/A	1500.00	N/A	COMPLETED	N/A
6/18/2024	7/19/2024	INTERN - C	JT	LEYTE	ISTICS AUTHORITY - PROVINCIAL	N/A	N/A	COMPLETED	N/A
12/20/2022	1/18/2023	ENUMERAT	OR	VISAYAS SOCIO-ECON	IOMIC RSEARCH AND DATA /ISAYAS STATE UNIVERSITY	500.00	N/A	COMPLETED	N/A
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			(Co	ontinue on separate sheet	f necessary)				
SIGN	IATURE	1 /Y/	h litte		DATE	I	Augus	st 11, 2025	

29. NAME & ADDRESS OF OR			VE DATES				
(Write in full)		(mm/dd/yyyy) From To		NUMBER OF HOURS	POSITION / NATURE OF WORK		
A		N/A	N/A	N/A	N/A		
		DATE OF THE OWNER, THE	sheet if necessary				
II. LEARNING AND DEVELOPMENT (L&D)	INTERVENTIONS/TRAINING PR				ı		
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)		INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy) From To		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
Bootstrapping for Missing Data and Gener	rating Synthetic Data in R	11/21/2024	11/21/2024	8.0	ТеснпісаІ	Department of Statistics	
Statistical Analysis using	JAMOVI	11/13/2024	11/13/2024	8.0	Technical	Department of Statistics	
DIOS Lecture with Prof. Dr. 0	Olivier Thas	2/26/2024	2/29/2024	32.0	Technical	Data Science Institute – I Biostat – Hasselt University Belgium	
4th National Statistics Month: "Accelerating Progress Healthy Philippines		10/5/2023	10/5/2023	8.0	Foundation	Department of Statistics	
Data Appreciation Seminar on Selected Official Statistics a Registration Assistance Project (PBRAP), ePhild a	and Awareness Forum on PhilSys Birth	10/26/2022	10/26/2022	8.0	Foundation	Philippine Statistics Authority - Leyte	
2nd Eastern Visayas Data Festival: "Boosting the o Decisions, Better Poli		10/19/2022	10/19/2022	8.0	Foundation	Philippine Statistics Authority - Region VIII	
				-			
			-				
		×					
	·····						
VIII. OTHER INFORMATION	(Con	tinue on separate	sheet if necessary	1) •			
31. SPECIAL SKILLS and HOBBIES	32. NON	33. MEMBERSHIP IN ASSOCIATION/ORGANIZAT (Write in full)					
Statistical Software (RStudio, STATA)	Unang Ga	N/A					
Microsoft Software (Excel, Word, PowerPoint)	,						
Editing Photos (Canva)							
Singing, Dancing, Drawing and Gaming Po			nce (2018-2019)				
	(Con	tinue on separate	sheet if necessar	y)			
SIGNATURE	Colon Va	do	DATE		August 11, 2025		

34.	Are you related by consanguinity or affinity to the appointing chief of bureau or office or to the person who has immediate					
	Bureau or Department where you will be apppointed,					
	a. within the third degree?		NO			
	b. within the fourth degree (for Local Government Unit - Can	☐ YES ☐ If YES, give details:	NO			
35.	a. Have you ever been found guilty of any administrative offer	ense?	☐ YES ☐	7 NO		
			If YES, give details:			
	b. Have you been criminally charged before any court?		☑ NO			
			If YES, give details: Date Filed:			
			Status of Case/s:			
36.	Have you ever been convicted of any crime or violation of an	ny law, decree, ordinance or regulation by	L YES	□ NO		
	any court or tribunal?		If YES, give details:			
37.	Have you ever been separated from the service in any of the		☐ YES	☑ NO		
	retirement, dropped from the rolls, dismissal, termination, er (abolition) in the public or private sector?	nd of term, finished contract or phased out	If YES, give details:			
38.	a. Have you ever been a candidate in a national or local ele	ction held within the last year (except	☐ YES	☑ NO		
	Barangay election)?		If YES, give details:			
	b. Have you resigned from the government service during the	ne three (3)-month period before the last	☐ YES ☑ NO			
	election to promote/actively campaign for a national or local	If YES, give details:				
39.	Have you acquired the status of an immigrant or permanent	☐ YES	☑ NO			
		If YES, give details	(country):			
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag	ona Carta for Disabled Persons (RA				
	7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972),					
a.	Are you a member of any indigenous group?		☐ YES If YES, please specify:	☑ NO		
b.	Are you a person with disability?	YES				
		If YES, please specify				
C.	Are you a solo parent?	☐ YES If YES, please specify	☑ NO ID No:			
41	REFERENCES (Person not related by consanguinity or affinity to applicant	t (annaintae)	Т			
71.	NAME	ADDRESS	TEL. NO.			
	SWEET CHARISH G. GODINEZ	Department of Statistics - VSU	9639179128	65		
	NORBERTO E. MILLA, JR	Department of Statistics - VSU	9358590890			
	PERLINITA B. LIBATON	Ayahag, Saint Bernard, Southern Leyte	9684565387			
42.	I declare under oath that I have personally accomplished					
	complete statement pursuant to the provisions of pertin Philippines. I authorize the agency head/authorized represe			CRISSA C. VERDIDA		
	agree that any misrepresentation made in this docu			CIX 334 C. 101104		
	administrative/criminal case/s against me.					
G	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)	10				
	LEASE INDICATE ID Number and Date of Issuance	C/Bd/da				
G	overnment Issued ID: N/A					
10	0/License/Passport No.: N/A	ox)				
D	ate/Place of Issuance: N/A		Right Thambmark			
		<i>(</i> **, 13):	C 1: A			
	SUBSCRIBED AND SWORN to before me this	, affiant exhibit	ing his/her validly issued	government ID as indicated above.		
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		th				