CS Form No. 212 Revised 2017	Р	erson.	al data shi	EET						
WARNING: Any misrepresentation made in the I		-	-	administrativ	e/criminal o	:ase/s agai	nst the person c	oncerned.		
READ THE ATTACHED GUIDE TO FILLING OUT THE Print legibly. Tick appropriate boxes () a				O NOT ABBI	REVIATE.	1. CS ID No	(Do n	ot fill up. For	CSC use only)	
I. PERSONAL INFORMATION										
2. SURNAME	TABUDLONG									
FIRST NAME	MARY LOURINE	name extension (jr., sr)								
MIDDLE NAME	HAGONOS									
3. DATE OF BIRTH (mm/dd/yyyy)	3/5/1994 16. CITIZENSHIP			✓ Filipino ☐ Dual Citizenship ☐ by birth ☐ by naturaliza					lization	
4. PLACE OF BIRTH	ВАҮВАҮ С	ITY,LEYTE	If holder of dual citiz					cate country:		
5. SEX	☐ Male	✓ Female	please indicate the	details. Philippines				_		
	✓ Single	Married	17. RESIDENTIAL ADDRE							
6 CIVIL STATUS	Widowed	Separated		House	/Block/Lo	ot No		Street		
	Other/s:			,	,			Kan-ıpa		
			_		vision/Vil Baybay	lage	В	larangay Leyte		
7. HEIGHT (m)	5'0)			Municipo	ality	I	Province		
8. WEIGHT (kg)	54	ļ	ZIP CODE							
9. BLOOD TYPE	0-	•	18. PERMANENT ADDRI	Наима	/Dlack/La	+ 110		Street		
10.GSIS ID NO.	N/	Λ		nouse	/Block/Lo	DI NO.		Kan-ipa		
10.6313 10 110.	147.				vision/Vil Baybay	lage	Е	arangay Leyte		
11.PAG-IBIG ID NO.	N/	Α			Municipo	ality	I	Province		
2. PHILHEALTH NO.	13-02533	8747-6	ZIP CODE		6521					
3. SSS NO.	06-3735	307-8	19. TELEPHONE NO.		NA					
14. TIN NO.	N/A 20. MOBILE NO.			09351227905						
15. AGENCY EMPLOYEE NO.	N/	A	21. E-MAIL ADDRESS (if		<u>lou</u>	rinetabuo	llong@gmail	.com		
II. FAMILY BACKGROUND										
22 Spouse's Surname	N/A	4		23. NAME and list all		REN (Wrii	e full name		JG(WW)	
FIRST NAME	N/	Ά.	NAME EXTENSION			N/	A		N/A	
MIDDLE NAME	N/	Ά.								
OCCUPATION	N/A	A								
EMPLOYER/BUSINESS NAME	N/A	A								
BUSINESS ADDRESS	N/A	L								
TELEPHONE NO.	N/A	1								
24. FATHER'S SURNAME	TABUDLONG									
FIRST NAME	DOMINADOR		NAME EXTENSION			SR.				
MIDDLE NAME	AVELLANA									
25 MOTHER'S MAIDEN NAME										
SURNAME	HAGONOS									
FIRST NAME	MARIBEL									
MIDDLE NAME	GODOY			(0	Continue	on sepa	rate sheet it	necessai	y)	
III. EDUCATIONAL BACKGROUND			DACIC		DEDIC	ND 05	ПІСПЕЗІ	VEAD	JOHOLA	
26. LEVEL	NAME OF (Write i		BASIC EDUCATION/DEGREE/ (Write in full)	/COURSE		DD OF DANCE To	LEVEL/ UNITS	YEAR GRADU ATED	RSHIP/ ACADEM	
ELEMENTARY	CAN-IPA ELEMENT	ARY SCHOOL	Primary Educati	ion	2000	2006	NA	2006	With Honors	
SECONDARY	BAYBAY NATION.	AL HIGH	High School		2006	2010	NA	2010	NA	
VOCATIONAL / TRADE COURSE	SAINT MICHAEL HINDANG		Professional Educ	ation	2017	2018	21 units	2018	NA	
COLLEGE	VISAYAS STATE UI	NIVERSITY	Bachelor of Scientines		2010	2014	NA	2014	NA	
GRADUATE STUDIES	NA	4	NA		NA	NA	NA	NA	NA	

DATE

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

SIGNATURE

V. CIVIL SERVICE	E ELIGI	BILITY								
SPE	ECIAL LAW	80 (BOARD/ BAR) UNDER 'S/ CES/ CSEE	RATING (If Applicable)	DATE EXAMINA	TION /	PLACE OF EXAMINA	TION / CONFER	MENT	LICENSE (if a	pplicable) Date of
		Y / DRIVER'S LICENSE		CONFER	MENT				NUMBER	Validity
LICENSURE EXAMINATION FOR TEACHERS			79.60	2019		CEBL	JCITY		1804606	12/16/2019
			(Co	ntinue on sepa	arate sheet	if necessary)				
. WORK EXPERI										
B. INCLUSIVE DA	TES	recent work) Description of duties should						SALARY/ JOB/ PAY		GOV'T
(mm/dd/yyyy)		POSITION TI (Write in full/Do not a				ENCY / OFFICE / COMPANY /Do not abbreviate)	MONTHLY SALARY	GRADE (if applicable)& STEP (Format "00-0")/	STATUS OF APPOINTMENT	SERVICE (Y/N)
	Το	A desir intention	Officer	CDJ Gr	oup Cons	truction & Development	45,000,00	INCREMENT	Operational	
	0/2022	Administrative				rporation	15,000.00	NA	Contractual	NO
<u> </u>	3/2020	Enumerate				Rudolph Falle	15,000.00	NA	Contractual	YES
	0/2019	Personal Sec	-	CDJ Gr		grosa G. Dieza truction & Development	10,000.00	NA	Contractual	NO
04/01/2014 6/15/	/2017	Administrative	Officer			rporation	15,000.00	NA	Contractual	NO
			//-	ntinue on sepa	arate sheet	if necessary)				
SIGNATURE			(C0	nanue on Sepa	वार आस्ट्री	DATE				
							<u> </u>	CS	FORM 212 (Revised 20	017), Page 2 of 4

VI. VOLUNTARY WORK OR INVOLVEMENT	IN CIVIC / NON-GOVERNMEN	T/PEOPLE/	VOLUNTARY	ORGANIZAT	TON/S		
29. NAME & ADDRESS OF OF (Write in full)		INCLUSIVE DATES (mm/dd/yyyy) From To		NUMBER OF HOURS		POSITION / NATURE OF WORK	
SOCIETY OF AGRIBUSINESS STUDENTS			3/13/2014		MEMBER		
VII. LEARNING AND DEVELOPMENT (L&D,		tinue on separate PROGRAMS A		<i>'</i>)			
(Start from the most recent L&D/training program and include		r the last five (5) ye	ears for Division C	Chief/Executive/Ma	nagerial positions)		
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)		INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
Franchise Certification Training Program		From 09/19/2022	To 09/23/2022	40.0	Participant	Columbia Tower, Ortigas Ave. Mandaluyong	
GIFT OF MOBLITY: Updating Skills and Sharing of Good Census of Population and Household CPH202		08/03/2022 08/03/2020	08/05/2022 08/07/2020	24.0 45.0	Participant Participant	Piazza Zicarelli, Gamu, Isabela WOMEN'S TRAINING CENTER BRGY. COGON BAYBAY	
Bookkeeping NCIII	0			292.0	Scholar	LEYTE ACLC COLLEGE OF ORMOC-Ormoc City	
		10/21/2019 09/03/2019	12/12/19 09/10/19	232.0		GODOY'S ORGANIC LAND AND DIVERSIFICATION	
Organic Agriculture Production NCII					Scholar	FARM- BRGY. KAN-IPA BAYBAY LEYTE GODOY'S ORGANIC LAND AND DIVERSIFICATION	
Agricultural Crop Production NCII		07/17/2019	06/09/19	336.0	Scholar	FARM- BRGY. KAN-IPA BAYBAY LEYTE	
	(Con	tinue on separate	sheet if necessary	<i>(</i>)			
VIII. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full) 33. MEMBERSHIP IN ASSOCIATION/ORG (Write in full)						
Writing		VSU ALUMNI ASSOCIATION, INC					
Drawing		PAFTE Inc.					
Dancing	_						
	(Con	tinue on separate	sheet if necessary	()			
SIGNATURE	Con	In copurate			ATE		

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?	☐ YES ☑	NO			
b. within the fourth degree (for Local Government Unit - Car	YES If YES, give details:	NO			
35. a. Have you ever been found guilty of any administrative offe	☐ YES ☑ NO 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 an by any court or tribunal?	☐ YES ☑ NO If YES, give details:				
37. Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, er out (abolition) in the public or private sector?		☐ YES If YES, give details:	NO		
38. a. Have you ever been a candidate in a national or local ele Barangay election)?	YES If YES, give details: _	NO			
b. Have you resigned from the government service during the election to promote/actively campaign for a national or local	☐ YES ☑ NO 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 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972),					
a. Are you a member of any indigenous group?	YES VOINT NO				
b. Are you a person with disability?	YES If YES, please specify ID	NO:			
c. Are you a solo parent?	YES If YES, please specify ID	NO:			
41. REFERENCES (Person not related by consanguinity or affinity to applicant of	/appointee)				
NAME	ADDRESS	TEL. NO.	ID picture taken within		
Loreto Godoy	Baybay City, Leyte	0916-8381677	the last 6 months 3.5 cm. X 4.5 cm (passport size)		
Merci Grace Fernandez	Baybay City, Leyte	0917-901-4405	With full and handwritten name tag and signature over		
Evelyn Cabahit	Baybay City, Leyte	0916-321-7994	printed name Computer generated		
42. I declare under oath that I have personally accomplished this statement pursuant to the provisions of pertinent laws, rules and agency head/authorized representative to verify/validate the con made in this document and its attachments shall cause the filing of	regulations of the Republic of the Philippine tents stated herein. I agree that any	s. I authorize the	or photocopied picture is not acceptable PHOTO		
Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance					
Government Issued ID: PRC-LICENSE					
ID/License/Passport No.: 1804606	ox)				
Date/Place of Issuance: 12/16/2019 ORMOC CITY	Right Thumbmark				
SUBSCRIBED AND SWORN to before me this	: 17th day of April 2017, affiant exhibiting his/her vali	dly issued government ID as indi	icated above.		
	h				
			CS FORM 212 (Revised 2017), Page 4 of		