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. (Do not fill up. For CSC use only) Print legibly, Tick appropriate boxes ( ) and use separate sheet if necessary, Indicate N/A if not applicable. DO NOT ABBREVIATE. 1. CS ID No. Moreno 2 SURNAME IAME EXTENSION (JR., SR) FIRST NAME Jan Luziel MIDDLE NAME Desabille 3. DATE OF BIRTH 04/14/2001 16. CITIZENSHIP ☑ Filipino ☐ Dual Citizenship (mm/dd/yyyy) ☑by birth □by naturalization Pls. indicate country: 4. PLACE OF BIRTH **Ormoc City** If holder of dual citizenship, please indicate the details. ☐ Male ☑ Female Zone 1 ☑ Single ☐ Married 17. RESIDENTIAL ADDRESS 6 CIVIL STATUS House/Block Lat No. ☐ Widowed ☐ Separated Caridad Other/s: Subdivision/Village Barangay **Baybay City** Leyte 1.50 7. HEIGHT (m) City/Municipality Province 6521 ZIP CODE 8. WEIGHT (kg) 40 Zone 1 18. PERMANENT ADDRESS A+ 9. BLOOD TYPE House/Block/Lat No Caridad 10. GSIS ID NO. Barangay **Baybay City** Leyte 11. PAG-IBIG ID NO. City/Municipality Province 13-250364551-7 ZIP CODE 6521 12 PHILHEALTH NO. 06-4741910-6 19. TELEPHONE NO 13. SSS NO. 09165115045 14. TIN NO. 641-616-010 20. MOBILE NO. 21. E-MAIL ADDRESS (if any) janluzielmoreno0000@gmail.com 15. AGENCY EMPLOYEE NO 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yvyv) 22. SPOUSE'S SURNAME AME EXTENSION (JR., SR) FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO. 24. FATHER'S SURNAME Moreno NAME EXTENSION (JR., SR) FIRST NAME Juan Noel Parrilla MIDDLE NAME 25. MOTHER'S MAIDEN NAME Desabille SURNAME FIRST NAME Ana Luz Balaoro (Continue on separate sheet if necessary) MIDDLE NAME HIGHEST LEVEL PERIOD OF ATTENDANCE BASIC EDUCATION/DEGREE/COURSE YEAR NAME OF SCHOOL **ACADEMIC** LEVEL UNITS FARNED HONORS RECEIVED GRADUATED (Write in full) (Write in full) (if not gradua From To Caridad Elementary School **Basic Elementary Education** 2007 2013 2013 Salutatorian ELEMENTARY Accountancy Business and With Honor SECONDARY Western Leyte College Aug-17 Apr-19 2019 Management VOCATIONAL / TRADE COURSE **Bachelor of Science in Economics** Aug-19 2023 Cum Laude Aug-23 COLLEGE Visavas State University GRADUATE STUDIES DATE February 10, 2024 SIGNATURE

7 CADEE	R SERVICE/ PA 4	080 /BOARD/ RARVINGER		DATE OF				LICENSE (if a	oplicable)
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE			RATING (If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINA	PLACE OF EXAMINATION / CONFERMENT			Date of Validity
Honor Graduate - Presidential Decree No. 907				02/02/2024	CSC	RO VIII		100108240216	03/03/2023
	XPERIENCE ate employmen	nt. Start from your recer		ntinue on separate sheet if n of duties should be		ed Work Ext	perience sheet		
8. INCLUSIVE DATES (mm/dd/yyyy) POSITIC		POSITION T (Write in full/Do not	ITLE	E DEPARTMENT / AGENCY / OF		MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (fl applicable)& STEP (Formst "00-0")/	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)
From 12/16/2023	To 02/09/2024	Enumera	tor	RAFI - Mic	rofinance Inc.	5000 weekly	INCREMENT	Contractual	N
					Weel				
								14	
			(5)						
								,	
SIGNA	TURE	:	(Co	ntinue on separate sheet i	necessary) DATE		Februar	y 10, 2024	
J. J		jonlujel				CS FORM 212 (Revised 2017), Page 2 of 4			

TO TOLONIAN HOUR ON HIT OCTABLES.	and the second s	And the State of the Local Division in which the				
29. NAME & ADDRESS OF OR (Write in full)	GANIZATION	INCLUSIVI (mmidd	llyyyy)	NUMBER OF HOURS		POSITION / NATURE OF WORK
		From	To			
			1			
		4				
	(Conti	nue on separate s	heet if necessary			
VII. LEARNING AND DEVELOPMENT (L&D)	INTERVENTIONS/TRAINING PI					
30. TITLE OF LEARNING AND DEVELOPMENT INTER	EVENTIONS/TRAINING PROGRAMS	INCLUSIVE DATES OF ATTENDANCE		NUMBER OF HOURS	Type of LD ( Managerial/	CONDUCTED/ SPONSORED BY
(Write in full)		(mm/dd/yyyy) From To		-	Supervisory/ Technical/etc)	(Write in full)
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					-	
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VIII. OTHER INFORMATION	(Conti	nue on separate s	heet if necessary	0		
	NONL	ACADEMIC DISTIN	CTIONS / RECOG	ENITION		MEMBERSHIP IN ASSOCIATION/ORGANIZATION
31. SPECIAL SKILLS and HOBBIES	32.		in full)			33. (Write in full)
Reading and Writing						
Data Entry				- Na De William		
Communication						
Meticulous Attention to Details						
Organizational Skills						
		nue on separale s	sheet if necessary			
SIGNATURE	jonlyjel			DA	TE	February 10, 2024  CS FORM 212 (Revised 2017), Page 3 of 4

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Are you related by consanguinity or affinity to the appoir 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?  b. within the fourth degree (for Local Government Unit -	☐ YES ☑ I ☐ YES ☑ I If YES, give details:				
35. a. Have you ever been found guilty of any administrative	☐ 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 by any court or tribunal?	☐ YES ☑ NO If YES, give details:				
37. Have you ever been separated from the service in any or retirement, dropped from the rolls, dismissal, termination out (abolition) in the public or private sector?	☐ YES ☑ NO If YES, give details:				
a. Have you ever been a candidate in a national or local Barangay election)?      b. Have you resigned from the government service during last election to promote/actively campaign for a national.	☐ YES				
39. Have you acquired the status of an immigrant or perman	☐ YES ☑ NO If YES, give details (country):				
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) 7277); and (c) Solo Parents Welfare Act of 2000 (RA 89 a. Are you a member of any indigenous group?  b. Are you a person with disability?  c. Are you a solo parent?	☐ YES				
41. REFERENCES (Person not related by consanguinity or affinity to appl	licant /appointee)	1 4 - 3 - 3			
NAME	ADDRESS	TEL. NO.			
Staecy Mejares	Brgy. Subangdaku, Mandaue City	9983432940			
lan Dave Custodio	Ormoc City	9179565029			
42. I declare under oath that I have personally accomplise complete statement pursuant to the provisions of per Philippines. I authorize the agency head/authorized in I agree that any misrepresentation made in this administrative/criminal case/s against me.	rtinent laws, rules and regulations of the epresentative to verify/validate the content	Republic of the s stated herein.	JAN LUZIEL B. MORENO		
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)  PLEASE INDICATE ID Number and Date of Issuance  Government Issued ID: Philippine Identification Card  ID/License/Passport No.: 2763-9082-5841-7306  Date/Place of Issuance: September 17, 2021 - Baybay City	box) Right Thumbmark				
SUBSCRIBED AND SWORN to before me this	, affiant exhibi	ting his/her validly issued go	overnment ID as indicated above.		
Person Administering Oath					

## WORK EXPERIENCE SHEET

Instructions: 1. Include only the work experiences relevant to the position being applied to.

- The duration should include start and finish dates, if known, month in abbreviated form, if known, and year in full. For the current position, use the word Present, e.g., 1998-Present. Work experience should be listed from most recent first.
- Duration: December 16, 2023 February 9, 2024
- · Position: Enumerator
- Name of Office/Unit: Research and Knowledge Management Team
- Immediate Supervisor: Daryl Talandron
- Name of Agency/Organization and Location: RAFI Microfinance Inc. Cebu City
  - · List of Accomplishments and Contributions
    - o Helped design the research questionnaire
  - Summary of Actual Duties
    - The main role involved collecting data through phone interviews. Communicated clearly with respondents, asked questions according to predefined scripts, and recorded responses accurately. Ensuring data quality and respecting respondents' confidentiality are priorities, and also collaborated with supervisors and team members to follow protocols and address any issues.

(Signature over Printed Name of Employee/Applicant)

Date: February 10, 2024