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. Driet logibly, Tiply appropriets have a Compliance of the Compliance								
Print legibly. Tick appropriate boxes () and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. 1. CS ID No. (Do not fill up. For CSC use only) I. PERSONAL INFORMATION								
2. SURNAME Gonato								
FIRST NAME	Charito NAME EXTENSION (JR., SR) N/A							
MIDDLE NAME	Cornites							
3. DATE OF BIRTH (mm/dd/yyyy)	08/11/1985		✓ Filip	oino	Dual Citizenship	by natura	lization	
4. PLACE OF BIRTH	puro cebu	If holder of dual citize	enship,	Pls. indicate			ountry:	
5. SEX	✓ Male Female	please indicate the d	letails.	Philippines				
6. CIVIL STATUS	✓ Single	17. RESIDENTIAL ADDRESS		House/Block/Lot No. golden G Subdivision/Village			zone-3 Street Guadalupe (Utod) Barangay	
7. HEIGHT (m)	1.60		C	BAYBAY City/Municipality			LEYTE Province	
8. WEIGHT (kg)	75.00	ZIP CODE		6521				
9. BLOOD TYPE	0	18. PERMANENT ADDRESS	Hou	use/Rlack/Lat N	lo.		Stroot	
10. GSIS ID NO.	N/A			House/Block/Lot No. Street				
11. PAG-IBIG ID NO.	121044344280			ubdivision/Village City/Municipality		Barangay Province		
12. PHILHEALTH NO.	N/A	ZIP CODE		кулишторанку	<u> </u>		Trovince	
13. SSS NO.	N/A	19. TELEPHONE NO.				(1		
14. TIN NO.	48421819400000	20. MOBILE NO.		953-245-7270				
15. AGENCY EMPLOYEE NO.	AGENCY EMPLOYEE NO. VJO00397 21. E-MAIL ADDRESS (if any) charito.gonato@vsu.edu.ph							
II. FAMILY BACKGROUND								
22. SPOUSE\'S SURNAME	N/A	NAME EXTENSION (ID. OD)	23. NAME of CH	HILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/y				H (mm/dd/yyyy)
FIRST NAME	N/A	NAME EXTENSION (JR., SR) N/A		jesus t gonato 01/18/2			3/2018	
MIDDLE NAME	N/A							
OCCUPATION	N/A							
EMPLOYER/BUSINESS NAME	N/A							
BUSINESS ADDRESS	N/A							
TELEPHONE NO.	N/A							
24. FATHER\'S SURNAME	gonato	NAME EXTENSION (JR., SR)						
FIRST NAME	pepito	(2.0)						
MIDDLE NAME	upon							
25. MOTHER\'S MAIDEN NAME	cornites							
SURNAME		gonato 						
FIRST NAME MIDDLE NAME	geminniana			(Continue on separate sheet if necessary)				
MIDDLE NAME dalogdog (Continue on separate sheet if necessary) III. EDUCATIONAL BACKGROUND								
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGR (Write in full)	EE/COURSE	PERIOD OF A	ATTENDANCE To	HIGHEST LEVEL/UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
ELEMENTARY	Camotes Elementary School	Elementary		1991	1995	grade 4	1995	N/A
SECONDARY	N/A							
VOCATIONAL/ TRADE COURSE	N/A							
COLLEGE	N/A							
GRADUATE STUDIES	N/A							
CICNATURE	((Continue on separate sheet if nece	essary)		ATE		10/01/0004	
SIGNATURE	1			DA	ATE		10/01/2024	

IV.	IV. CIVIL SERVICE ELIGIBILITY									
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER DATING			DATE OF				LICENSE (if applicable)			
CDECIAL LAWC/CEC/CCEE RATING		(If Applicable)	EXAMINATION / CONFERMENT	ATION / CONFER	RMENT	NUMBER	Date of Validity			
	N/A N/A		N/A	N/A			N/A	N/A		
	(Continue on separate sheet if necessary)									
		EXPERIE								
(Inc		vate employm JSIVE DATES	ent. Start from your recent	t work) Descripti	on of duties should k	e indicated in the attached	d Work Exper	SALARY/ JOB/		26:3
		m/dd/yyyy) To	POSITION TITLE DEPARTMENT / AGENCY / OFFICE / COM (Write in full/Do not abbreviate) (Write in full/Do not abbreviate)			MONTHLY SALARY	PAY GRADE (if applicable)& STEP (Format"00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/N)	
	N/A	N/A	N/A			N/A	N/A	N/A	N/A	
_										
_										
					(Continue on separate she	eet if necessary)				
	SIGNATURE				DATE	10/01/2024				
								CS	FORM 212 (Revised 20	017), Page 2 of 4

/I. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S								
29. NAME & ADDRESS OF OR (Write in full)	GANIZATION		/E DATES ld/yyyy)	NUMBER OF HOURS	POSITION / NATURE OF WORK			
N/A			N/A	N/A		N/A		
	(Continue on separat	te sheet if necessary					
VII. LEARNING AND DEVELOPMENT (L&D,								
(Start from the most recent L&D/training program and include only the relevant L&D/training taken for to the state of the			E DATES OF IDANCE Id/yyyy)	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)		
Basic Life Support with CPR 2020 Guidelines with AED, Foreign Mask Application, Occupational Firs	Body Airway Obstruction and Bag Valve taid Training	02/26/2024	To 02/26/2024	23	Technical	UDRRMSSO Visayas State University		
"Unlocking Excellence: The 5S Resolution for Clerks and	Heads at Visayas State University"	11/29/2023	11/29/2023	1	Technical	"Visayas State University (VSU), Visca, Baybay City, Leyte "		
surface preparation and wall pl	astering	03/29/2021	03/29/2021	1	Technical	bostik partners academy,s		
tiling planning,installing and fi	nishing	03/29/2021	03/29/2021	1	Technical	bostik panrtners academy,s		
VIII OTHER WEODMATION		(Continue on separat	te sheet if necessary,					
VIII. OTHER INFORMATION	100	ON ACADEMIC DIS	TINCTIONS / RECO	OGNITION		MEMPEDOLIID INI ACCOCIATIONI/ODGANIZATION		
31. SPECIAL SKILLS and HOBBIES	32.	(W	/rite in full)	JGNITION	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATIO (Write in full)			
N/A	N/A					N/A		
		(Continue on separat	te sheet if necessary)				
SIGNATURE		•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		TE	10/01/2024		
						CS FORM 212 (Revised 2017) Page 3 of		

34	Are you related by consanguinity or affinity to the apportune the chief of bureau or office or to the person who has in Office, Bureau or Department where you will be appporal, within the third degree? b. within the fourth degree (for Local Government Unit	☐YES ☐ ☐YES ☐ If YES, give details:	_no _no			
35	a. Have you ever been found guilty of any administrati	YES [NO			
	b. Have you been criminally charged before any court	YES If YES, give details: Date Filed: Status of Case/s:	NO			
36.	Have you ever been convicted of any crime or violation regulation by any court or tribunal?	YES [If YES, give details:	NO			
37.	Have you ever been separated from the service in any retirement, dropped from the rolls, dismissal, terminati phased 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 loc (except Barangay election)?	YES [
	b. Have you resigned from the government service dulast election to promote/actively campaign for a nation	YES [
39.	Have you acquired the status of an immigrant or perm	☐YES ☐NO If YES, give details (country):				
a. b.	Pursuant to: (a) Indigenous People\'s Act (RA 8371); (7277); and (c) Solo Parents Welfare Act of 2000 (RA 8 Are you a member of any indigenous group? Are you a person with disability? Are you a solo parent?	If YES, please specify: YES, please specify IE YES, please specify IE YES If YES, please specify IE	NO			
41	. REFERENCES (Person not related by consanguinity or affinity to ap	pplicant /appointee)	II 1 LS, please specify it			
	NAME	ADDRESS	TEL. NO.	ID picture taken within		
				the last 6 months 3.5 cm x 4.5 cm (passport size) With full and handwritten name tag and signature over		
42	I declare under oath that I have personally accomplis complete statement pursuant to the provisions of pe Philippines. I authorize the agency head/authorized re agree that any misrepresentation made in this do administrative/criminal case/s against me.	rtinent laws, rules and regulations of the presentative to verify/validate the content	Republic of the s stated herein. I	printed name Computer generated 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: N/A					
ŀ	D/License/Passport No.: N/A	box)				
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	SUBSCRIBED AND SWORN to before me this	, affiant ex Person Administering O		government ID as indicated above.		
		ath				