CS Form No. 212 Revised 2017	PERSO	NAL DAT	A SH	IEET	Γ				
WARNING: Any misrepresentation	on made in the Personal Data Sheet and the W	Vork Experience Sheet shall	cause the filin	g of adminis	strative/crim	inal case/s again	st the person	concerned.	
READ THE ATTACHED GUIDE T	O FILLING OUT THE PERSONAL DATA SHEE	T (PDS) BEFORE ACCOMP	LISHING THE I	PDS FORM.					
	and use separate sheet if necessary. Indicate N/	A if not applicable. DO NOT AB	BREVIATE.		1. CS ID No.		(Do not fill up.	For CSC use only)	
I. PERSONAL INFORMATION									
2. SURNAME	MONTAJES								
FIRST NAME	DECA VARIÑA  NAME EXTENSION (JR., SR)  N/A								
MIDDLE NAME	GALVEZ	•							
3. DATE OF BIRTH (mm/dd/yyyy)	12/17/1992	16. CITIZENSHIP		✓ Filipino ☐ Dual Citizenship ☐ by birth			by naturalization		
4. PLACE OF BIRTH	BAYBAY, LEYTE	If holder of dual citizenship,		Pls. indicate country:					
5. SEX	☐ Male ☑ Female	please indicate the details.		Philippines				•	
6 CIVIL STATUS	☐ Single ☑ Married	17. RESIDENTIAL ADDRESS			ZONE-1 A use/Block/Lot No.			ALAJAS ST.  Street	
	☐ Widowed ☐ Separated ☐ Other/s:		CORA	ZON VILL	AGE	BR	BRGY. CARIDAD		
7. HEIGHT (m)	1.61			division/Village YBAY CITY			Barangay  LEYTE		
		7/0.0005	C	ity/Municipality			Province		
8. WEIGHT (kg)	50	ZIP CODE  18. PERMANENT ADDRESS		6521 ZONE-1			ALAJAS ST.		
9. BLOOD TYPE	0+	10. PERIMANENT ADDRESS	Нои	use/Block/Lot No.			Street		
10. GSIS ID NO.	2004860748		Sul	ubdivision/Village			RGY. CARIDAD  Barangay		
11. PAG-IBIG ID NO.	9132-8905-5202						LEYTE Province		
12. PHILHEALTH NO.	12-051265656-6	ZIP CODE		6521					
13. SSS NO.	06-32447394-8	19. TELEPHONE NO.		NONE					
14. TIN NO.	315-443-851	<b>-851</b> 20. MOBILE NO.			1772				
15. AGENCY EMPLOYEE NO.	00697	21. E-MAIL ADDRESS (if any)	g	gdeevc@g	mail.com				
II. FAMILY BACKGROUND									
22. SPOUSE'S SURNAME	MONTAJES		23. NAME of CHILDREN (Write full name and list all)				DATE OF BIRTH (mm/dd/yyyy)		
FIRST NAME	GIEBERT	NAME EXTENSION (JR., SR) N/A	VAÑARIE GAYLE GALVEZ M		MONTAJES	10/2	2/2023		
MIDDLE NAME	LUNGAY								
OCCUPATION	OFFICE CLERK								
EMPLOYER/BUSINESS NAME	VISAYAS STATE UNIVERSITY-MAIN	CAMPUS							
BUSINESS ADDRESS	VISCA, BAYBAY CITY, 6521 LEYTE								
TELEPHONE NO.	(053) 565 0600								
24. FATHER'S SURNAME	GALVEZ	Turne systematon (ID, op) M/A							
FIRST NAME	SAMUEL	NAME EXTENSION (JR., SR) <b>N/A</b>							
MIDDLE NAME	DOTAROT								
25. MOTHER'S MAIDEN NAME	GENITA MURILLO CORDERO								
SURNAME	CORDERO								
FIRST NAME	GENITA								
MIDDLE NAME	MURILLO			(Co	ontinue on se	parate sheet if neces	sary)		
III. EDUCATIONAL BACKGR	ROUND		_		_			SCHOLARSHIP/	
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGRE (Write in full)	EE/COURSE	PERIOD OF A	To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	ACADEMIC	
ELEMENTARY	VISCA FOUNDATION ELEMENTARY SCHOOL	PRIMARY EDUCA	ATION	1999	2005	N/A	2005	2ND HONORABLE MENTION	
SECONDARY	VISAYAS STATE UNIVERSITY LABORATORY HIGH SCHOOL	нідн ѕснос	 )L	2005	2009	N/A	2009	WITH HONORS	
VOCATIONAL / TRADE COURSE	N/A								
COLLEGE	UNIVERSITY OF SAN CARLOS	BACHELOR OF SCI MANAGEMENT ACC		2009	2013	N/A	2013	N/A	
GRADUATE STUDIES	N/A								

SIGNATURE

							_		_
	ERVICE ELIG			0.77				LICENSE (if ap	onlicable)
	SPECIAL LA	1080 (BOARD/ BAR) UNDER WS/ CES/ CSEE	RATING (If Applicable)	DATE OF EXAMINATION /	PLACE OF EXAMINAT	ION / CONFERM	MENT	NUMBER	Date of
BAF	RANGAY ELIGIBIL	ITY / DRIVER'S LICENSE	(II 7 ppilodolo)	CONFERMENT	CONFERMENT  UNIVERSITY OF CEBU,		NUMBER	Validity	
CAREE	R SERVICE	- PROFESSIONAL	81.28%	4/14/2013	SANCIANGKO S		TY	13-121973	05/27/ 2013
			(Con	tinue on separate sheet	if necessary)				
V. WORK E	XPERIENCE		(00)	amue on separate sneet	i necessary)				
(Include priva	ate employmer	nt. Start from your recent	t work) Description	of duties should be	indicated in the attached	Work Experi			
	ISIVE DATES m/dd/yyyy)	POSITION T	ITLE	DEPARTMENT / AG	ENCY / OFFICE / COMPANY	MONTHLY	SALARY/ JOB/ PAY GRADE (if	STATUS OF	GOV'T
From	То	(Write in full/Do not	abbreviate)		I/Do not abbreviate)	SALARY	applicable)& STEP (Format "00-0")/ INCREMENT	APPOINTMENT	SERVICE (Y/ N)
9/10/2021	PRESENT	INTERNAL AUDITIN	G ASSISTANT	LOCAL GOVERNI	MENT UNIT OF BAYBAY	19,744.00	SG 8	PERMANENT	YES
				LOCAL GOVERNI	CITY MENT UNIT OF BAYBAY				
2/16/2016	9/9/2021	ADMINISTRATIVE AIL		LOCAL GOVERNM	CITY MENT UNIT OF BAYBAY	13,914.00	SG 4	PERMANENT CONTRACTUA	YES
2/2/2015	2/15/2016	JOB ORDER (INTERNA	AL AUDIT STAFF)		CITY MENT UNIT OF BAYBAY	5,000.00	N/A	L	YES
1/20/2015	1/30/2015	JOB ORDER (ACCOL	JNTING STAFF)		CITY	5,000.00	N/A	CONTRACTUA L	YES
10/1/2013	2/15/2014	ACCOUNTING ST	TAFF (HOS)	VIRGINI	A FOOD, INC.	9,000.00	N/A	PROBATIONAR Y	NO
			(Con	tinue on separate sheet	if necessary)				
SIGNA	TURE	(	a Contact		DATE		Februa	ry 7, 2024	
			<del></del>					S FORM 212 (Revised 20	117) Dogo 2 of /

/I. VOLUNTARY WORK OR INVOLVEMENT I	N CIVIC / NON-GOVERNMENT	PFOPLE/V	OI LINTARY O	RGANIZATION	1/\$		
				ROANIZATION	73		
29. NAME & ADDRESS OF OF (Write in full)			'E DATES d/yyyy) To	NUMBER OF HOURS		POSITION / NATURE OF WORK	
ASSOCIATION OF GOVERNMENT INTERNAL AUDITORS (AGIA), INC UNIT 402 MERCHANT SQUARE CONDOMINIUM, 1386 E. RODRIGUEZ SR. AVENUE COR. MABOLO ST. NEW MANILA, QUEZON CITY 1102			PRESENT	N/A		MEMBER	
BAYBAY LOCAL GOVERNMENT EMPLOYEE'S ASSOCIATION - BAYBAY CITY, LEYTE			PRESENT	N/A		MEMBER	
R.B. CATACUTAN AND ASSOCIATES 3 E.L., OSMEÑA BLDG., PELAEZ ST., CEBU CITY			2/4/2013	200	;	STUDENT INTERN BOOKKEEPER	
, , , , , , , , , , , , , , , , , , , ,							
II. LEARNING AND DEVELOPMENT (L&D)	INTERVENTIONS/TRAINING PR		TENDED				
tart from the most recent L&D/training program and include	e only the relevant L&D/training taken for th			/Executive/Manage	rial positions)	1	
30. TITLE OF LEARNING AND DEVELOPMENT INTE (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)	
COA GUIDELINES AND PROCEDURES: ONE-TI		From	То				
LANT, AND EQUIPMENT (PPE) ACCOUNT BAL INSTITUTIONS VIA 2	ANCES FOR ALL GOVERNMENT	6/6/2023	6/7/2023	6	N/A	CENTER FOR GLOBAL BEST PRACTICES	
2nd LOCAL GOVERNMENT UNIT (LGUs) FORU THE LGUs: A PILLAR OF GOOD GOV	/ERNANCE VIA ZOOM	8/18/2022	8/18/2022	5	N/A	ASSOCIATION OF GOVERNMENT INTERNA AUDITORS (AGIA), INC.  ASSOCIATION OF GOVERNMENT INTERNA	
2ND GOVERNMENT INTERNAL AUDITOR RULES AND REGULATIONS ON SETTLEMEN		6/8/2022	6/10/2022	12	N/A	AUDITORS (AGIA), INC.	
REVISED RULES OF PROCEDUR OPERATIONS AND MANAGE	E OF COA (RRPC)	8/19/2019 12/11/2018	8/20/2019 12/13/2018	16 24	N/A N/A	COMMISSION ON AUDIT (COA) R08  ASSOCIATION OF GOVERNMENT INTERNA	
ORIENTATION ON PROCUREN		8/14/2018	8/14/2018	8	N/A	AUDITORS (AGIA), INC. DEPARTMENT OF BUDGET AND	
GOVERNMENT PROCUREMENT REFORM ACT (R.A.9184) AND ITS REVISED IRR			11/24/2017	24	N/A	MANAGEMENT (DBM)  ASSOCIATION OF GOVERNMENT INTERNA	
AND UPDATES  LAWS AND RULES ON GOVERNME		10/3/2017	10/6/2017	32	N/A	AUDITORS (AGIA), INC.  COMMISSION ON AUDIT (COA) R08	
INTERNAL CONTROL ST	RUCTURE	9/19/2017	9/22/2017	32	N/A	COMMISSION ON AUDIT (COA) R08	
III. OTHER INFORMATION	(Con	tinue on separate s	sheet if necessary)				
31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)  NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)  MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)						
BASIC AND GENERAL ACCOUNTING		ASSOCIATION OF GOVERNMENT INTERN AUDITORS (AGIA), INC.					
WRITTEN ENGLISH	BAYBAY LOCAL GOVERNMENT EMPLOYEES ASSOCIATION (Balg						
COMPUTER LITERACY	JUNIOR PHILIPPINE IN ACCOUNTANTS						
SABBATH SCHOOL SECRETARY AT CARIDAD SEVENTH DAY ADVENTIST (SDA) SONG LEADER/CHORISTER AT CARIDAD SEVENTH DAY ADVENTIST (SDA) CHILICOL							
SEVENTH DAY ADVENTIST (SDA) CHURCH READING VARIETY OF BOOKS							
MUSIC E.G. SINGING, ARTS E.G. LAYOUT DESIGNING							
	(Con	tinue on separate s	sheet if necessary)		ATE	February 7, 2024	
SIGNATURE	/ Necrollan					- FEDILIARY / /U/A	

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 - Care	eer Employees)?	YES [	✓ NO			
		If YES, give details					
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			
	b. Have you been climinally charged before any court:		If YES, give details				
		Status of Case/s:					
36.	Have you ever been convicted of any crime or violation of an	y law, decree, ordinance or regulation by	☐ YES	☑ NO			
	any court or tribunal?		If YES, give details				
37.	Have you ever been separated from the service in any of the	following modes: resignation, retirement,	☐ YES	✓ NO			
	dropped from the rolls, dismissal, termination, end of term, fi	nished contract or phased out (abolition)	If YES, give details				
	in the public or private sector?						
38.	a. Have you ever been a candidate in a national or local elec	tion held within the last year (except	☐ YES	✓ NO			
	Barangay election)?		If YES, give details	<del></del>			
	b. Have you resigned from the government service during the	e three (3)-month period before the last	☐ YES	☑ NO			
	election to promote/actively campaign for a national or local of		If YES, give details:				
39.	Have you acquired the status of an immigrant or permanent	resident of another country?					
	, ,	,	☐ YES ☑ NO If YES, give details (country):				
				(222),			
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag	na Carta for Disabled Persons (RA 7277):					
	and (c) Solo Parents Welfare Act of 2000 (RA 8972), please	, , ,					
a.	Are you a member of any indigenous group?		☐ YES	✓ NO			
			If YES, please specify:				
b.	Are you a person with disability?		☐ YES ☑ NO				
			If YES, please specify ID No:				
C.	Are you a solo parent?		☐ YES ☑ NO				
			If YES, please specify	ID No:			
41.	REFERENCES (Person not related by consanguinity or affinity to applicant	t /appointee)					
	NAME	ADDRESS	TEL. NO.				
		BRGY. GAAS, BAYBAY CITY, 6521					
	GRACE J. TRIPOLI	LEYTE	0942 335 4624				
	MERALYN R. LEBANTE	VISCA, BAYBAY CITY, 6521 LEYTE	0918 636 4693				
	CARL NICOLAS C. CARI	BRGY. CANDADAM, BAYBAY CITY,	0949 112 2752				
42		6521 LEYTE					
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 represent	——————————————————————————————————————	•	DECA VARIÑA CRIVEZ MONTAJES			
	agree that any misrepresentation made in this docu	ment and its attachments shall cause	e the filing of	DECA VARINAI GALVEZ MONIAJES			
	administrative/criminal case/s against me.						
_	average at leaved ID and						
	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)  LEASE INDICATE ID Number and Date of Issuance	Od of the					
	overnment Issued ID: LGU BAYBAY ID						
l ⊢	200 5711 5711 15						
	//License/Passport No.: 00697	Signature (Sign inside the bo					
D	Date/Place of Issuance: BAYBAY CITY, LEYTE February 7, 2024  Date Accomplished			Right Thumbmark			
Ľ							
	SUBSCRIBED AND SWORN to before me this	, affiant exhibit	ting his/her validly issued	government ID as indicated above.			
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	_	h					