CS Form No. 212									
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.									
	TO FILLING OUT THE PERSONAL DATA SHE and use separate sheet if necessary. Indicate				1. CS ID No.		(Do not fill up. I	For CSC use only)	
I. PERSONAL INFORMATIO	The same of the sa								
2. SURNAME	VERECIO								
FIRST NAME	MYRA NAME EXTENSION (JR, SR)								
MIDDLE NAME									
DATE OF BIRTH (mm/dd/yyyy)	1/5/1996 16. CITIZENSHIP			pino Dual Citizenship					
(111111000)))))			□ by birth				by naturali:	zation	
4. PLACE OF BIRTH	TOLOSA LEYTE	If holder of dual citizer					country:		
5. SEX	☐ Male ☐ Female	please indicate the de	etails.					•	
6 CIVIL STATUS	☑ Single ☐ Married	17. RESIDENTIAL ADDRESS	- Uni	Ususa/Disak/Lat Na			ZONE 9A		
	☐ Widowed ☐ Separated ☐ Other/s:		House/Block/Lot No.			Street TELEGRAFO			
7. HEIGHT (m)	1.48		Su	bdivision/Villag TOLOSA	в	Barangay LEYTE			
8. WEIGHT (kg)	42	ZIP CODE	С	ity/Municipality		6503	Province		
		18. PERMANENT ADDRESS				0303	ZONE 9A		
9. BLOOD TYPE	N/A	10.1 ENIMATERY ADDITECT	Hou	ise/Block/Lot N	lo.		Street		
10. GSIS ID NO.	N/A		Su	bdivision/Villag		TELEGRAFO Barangay			
11. PAG-IBIG ID NO.	1211-6969-2877		С	TOLOSA City/Municipality			LEYTE Province		
12. PHILHEALTH NO.	13-251026142-2	ZIP CODE	6503						
13. SSS NO.	06-3833210-8	19. TELEPHONE NO.	N/A						
14. TIN NO.	335-062-656	20. MOBILE NO.	09272823007						
15. AGENCY EMPLOYEE NO. N/A		21. E-MAIL ADDRESS (if any)		myraverecio@gmail.com					
II. FAMILY BACKGROUND									
22. SPOUSE'S SURNAME	N/A		23. NAME of CH	NAME of CHILDREN (Write full name and list all) DATE C			DATE OF BIR	TH (mm/dd/yyyy)	
FIRST NAME	N/A	NAME EXTENSION (JR., SR)	NA NA						
MIDDLE NAME	N/A								
OCCUPATION	N/A								
EMPLOYER/BUSINESS NAME	N/A								
BUSINESS ADDRESS	N/A								
	TELEPHONE NO. N/A								
24. FATHER'S SURNAME	VERECIO	NAME EXTENSION (JR., SR)							
FIRST NAME	AME CRISENCIO								
MIDDLE NAME	MORING								
25. MOTHER'S MAIDEN NAME	DAVOS								
SURNAME	DAYOC								
FIRST NAME									
MIDDLE NAME III. EDUCATIONAL BACKG		(Continue on separate sheet if necessary)							
				project or	TTTUD I LOT	HIGHEST LEVEL/		SCHOLARSHIP/	
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGRE (Write in full)	E/COURSE	From	To	UNITS EARNED (if not graduated)	YEAR GRADUATED	ACADEMIC HONORS RECEIVED	
ELEMENTARY	TELEGRAFO ELEMENTARY SCHOOL	NA		6/1/2002	3/31/2008		2008	N/A	
SECONDARY	TOLOSA NATIONAL HIGH SCHOOL	N/A		6/1/2008	3/31/2012		2012	ACHIEVER	
VOCATIONAL / TRADE COURSE	N/A	N/A		N/A	N/A		N/A	N/A	
COLLEGE	ST. PAUL SCHOOL OF PROFESSIONAL STUDIES	BS ACCOUNTING TECHNOLOGY		6/1/2012	3/31/2016		2016	N/A	
GRADUATE STUDIES	STUDIES ASIAN DEVELOPMENT FOUNDATION SCHOOL SUPPLEMENTAL			10/1/2018	3/31/2019		2019	N/A	
	/	ontinue on separate sheet if nece	essary)						

	SERVICE ELI	A 1080 (BOARD/ BAR) UNDER	DATING	DATE OF				LICENSE (if a	applicable)
SPECIAL LAWS/ CES/ CSEE RATIN		RATING (If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINA	TION / CONFE	RMENT	NUMBER	Date of	
DATAMONT ELIGIBILITY DRIVER'S LICENSE								Validity	
LICENSED PROFESSIONAL TEACHER		78.6	9/27/2021	LEYTE NATIONA	AL HIGH SC	HOOL	1896893	1/5/25	
			(Con	finue on separate sheet if	nocessand				
	EXPERIENCI	E ent. Start from your recen				ed Work Ex	perience shee	t.	
From	LUSIVE DATES (mm/dd/yyyy)	POSITION TI (Write in full/Do not a			ICY / OFFICE / COMPANY to not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOVT SERVICE (Y/N)
16/2017	4/18/2022	ORDER & BILLING OF	North American Charles of the Contract of the	RRC DISTR	BUTOR'S INC.	9000.00	INGREMENT	RESIGNED	
1/2017	8/1/2017	STAFF BRANDBANK AGENT/D		FREIGHT PROCES SOLUT	7000.00		RESIGNED		
SIGN	ATURE) (Cont	inue on separate sheet if n	ecessary) DATE		05/30/2022	ORM 212 (Revised 20:	

VI. VOLUNTARY WORK OR INVOLVEMENT	IN CIVIC / NON-GOVERNMENT	/PEOPLE/	VOLUNTARY	ORGANIZATIO	N/S		
29. NAME & ADDRESS OF ORGANIZATION (Write in full)		INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK		
(AANGE BI LOW)			From To				
N/A					N/A		
		1					
		-	+	+			
		-	-				
VII. LEARNING AND DEVELOPMENT (L&D)	(Col INTERVENTIONS/TRAINING P	ntinue on separat ROGRAMS A	e sheet if necessa TTENDED	ary)			
		INCLUSIVE DATES OF ATTENDANCE			Type of LD		
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)		(mm/dd/yyyy)		NUMBER OF HOURS	(Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
THE MANAGEMENT TO ANNOUNCE A MADRICULAR		From To				"ROMEO B. CARBONEL JR RBC-MDC	
TIME MANAGEMENT TRAINING & WORKSHOP		5/11/2018	5/11/2018	8.0	ADMINISTRATIVI	CORPORATION PRESIDENT	
A			1				
			1				
		+	+	1			
		-	+	-			
		+	+	-			
	(Coi	ntinue on separat	e sheet if necessa	nry)			
VIII. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES	32. NON		FINCTIONS / RECO	OGNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
WATCHING MOVIES			/A			N/A	
READING BOOKS						- Art	
PLAYING BADMINTON	-						
KNOWS MICROSOFT WORD,							
EXCEL & POWERPOINT							
	//6-	ntinue on senaral	e sheet if necessa	urvi		L	
SIGNATURE	1 //	· on separat	- Arrest II necessi		ATE	5/30/2022	
	49)				CS FORM 212 (Revised 2017), Page 3 of 4	

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? b. within the fourth degree (for Local Government Unit - Care	☐ YES ☑ NO ☐ YES ☑ NO If YES, give details:						
35.	a. Have you ever been found guilty of any administrative offer	☐ YES If YES, give detai	☑ NO Is:					
	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 ar 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, en out (abolition) in the public or private sector?	YES If YES, give detai	□ NO Is: RESIGNED-CHANGE JOB					
38.	Barangay election)?	☐ YES ☑ NO If YES, give details:						
	 b. Have you resigned from the government service during the election to promote/actively campaign for a national or local 		☐ YES If YES, give deta	☑ NO iils:				
39.	Have you acquired the status of an immigrant or permanent	☐ YES ☑ NO If YES, give details (country):						
40. a. b. c.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), Are you a member of any indigenous group? Are you a person with disability? Are you a solo parent?	☐ YES ☑ NO If YES, please specify: ☐ YES ☑ NO If YES, please specify ID No: ☐ YES ☑ NO If YES, please specify ID No:						
41.	REFERENCES (Person not related by consanguinity or affinity to applicant	(/appointee)	II 123, please speci	y ID NO				
	NAME	ADDRESS	TEL. NO.					
	FLORA MAE GARRIDO	TOLOSA LEYTE	9309990780					
	ERIKA ENCINA	TANAUAN LEYTE	9274942192					
	JERRA MAE MERCADO	TOLOSA LEYTE	9501788647					
42.	42. I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I authorize the agency head/authorized representative to verify/validate the contents stated herein. I agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me.							
	overnment Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) LEASE INDICATE ID Number and Date of Issuance							
l	overnment Issued ID: PRC							
IC	VLicense/Passport No.: 1896893	iox)						
D	ate/Place of Issuance: 04/04/2022	2	Right Thumbmark					
	SUBSCRIBED AND SWORN to before me this, affiant exhibiting his/her validly issued government ID as indicated above. Person Administering Oath							
L								

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