CS Form No. 212 Revised 2017	PERSOI	NAL DAT	A SH	IEET	Г				
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.									
	and use separate sheet if necessary. Indicate N	• •			1. CS ID No.		(Do not	fill up. For CSC use only)	
I. PERSONAL INFORMATION									
2. SURNAME	LINES					NAME EXTENSION (JR	CD)		
FIRST NAME	CAINNE DOROTHY					INAME EXTENSION (JR	, SK)		
	FERRATER								
3. DATE OF BIRTH (mm/dd/yyyy)	12/27/1998	16. CITIZENSHIP	☑ Filipino ☐ Dual Citizenship ☐ by birth ☐			☐ by naturalization			
4. PLACE OF BIRTH	CAVITE	If holder of dual citizer	renship, Pls. indicate country:						
5. SEX	☐ Male ☑ Female	please indicate the de	etails.					•	
6 CIVIL STATUS	☑ Single ☐ Married	17. RESIDENTIAL ADDRESS							
	☐ Widowed ☐ Separated ☐ Other/s:	,	Hou	se/Block/Lot No	0.		Street CAMBUF		
7. UEIQUE ()	·		Sut	bdivision/Village SAMBOAN)		Barang: CEBU		
7. HEIGHT (m)	1.52 m		Ci	ity/Municipality			Provinc		
8. WEIGHT (kg)	41 kg	ZIP CODE				6027			
9. BLOOD TYPE	A+	18. PERMANENT ADDRESS	Hou	se/Block/Lot No	0.		Street		
10. GSIS ID NO.	2006157913		Sul	bdivision/Village	9		CAMBUR Barang		
11. PAG-IBIG ID NO.	121292406544			SAMBOA			CEBU		
12. PHILHEALTH NO.	08-250895049-3	ZIP CODE	City/Municipality 6027		6027	Province			
13. SSS NO.	NONE	19. TELEPHONE NO.				NONE			
14. TIN NO.	358-422-082-00	22-082-00 20. MOBILE NO.			09473532047				
15. AGENCY EMPLOYEE NO.	6098409	21. E-MAIL ADDRESS (if any)	linescainnedorothy@gmail.com						
II. FAMILY BACKGROUND									
22. SPOUSE'S SURNAME	NONE		23. NAME of CHI			list all)	DATE (OF BIRTH (mm/dd/yyyy)	
FIRST NAME		NAME EXTENSION (JR., SR)			NONE				
MIDDLE NAME									
OCCUPATION									
EMPLOYER/BUSINESS NAME									
BUSINESS ADDRESS									
TELEPHONE NO.									
24. FATHER'S SURNAME	LINES								
FIRST NAME	JOSE	JR.							
MIDDLE NAME	BIGNO								
25. MOTHER'S MAIDEN NAME									
SURNAME	FERRATER								
FIRST NAME	CONSOLACION								
MIDDLE NAME	RUDAS			(C	ontinue on se	parate sheet if neces	ssary)		
III. EDUCATIONAL BACKGR	ROUND								
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGRE (Write in full)	E/COURSE	PERIOD OF A	To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADU ATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED	
ELEMENTARY	KAMBUROY ELEMENTARY SCHOOL	PRIMARY EDUCATION		21/06/2005	29/03/2011	GRADUATED	2011	VALEDICTORIAN	
SECONDARY	TAN-AWAN NATIONAL HIGH SCHOOL	SECONDARY EDUCATION		21/06/2011	29/03/2015	GRADUATED	2015	VALEDICTORIAN	
VOCATIONAL / TRADE COURSE	NONE	NONE		NONE	NONE	NONE	NONE		
COLLEGE	CEBU NORMAL UNIVERSITY	BACHELOR OF SECONDARY MATHEMTICS	EDUCATION -	23/06/2015	23/05/2019	GRADUATED	2019	CUMLAUDE/DOST SCHOLAR	
GRADUATE STUDIES	UNIVERSITY OF THE PHILIPPINES	MASTER OF EDUCATION - M.		12/12/2020	26/04/2023	GRADUATED	2023	NONE	
SIGNATURE	4/1/20	· · · · · · · · · · · · · · · · · · ·	Josef y)		TE	00	TORED 3	1 2024	

IV. CIVIL S	SERVICE ELIG	iBILITY							
		1080 (BOARD/ BAR) UNDER	DATINO	DATE OF				LICENSE (if a	pplicable)
SPECIAL LAWS/ CES/ CSEE		RATING (If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT			NUMBER	Date of Validity	
LICENSU	JRE EXAMINAT	TION FOR TEACHERS	87.6	09/29/19	CE	CEBU			27/12/2023
	DRIVER'S I	LICENSE		06/06/2024	LTO-F	RONDA		G28-24-001631	12/27/2028
			(Co	ntinue on separate sheet	if necessary)				
	EXPERIENCE	nt. Start from your recent				Work Expe	rience sheet.		
28. INCLI	USIVE DATES mm/dd/yyyy)	POSITION TI	TLE	DEPARTMENT / AGI	ENCY / OFFICE / COMPANY I/Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/	STATUS OF APPOINTMENT	GOV'T SERVICE
From	То	,	,	,	,		INCREMENT		(Y/ N)
10/25/2022	PRESENT	TEACHE			EBU PROVINCE OGICAL UNIVERSITY-	28512.00	SG 11	REGULAR	Y
09/07/2020	07/08/2022	PART-TIME FA		MALABUY	OC EXTENSION	12000.00	NA NA	PART-TIME	Y
02/02/2022	06/03/2022	PART-TIME FA			L UNIVERSITY - MAIN SLISH SCHOOL CEBU	15000.00 8500.00	NA NA	PART TIME CONTRACTUAL	Y N
0112312013	03/13/2020	LUL ILMO	TEK .	UNIVERSE LITS	ILION OCHOOL OLDO	0000.00	NA	CUNIKACIOAL	14
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SIGN	IATURE	L	offlynes (co	ntinue on separate sheet	DATE		OCTOBER 31, 2	024	

VI. VOLUNTARY WORK OR INVOLVEMENT I	T IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY O			RGANIZATION	I/S			
29. NAME & ADDRESS OF ORGANIZATION (Write in full)			VE DATES dd/yyyy) To	NUMBER OF HOURS		POSITION / NATURE OF WORK		
NONE		From						
		tinue on separate))				
VII. LEARNING AND DEVELOPMENT (L&D) I	NTERVENTIONS/TRAINING PR	OGRAMS AT	TENDED					
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)			INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)		
FIVE-DAY MID-YEAR PERFORMANCE REVIEW AND I		01/24/2024	To 01/30/2024	40 HOURS	TECHNICAL	DEPARTMENT OF EDUCATION		
BASED IN-SERVICE TRAINING (INSE GSP BASIC COUR:	•	09/08/2023	09/10/2023	24 HOURS	MANAGERIAL	GIRL SCOUTS OF THE PHILIPPINES		
FIVE-DAY TEACHER INDUCTION		02/06/2023	02/10/2023		MANAGERIAL	DEPARTMENT OF EDUCATION		
ORIENTATION ON THE MANUAL OF INSTRU		01/13/2023	01/13/2023		MANAGERIAL	DEPARTMENT OF EDUCATION		
10-DAY INTERNATIONAL ONLINE TRAINING PROGRA			09/10/2021	80 HOURS	TECHNICAL	PHILIPPINE CONTINUING PROFESSIONAL		
7-DAY GENERAL EDUCATION CURRICULUM TRAININ	IG WORKSHOP ON MATHEMATICS IN		12/15/2020	-	MANAGERIAL	DEVELOPMENT CEBU TECHNOLOGICAL UNIVERSITY		
49TH NATIONAL AND 10TH INTERNATIONAL PAFTS		10/09/2020	10/10/2020		MANAGERIAL	PHILIPPINE ASSOCIATION FOR TEACHERS		
WEBINAR						& EDUCATORS (PAFTE), INC.		
	(Con	tinue on separate	sheet if necessary	<u> </u>				
VIII. OTHER INFORMATION								
31. SPECIAL SKILLS and HOBBIES	32. NON-	-ACADEMIC DISTII (Writ	NCTIONS / RECOG e in full)	GNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)		
COMPUTER LITERATE	NONE							
COOKING								
	(Con	tinue on separate	sheet if necessary	<i>'</i>)				
SIGNATURE	cofflines			D	ATF	OCTOBER 31, 2024		

	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 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 any court or tribunal?	☐ YES ☑ NO If YES, give details:					
37.	Have you ever been separated from the service in any of the dropped from the rolls, dismissal, termination, end of term, find in the public or private sector?	-	✓ YES □ NO If YES, give details: FINISHED CONTRACT				
38.	a. Have you ever been a candidate in a national or local election)?	ction held within the last year (except	☐ 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 of	☐ 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. a.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag and (c) Solo Parents Welfare Act of 2000 (RA 8972), please	<u> </u>					
b.	Are you a member of any indigenous group? Are you a person with disability?	☐ YES ☑ NO If YES, please specify: ☑ YES ☐ NO					
c.	Are you a solo parent?	If YES, please specify ID No: ☐ YES ☑ NO If YES, please specify ID No: ☐ O7-2240-010-0000227 ☐ NO					
41.	REFERENCES (Person not related by consanguinity or affinity to applicant	/appointee)	, , ,				
	NAME	ADDRESS	TEL. NO.				
	MARY ANN L. VILLAGANAS	POBLACION, SAMBOAN, CEBU	9068740846				
	ELLANIE C. TEMPLE	MOALBOAL, CEBU	9613304067				
	BARBARA B. COMISION	MALABUYOC, CEBU	9368336823				
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. agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me.							
P	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) LEASE INDICATE ID Number and Date of Issuance overnment Issued ID: PRC	,					
Ιŀ	overnment Issued ID: PRC //License/Passport No.: 1854369						
╽├	ate/Place of Issuance: 01/17/20 / CEBU	ox)	Right Thumbmark				
SUBSCRIBED AND SWORN to before me this, affiant exhibiting his/her validly issued government ID as indicated above.							
	COSCOLUSED AND OWN ONLY TO REDUIS THE THIS	, amant exhibiti	my morner validity issued	government is as indicated above.			
		h					