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 READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM. 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) 2. SURNAME Barrientos NAME EXTENSION (JR., SR) FIRST NAME Chennie MIDDLE NAME Villanueva 3. DATE OF BIRTH January 22,2025 16. CITIZENSHIP ✓ Filipino (mm/dd/yyyy) Dual Citizenship by birth by naturalization 4. PLACE OF BIRTH Baybay City Leyte If holder of dual citizenship, Pls. indicate country: please indicate the details. 5. SEX Male √ Female ✓ Single Married 17. RESIDENTIAL ADDRESS 6 CIVIL STATUS Widowed Separated House/Block/Lot No. Street Palhi Other/s: Subdivision/Village Barangay Leyte 7. HEIGHT (m) 155 cm City/Municipality Province 55 8. WEIGHT (kg) ZIP CODE 6521 18. PERMANENT ADDRESS 9. BLOOD TYPE House/Block/Lot No. Palhi 10. GSIS ID NO. Subdivision/Village Barangay Baybay Levte 11. PAG-IBIG ID NO. Citv/Municipality Province 12. PHILHEALTH NO. ZIP CODE 6521 13. SSS NO. 19. TELEPHONE NO. 14. TIN NO. 09515119812 20. MOBILE NO. 15. AGENCY EMPLOYEE NO. 21. E-MAIL ADDRESS (if any) chenniebarrientos4@gmail.com II. FAMILY BACKGROUND 22. SPOUSE'S SURNAME 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO. 24. FATHER'S SURNAME **Barrientos** NAME EXTENSION (JR., SR) FIRST NAME MIDDLE NAME Oracion 25. MOTHER'S MAIDEN NAME SURNAME **Barrientos**

FIRST NAME	Rowena							
MIDDLE NAME	Villanueva		(Continue on se			eparate sheet if necessary)		
III. EDUCATIONAL BACKGR	III. EDUCATIONAL BACKGROUND							
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)		RSE PERIOD OF ATTENDANCE		HIGHEST LEVEL/ UNITS YEAR EARNED GRADUATED		
				From	То	(if not graduated)		RECEIVED
ELEMENTARY	Palhi Elementary School			0/0/2009	0/0/2015		0/0/2015	1st Honorable Mention
SECONDARY	CONDARY Baybay National High School			0/0/2015	0/0/2019		0/0/2019	
VOCATIONAL /	Accountancy, Business and Management			0/0/2019	0/0/2021		0/0/2021	With Honors
COLLEGE	Visayas States University	Bachelor of Science in Forestry		0/0/2021	0/0/2025		0/0/2025	
GRADUATE STUDIES								
Continue on separate sheet if necessary)								
SIGNATURE	SIGNATURE			DATE			June 20,2025	
	- 01					CS	FORM 212 (Revise	ed 2017), Page 1 of 4

IV. CIVIL SERVICE ELIGIBILITY								
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE		RATING	DATE OF EXAMINATION /	PLACE OF EXAMINATION / CONFERMENT			LICENSE (if applicable) Date of	
	LITY / DRIVER'S LICENSE	(If Applicable)	CONFERMENT	T B TOE OF EXTERNITY	HOIT/ GOIN EI	WEITI	NUMBER	Validity
		(Cor	 ntinue on separate sheet	if necessary)				
V. WORK EXPERIENCE (Include private employment)		nt work) Descriptio	on of duties should l	be indicated in the attach	ed Work Exp	perience shee	t.	
28. INCLUSIVE DATES (mm/dd/yyyy)	POSITION TITLE		DEPARTMENT / AGENC	Y / OFFICE / COMPANY	MONTHLY	SALARY/ JOB/ PAY GRADE (if	STATUS OF	SERVICE
From To	abbreviate	(Write in full/Do not e)		(Write in not abbreviate)	SALARY	applicable)& STEP (Format "00-0")/ INCREMENT	APPOINTMENT	
SIGNATURE		(Con	ntinue on separate sheet	if necessary) DATE				

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S						
29. NAME & ADDRESS OF ORGANIZATION (Write in full)		(mm/dd/www)		NUMBER OF HOURS		POSITION / NATURE OF WORK
		From	То			
VII. LEARNING AND DEVELOPMENT (L&D)		tinue on separate s ROGRAMS AT				
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENT	INCLUSIVE DATES OF ATTENDANCE Type of LD		Type of LD (Managerial/	CONDUCTED/ SPONSORED BY		
(Write in f		(mm/c	id/yyyy) To	NUMBER OF HOURS	Supervisory/ Technical/etc)	(Write in full)
		From	10			
	(Con	tinue on separate s	sheet if necessary)			
VIII. OTHER INFORMATION						MEMBERSHIP IN ASSOCIATION/ORGANIZATION
31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RE	COGNITION	(Write in full)			33. (Write in
(Continue on separate sheet if necessary)						
SIGNATURE	Con	uo on separate s	occii necessary)	DA	ATE	

_							
34.	Are you related by consanguinity or affinity to the appointing						
	chief of bureau or office or to the person who has immedia Bureau or Department where you will be apppointed,	te supervision over you in the Office,					
	a. within the third degree?		☐ YES ☑ NO				
	b. within the fourth degree (for Local Government Unit - Ca	areer Employees)?	☐ YES ✓ NO				
			If YES, give details:				
35.	a. Have you ever been found guilty of any administrative o	ffense?					
00.			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						
00.	by any court or tribunal?	. , ,	☐ YES ☑ NO If YES, give details:				
37.	Have you ever been separated from the service in any of the		☐ YES ☑ NO				
	retirement, dropped from the rolls, dismissal, termination, ε out (abolition) in the public or private sector?		If YES, give details:				
38.	a. Have you ever been a candidate in a national or local el Barangay election)?	ection held within the last year (except	☐ YES ☑ NO If YES, give details:				
	b. Have you resigned from the government service during election to promote/actively campaign for a national or local	_					
20	Have you acquired the status of an immigrant or permaner		If YES, give details:				
39.	Trave you acquired the status of all illining and of permaner	it resident of another country:	☐ YES ☑ NO If YES, give details (country):				
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972						
a.	Are you a member of any indigenous group?		☐ YES ☑ NO				
b.	Are you a person with disability?		If YES, please specify:				
J.	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:				
			II 1 L3, please specify ID No.				
41.	REFERENCES (Person not related by consanguinity or affinity to applican	1					
	NAME	ADDRESS	TEL. NO.				
42.	I declare under oath that I have personally accomplishe	d this Personal Data Sheet which is a tru	ue, correct and				
	complete statement pursuant to the provisions of pertin Philippines. I authorize the agency head/authorized repres	•					
	I agree that any misrepresentation made in this doc						
	administrative/criminal case/s against me.						
D	OVERTIMENT ISSUED TO (I.E. PASSPORT, GSIS, SSS, PRC, DIIVELS LICEISE, etc.)	00					
Je.	PLEASE INDICATE ID Number and Date of	V.					
G	overnment Issued ID: National ID	MPP					
ID	//License/Passport No.: 7385-1927-0950-1761	Signature (Sign inside the bo	0x) 20 2025				
Da	ate/Place of Issuance: September 13,2021	June Date Accomplished	Right Thumbmark				
	SUBSCRIBED AND SWORN to before me this, affiant exhibiting his/her validly issued government ID as indicated above.						
	L						
1		Person Administering Oat	h				