CS Form No. 212	_	-								
Revised 2017		MODULA	-000	DATE OF	DALLA		ARD/BAF			
	PERSONAL DATA SHEET									
WARNING: Any misrepresentati	ion made in t	he Personal D	ata Sheet and the	Work Experience Sheet she	all cause the fil	ing of adm	inistrative/	criminal case/s ag	gainst the per	rson
concerned. READ THE ATTACHED GUIDE 1	TO FILLING O	UT THE PER	SONAL DATA SHE	ET (PDS) BEFORE ACCOM	PLISHING THE	PDS FORM	1.			
Print legibly. Tick appropriate boxes (							1. CS ID No.		(Do not fill up. F	or CSC use only
. PERSONAL INFORMATION										
2. SURNAME	PACATE									
FIRST NAME	LOVELY JOY					NAME EXTENSION (JR., SR)				
MIDDLE NAME	MANDRAS									
3. DATE OF BIRTH (mm/dd/yyyy)		12/17/2002	2	16. CITIZENSHIP	✓ Filipino □ Dual Citizenship					
(					✓by birth		✓ by birth [	by naturalization		
4. PLACE OF BIRTH		BAYBAY C	ITY	If holder of dual citize			Pls. indicate co	e country:		
5. SEX	☐ Male		✓ Female	please indicate the o	details.	tails.			· (1, 000) (1, 000) (1, 000)	
6 CIVIL STATUS	Single		Married	17. RESIDENTIAL ADDRES		House/Block/Lot No.			CENTRO Street	
STATUS OF GOVT	☐ Widowe		Separated	DEPARTMENT / AGEN				9	MAYBOG Barangay LEYTE	
7 UEICUT (m)	GRADE (	1.63		COMPAN		vision/Villac		ihW) —		
7. HEIGHT (m)	leldesiinge		(ataiverdd	(Write in fulfilio not		Municipality			Province	
8. WEIGHT (kg)	AW	55		AW ZIP CODE		A	M	6521	NA	AM
9. BLOOD TYPE		N/A		18. PERMANENT ADDRES		/Block/Lot N	Vo.		CENTRO Street	
10. GSIS ID NO.		N/A			Subdi	vision/Villag	70		MAYBOG Barangay	
11. PAG-IBIG ID NO.		121352139	441		BA	YBAY CITY			LEYTE	
2. PHILHEALTH NO.		13-2503625	11-7	ZIP CODE	City/	Municipality	/	6521	Province	
	13-250362511-7									
3. SSS NO.		06-458747	4-3	19. TELEPHONE NO.		N/A		N/A		
14. TIN NO.		661-453-3	39	20. MOBILE NO.	0948-9422		8-9422-920			
15. AGENCY EMPLOYEE NO.		N/A		21. E-MAIL ADDRESS (if any)		lovelypacate07@gmai		te07@gmail.c	om	
I. FAMILY BACKGROUND										
22. SPOUSE'S SURNAME			N/A		23. NAME of C	HILDREN	(Write full	name and list all)		Id/vvvv)
FIRST NAME		N/A		NAME EXTENSION (JR., SR)		N/A			N/A	
MIDDLE NAME			N/A							
OCCUPATION			N/A							
EMPLOYER/BUSINESS NA	1		N/A							
BUSINESS ADDRESS			N/A							
TELEPHONE NO.			N/A							
24. ATHER'S SURNAME			PACATE							
FIRST NAME		MANUE	L	JR.						
MIDDLE NAME			BATINO							
25. MOTHER'S MAIDEN NAME										
SURNAME			MANDRAS							
FIRST NAME	Janes -		MA. JURGIN							
MIDDLE NAME			VELARDE		(Continue on separate sheet if		arate sheet if ne	cessary)		
III. EDUCATIONAL BACKGRO	DUND									
26. LEVEL		NAME OF SO (Write in f		BASIC EDUCATION/DEGF (Write in full)		EE/COURSE ATTENDANCE LEVEL/ UNITS		UNITS	YEAR GRADUA TED	SCHOLAR HIP/ ACADEMI
ELEMENTARY	MAYBO	G ELEMENT	ARY SCHOOL	ELEMENTARY		From 2008	To 2014	GRADUATED GRADUATED	2014	FOURTH HONOR
SECONDARY	DAMULA	LAAN NATIONAL HIGH SCHOOL		SENIOR HIGH SCHOOL		2014	2020	GRADUATED	2020	WITH
VOCATIONAL / TRADE COURSE		N/A		N/A		N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY		BACHELOR OF SEC		2020	2024	GRADUATED	2024	CUM LAUI	

N/A

N/A

N/A

N/A

N/A

**EDUCATION - SOCIAL STUDIES** 

N/A

**GRADUATE STUDIES** 

SIGNATURE

7. CARE	ER SERVICE/ R NDER SPECIAL	A 1080 (BOARD/ BAR)	RATING	DATE OF	DI ACE CE E	IATION :		LICENSE (if a	applicable
UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE PRESIDENTIAL DECREE NO. 907 - HONOR			(If Applicable) EXAMINATION / CONFERMENT		PLACE OF EXAMIN	NUMBER	Date Valid		
PRESIDI	GRADU		ceuse (A/Willing of	10/22/2024		CIVIL SERVICE COMMISSION REGION VIII			N/A
For CSC ase o	qu fit ton dCl)	0KM. [1:081010]	JSHING THE PDS F REVIATE.	9 BEFORE ACCOMP rolicable, DO NOT ABI	ONAL DATA SHEET (PD cosessiy, Indicate NIA if not	OF THE PERSO	TO FILLING O	TTA CHED GUIDE at appropriate lioxes	O TWE I
(5	ENSION (JR., SR	NAME EXT					PACATE LOVELY JO	BM4	URNAN
						1	MANDRAS	NAME	IRST N
	qirlan	lipino Dual Otize	10	ZENSHIP	16. CI	12/17/2002		FINA	0374
noiteelle	h Stevenstuden sate country:	Cipu hitt	aidá	holder of dual citizen		DO VACWACE	+	VYY)	Abbhma
				ue on separate sheet		BAYBAY CI		F BIRTH	LACE (
	(PERIENCE	Ctart from your recent							
8. INCLUS	SIVE DATES	Start from your recent			AGENCY / OFFICE /		SALARY/	STATUS OF	GOV
From	n/dd/yyyy) To	(Write in full/Do not		COI	MPANY lo not abbreviate)	MONTHLY SALARY	JOB/ PAY GRADE (if	APPOINTMEN T	SERV
N/A	N/A	AVA 6521	ESURIOR VIOLE	3000 015	N/A	N/A	applicable)&	/m/)	(Y/N
	Street		Mouse/Block/	DOTTOGA THEMANO	7.01	AW	NIA	N/A	N/A
	Baranday		Subdivision			AIR		,OV	OI SIS
	Province		SAVRAY (CllyMunic)			PI CINCOINT		JOH UIT	nei-ea
		1200		3000 AIZ	11	14700007-01		LIMNO	UHUIR
		Alli		CEPTIONE NO.	er er	F F100P-80			UM GE
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Alli		AW		EXTENSION (JR., SR)	NAM	AW			FIRST
					AW			NAME	MIDDL
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					AW			ONE NO.	H92.IST
					PACATE			SURNAME	PERT
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								YS MAIDEN NAM	антом
					MANDRAS			3	AURUS
					MA JURGIN			AME	FIRST N
	( if necessary)	onunie on separare shea			VELARDE		- L	NAME	3 JOOK
1	S YEAR	ERIOD OF LIEVE	Leading File College	C EDITOR DE CER	IOOL - BASI	H 2 30 BM M			
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FOURT	TED 2014	8 2014 GRADUA	200	ELEMENTARY	RY SCHOOL	G ELEMENTA	MAYBO	TARY	EMEL
HTIW HOHOH	050S   d3 T)	4 2020 GRABUA	OL 281	велнов нісн всні	нен асноог	AHOITAH HA	AJUMAG	YRA	MODE
V/N	AM	ANA ANA A	53.50	A150		ā\W		DNAL / COURSE	VOCATI
JAC MUS	+902 GTF/	UDANO 1803 -	DARY 200	SACHELOR OF SECO	ACTION OF THE PERSON	STATE OA	AON		953300
AM	AW	AM AM A	A194	AW		Ain		SEIGDIS EI	UGAHU
			(Continu	e on separate sheet	if necessary)				

	EMENT IN CIVIC / NON-GOVERNME			RY ORGANIZAT	ION/S		
29. NAME & ADDRE (V	INCLUSIVE DATES (mm/dd/yyyy) From To		NUMBER OF HOURS	e apppointed	POSITION / NATURE OF WORK		
(h	N/A	N/A	m E 186 N/A) - Jir	U friemmevo	a. within the fourth degree? b. within the fourth de <b>AIN</b> a (for Local G		
	If YES, give details:						
Ol	YES, give details:			tive offense	ary administr	ns. a. Have you ever been found guilty of a	
ON							
	If YES, give details: Date Filed:			3.1	noo kus arota	<ul> <li>Б. Пауе you been cuminally unarged b</li> </ul>	
VII. LEARNING AND DEVELOPMEN	(Co T (L&D) INTERVENTIONS/TRAINING	ntinue on separate s	sheet if necessa	ry)			
30. TITLE OF LEARNING AND DEVELOPM (W	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)  Type of LD (CONDUCTED/ SPONSORED BY (Write in full)			
N	Tyes   YES   All   All	From N/A	To N/A	o to bN/A nois	N/A	retirement, drcAVM of from the rolls, dis	
ON IX	Say III Juleo	e lest year (er	is minima ble	nollosis isa	ector? a national or t	out (abolition) in the public or private a	
	W.YES, glue deteiler					Barangay election)?	
ON E	the last VFS If YES, give details:	control below	ate?	uring the foru or local cand d	nent service. for a national	h Have you resigned from the govern election to promote/ectively campaign	
ON IV	YES (col	r country?	nt of anothe	manent reside	nigrant or per	se. Have you acquired the status of an in	
45.00							
	DA INS:	Jeaconed hald following item	eta for Disal answer th		ot of 2000 (R)	<ol> <li>Pursuant to: (e) indicacous People's 7277); and (c) Solo Parents Wellare J.</li> </ol>	
ON V	YES Programmy.				Jeonb 5	Are you a member of any indigenous	
ON D	If YES, please specify iD N					Are you a person-with disability?	
NO No.	YES, please specify ID I					- яге уоц а зою рагели?	
			(00)	-		10 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -	
ID picture taken within the last 6 months	04-51	222001				TRAA(4	
45 cm, X 5.5 cm (passport size)	271E 9176321604	YEAY CITY, C	ASOA, BAY			JAYC BARCALE	
Computer generated or photocopied picture is not acceptable	EYTE 9178348703	I,YTIO YABY	AYBOG, BA			SONIA A. BERTOS	
	of is a true, correct and	ilw jeed(2 6.)	Personal Dr	plished this	sonally accor	a declare under oath that I have pel	
	ents stated herein, 1 (cause the numb or	tinue on separate s	THE RESERVE TO SHARE THE PARTY OF THE PARTY			Philippines, I authorize the agency he	
III. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES	32. NON	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)				33. MEMBERSHIP IN ASSOCIATION/QRGANIZATION (Write in full)	
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	Coopie priestra	LE NAME OF S			¥91	#17/1 consetPassnort > 6390-8031-2043-8103	
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SIGNATURE	6:	inue on separate sh BinimbA nogra	-	DAT	TE	DECEMBER 27, 2024	

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34. Are you related by consanguinity or affinity to the appoint chief of bureau or office or to the person who has immedi	ing or recommending authority, or to the				
Bureau or Department where you will be apppointed,	ate supervision over you in the Office,	NOORESS OF ORGANIZATION	NAME &		
a. within the third degree?	YES NO				
b. within the fourth degree (for Local Government Unit - C	YES VO				
		If YES, give details:			
35. a. Have you ever been found guilty of any administrative of	offense?				
gam, a m, ammonauto	310100	YES V NO			
		If YES, give details:			
b. Have you been criminally charged before any court?		☐ YES ✓ NO			
	If YES, give details:				
		Date Filed:			
as Have you construct that the state of the	Constrain on acquirate share if intressants	Status of Case/s:			
36. Have you ever been convicted of any crime or violation of by any court or tribunal?	☐ YES ☑ NO				
Type of ED CONDUCTED SPONSORIED BY (Willes in full)  (Willes in full)  (Willes in full)	If YES, give details:				
37. Have you ever been separated from the service in any of	the following modes: resignation.	(init in other)			
retirement, dropped from the rolls, dismissal, termination, out (abolition) in the public or private sector?	end of term, finished contract or phased	YES NO If YES, give details:			
38. a. Have you ever been a candidate in a national or local e	lection held within the last year (except	☐ YES ☑ NO			
Barangay election)?		If YES, give details:			
<ul> <li>b. Have you resigned from the government service during election to promote/actively campaign for a national or loc</li> </ul>	☐ YES ☑ NO If YES, give details:				
39. Have you acquired the status of an immigrant or permane	☐ YES ☑ NO				
	If YES, give details (country):				
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) M	agna Carta for Disabled Bornens (BA				
7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972	2), please answer the following items:				
a. Are you a member of any indigenous group?		☐ YES ☑ NO	)		
b. Are you a person with disability?		If YES, please specify:			
		☐ 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 applica	the state of the s	II 123, please specify ID No.			
NAME	<del></del>				
JAY C. BANSALE	ADDRESS	TEL. NO.			
REX M. AUTIDA	VISCA, BAYBAY CITY, LEYTE	9489762630	00		
	MAYBOG, BAYBAY CITY, LEYTE	9176321804	4		
SONIA A. BERTOS	MAYBOG, BAYBAY CITY, LEYTE	9176348703			
42. I declare under oath that I have personally accomplishe complete statement pursuant to the provisions of perti	nent laws, rules and regulations of the	Republic of the	Sip.		
Philippines. I authorize the agency head/authorized repres agree that any misrepresentation made in this doc	entative to verify/validate the contents state	ed herein.	DVELY JOY M. PACATE		
administrative/criminal case/s against me.	ument and its attachments shall caus	e the filing of	РНОТО		
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)	Office of the control	22 2388	M SPECIAL SKILLS INGLES		
PLEASE INDICATE ID Number and Date of Issuance	Sin		Show.		
Government Issued ID: PHIL. ID					
ID/License/Passport No.: 6398-6031-2043-8105	ox)				
Date/Place of Issuance: 9/17/2021 / BAYBAY CITY	DECE MBER 27, 2024  Date Accomplished		Right Thumbmark		
SUBSCRIBED AND SWORN to before me this	C 2 7 2024 , affiant exhibit	ng his/her validly issued government	ID as indicated above.		
(3)	711	/			
	ATTY. OLIVED Keen's	1/-			
	Pursuant to RA 9/00				
DATE DECEMBER 27, 2024	Person Administering pat				