

# 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.

**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)

## I. PERSONAL INFORMATION

2. SURNAME	CAINTIC		
FIRST NAME	MARLON	NAME EXTENSION (JR., SR)	
MIDDLE NAME	MALATAG		
3. DATE OF BIRTH (mm/dd/yyyy)	12/13/1973	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization P/s. indicate country:
4. PLACE OF BIRTH	BAYBAY, LEYTECITY,	If holder of dual citizenship, please indicate the details.	Philippines
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		
6. CIVIL STATUS	<input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	N/A House/Block/Lot No. N/A Subdivision/Village <b>MAHAPLAG</b> City/Municipality 6512
7. HEIGHT (m)	1.65 METER	ZIP CODE	N/A Street <b>SAN ISIDRO</b> Barangay <b>LEYTE</b> Province
8. WEIGHT (kg)	56 KGS		N/A House/Block/Lot No. N/A Subdivision/Village <b>MAHAPLAG</b> City/Municipality 6512
9. BLOOD TYPE	B	18. PERMANENT ADDRESS	N/A Street <b>SAN ISIDRO</b> Barangay <b>LEYTE</b> Province
10. GSIS ID NO.		ZIP CODE	N/A House/Block/Lot No. N/A Subdivision/Village <b>MAHAPLAG</b> City/Municipality 6512
11. PAG-IBIG ID NO.			N/A Street <b>SAN ISIDRO</b> Barangay <b>LEYTE</b> Province
12. PHILHEALTH NO.		19. TELEPHONE NO.	N/A
13. SSS NO.		20. MOBILE NO.	09125045978
14. TIN NO.		21. E-MAIL ADDRESS (if any)	
15. AGENCY EMPLOYEE NO.			

## II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	CAINTIC	23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	MARIFE	KEVIN CARL L. CAINTIC	11/21/2005
MIDDLE NAME	LAMPIT	KYLE JAN L. CAINTIC	1/7/2012
OCCUPATION	GUIDANCE COUNSELOR	KRYSTAL MARIE L. CAINTIC	7/8/2013
EMPLOYER/BUSINESS NAME	DEPED		
BUSINESS ADDRESS	MINHS- BRGY. SAN ISIDRO, MAHAPLAG, LEYTE		
TELEPHONE NO.	N/A		
24. FATHER'S SURNAME	CAINTIC		
FIRST NAME	MARIANO		
MIDDLE NAME	OLMEDO		
25. MOTHER'S MAIDEN NAME			
SURNAME	MALATAG		
FIRST NAME	NIEVES		
MIDDLE NAME	NIMES		

(Continue on separate sheet if necessary)

## III. EDUCATIONAL BACKGROUND

26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE		HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	BANGA ELEMENTARY SCHOOL	ELEMENTARY	1990	1996	GRADUATED	1996	N/A
SECONDARY	BUNGA NATIONAL HIGH SCHOOL	SECONDARY	1996	2000	GRADUATED	2000	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	N/A						
GRADUATE STUDIES	N/A						

(Continue on separate sheet if necessary)

SIGNATURE	DATE	01/19/24	CS FORM 212 (Revised 2017), Page 1 of 4
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[illegible][illegible]

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
TROUBLE SHOOTING DEISEL AND GAS ENGINE	N/A	TRISKELION
		KABALIKAT
DRIVING		

(Continue on separate sheet if necessary)



Bureau or Department where you will be appointed,

a. within the third degree?

b. within the fourth degree (for Local Government Unit - Career Employees)?

☐ YES ☒ NO

☐ YES ☒ NO

If YES, give details:

35. a. Have you ever been found guilty of any administrative offense?

☐ 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 any law, decree, ordinance or regulation by any court or tribunal?

☐ YES ☒ NO

If YES, give details:

37. Have you ever been separated from the service in any of the following modes: resignation, retirement, dropped from the rolls, dismissal, termination, end of term, finished contract or phased out (abolition) in the public or private sector?

☐ YES ☒ NO

If YES, give details:

38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?

☐ YES ☒ NO

If YES, give details:

b. Have you resigned from the government service during the three (3)-month period before the last election to promote/actively campaign for a national or local candidate?

☐ YES ☒ NO

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): \_\_\_\_\_

40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), please answer the following items:

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 / appointee)

NAME	ADDRESS	TEL. NO.
HON. RONALDO T. LLEVE	POBLACION, MAHAPLAG, LEYTE	N/A
HON. ROLANDO SIMPRON	BRGY. SAN ISIDRO, MAHAPLAG, LEYTE	N/A
ALAN C. LOREJAS	SITIO VICINAL, UPPER, MAHAPLAG, LEYTE	09169558043

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.



Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)

PLEASE INDICATE ID Number and Date of Issuance

Government Issued ID: **drivers license**

ID/License/Passport No.: **1-103-94018324**

Date/Place of Issuance: \_\_\_\_\_

Signature (Sign inside the box)

January 19, 2024

Date Accomplished

Right Thumbmark

SUBSCRIBED AND SWORN to before me this \_\_\_\_\_

, affiant exhibiting his/her validly issued government ID as indicated above.

Person Administering Oath