S Form No. 212 Revised 2025	PERSO	NAL DAT	Δ SH	FFT					
NARNING: Any misrepresenta	tion made in the Personal Data Sheet and the	Work Experience Short sho	A 011		-44lun/ords	ninal case/s aga	inst the perso	on concerned.	
READ THE ATTACHED GUIDE	TO FILLING OUT THE PERSONAL DATA SHE	T (000) 05555							
rint legibly if accomplished through	and the state of t	se separate sheet if necessary	Indicate N/A if not	applicable. [	OO NOT ABB	REVIATE.			
1. SURNAME	PINTOY								
2. FIRST NAME	LOREMAE		-	NAME EXTENSION (JR. SR)					
MIDDLE NAME	BERNALES	- contains							
3. DATE OF BIRTH				T					
(dd/mm/yyyy)  4. PLACE OF BIRTH	18/08/1999 ORMOC CITY	18. CITIZENSHIP					by naturaliza	tion	
		If holder of dual citize		Pls. indicate country:			III <del>-</del>		
5. SEX AT BIRTH	☐ Male ☐ Female	please Indicate the details.					~		
6 CIVIL STATUS	✓ Single	CONTRACTOR		PUROK 6 House/Block/Lot No BA			TONDO Street AGONG BUHAY		
7. HEIGHT (m)	1.49			Subdivision/Village ORMOC			Barangay LEYTE		
8. WEIGHT (kg)	42	7/0 005-		ity/Municipality			Province		
9. BLOOD TYPE		ZIP CODE  18. PERMANENT ADDRESS		PUROK 6		TONDO			
	0			PUROK 6 PBlock/Lat No.			TONDO Street		
10. UMID ID NO.	N/A		Subo	livision/Village		ВА	GONG BUHAY Barangay		
11. PAG-IBIG ID NO.	121315029930						LEYTE Province		
12. PHILHEALTH NO.	13-202840506-9	ZIP CODE		6541			110711100		
13. PhilSys Number (PSN):	5890-2938-5084-0152	19. TELEPHONE NO.		N/A					
14. TIN NO.	661-355-089-00000	20. MOBILE NO		09081805464					
5. AGENCY EMPLOYEE NO.	240836 21. E-MAIL ADDRESS (if any)			pintoyloremae24@gmail.com					
I FAMILY BACKGROUNE				pii.	itoylorein	acz-(wgman.	COM		
22. SPOUSE'S SURNAME	N/A		23. NAME of CHIL	DREN (Write	full name and li	st all)	DATE OF BIRT	H (dd/mm/yyyy)	
FIRST NAME	N/A	NAME EXTENSION (JR., SR)	N/A			N/A			
MIDDLE NAME	N/A			N/A			N/A		
OCCUPATION	N/A		N/A			N/A			
EMPLOYER/BUSINESS NAME	N/A		N/A			N/A			
BUSINESS ADDRESS	N/A			N/A			N/A		
TELEPHONE NO.	N/A		N/A			N/A			
24. FATHER'S SURNAME	PINTOY			N/A			N/A		
FIRST NAME	MEDRITO	NAME EXTENSION (JR., SR)		N/A			N/A		
MIDDLE NAME	BAROG			N/A			N/A		
25 MOTHER'S MAIDEN NAME L	ORENA MONTEBON BERNALES			N/A			N/A		
SURNAME	BERNALES			N/A			N/A		
FIRST NAME	ORENA			N/A N/A				AIA	
MIDDLE NAME	MONTEBON			(1	Continue on se	eparate sheet if nace	ssary)		
14. EDUCATIONAL BACK	GROUND								
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEG (Write in full		PERIOD OF	To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVE	
ELEMENTARY	BAGONG BUHAY ELEMENTARY SCHOOL	BASIC EDUCAT	ION	2006	2012	N/A	2012	2ND HONOR	
SECONDARY	NEW ORMOC CITY NATIONAL HIGH SCHOOL	BASIC EDUCATION		2012	2016	N/A	2016	N/A	
VOCATIONAL / TRADE COURSE	ACLC SENIOR HIGH SCHOOL	HUMANITIES AND SOCIAL SCIENCES		2016	2018	N/A	2018	WITH	
COLLEGE	EASTERN VISAYAS STATE UNIVERSITY	BACHELOR OF SECONDARY EDUCATION MAJOR IN SCIENCE		2018	2022	N/A	2022	CUM LAUD	
GRADUATE STUDIES	PALOMPON INSTITUTE OF TECHNOLOGY	MASTER OF ARTS IN EDUC SCIENCE (Continue on separate sheet if		2024	PRESENT	18	N/A	N/A	
SIGNATURE	franktistelen	1- ammine all asbeign miner it		Di	ATE	9-19-		vised 2025), Page 1 o	

A STATE OF THE STA	SERVICE ELIG S/CSEE/CAREER S					LICENSE	(if applicable)
77. CES/CSEE/CAREER SERVICE/RA 1080 (BOARD/ BAR)/UNDER SPECIAL LAWS/CATEGORY II/ IV ELIGIBILITY and ELIGIBILITIES FOR UNIFORMED PERSONNEL		RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	NUMBER	Valid Until	
PROFESSIONAL TEACHER		87.6	01/03/2023	TACLOBAN CITY	2154053	8-18-202	
		360, 45					
			(Continue on ser	parate sheet if necessar			
	EXPERIENCE vate employme	nt. Start from your recent			AND THE PERSON NAMED IN	ed Work Experier	ice Sheet.
8. INCLUSIVE DATES (dd/mm/yyy) POSITION TII (Write in full/Do not a		ΠLE	DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)		STATUS OF APPOINTMENT	GOV'T SERVI	
From	To	BOY SCOUTS OF THE	PHILIPPINES-				
OP/2024   PRESENT   ORMOC CITY C   OF/2023   TEACHER   ST. ALOYSIUS INS		OUNCIL 7, 350.00		ACTIVE	YES		
		TECHNOLOG	r, INC.				
					The second secon		
			(Continue on se	parate sheet if necessal			
SIGNATURE Junilly M		DATE			9-19- U CS FORM 212 (Revised 2025), Page		

29.	NAME & ADDRESS OF (	IN CIVIC / NON-GOVERNMENT		OLUMPART O	RUANIZATION	13	
	(Write in full)			INCLUSIVE DATES (dd/mm/yyyy) From To		POSITION / NATURE OF WORK	
	N/A		N/A	N/A	N/A		N/A
		Manager Annual Control			2 64 6	The property	
	and the same						
	-						
							*
				-			
		(Co	ntinue on separat	e sheet if necessary	0		
LEARNING AND DEVI	ELOPMENT (L&D)	) INTERVENTIONS/TRAINING PR	ROGRAMS A	TENDED			
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTION (Write in full)		TERVENTIONS/TRAINING PROGRAMS	INCLUSIVE DATES OF ATTENDANCE (dd/mm/yyyy)		NUMBER OF HOURS	Type of L&D (Managerial/	CONDUCTED/ SPONSORED BY
		ull)				Supervisory/ Technical/etc)	(Write in full)
OMPUTER SKILLS DEVELOP	MENT TRAINING: IMP	PROVING CLASSROOM LEARNING	01/01/2024	To 10/01/2024	80	TECHNICAL	CPDCFT TRAINING CENTER
RU ICT EDUCATIONAL INNOVATION	N, PEDAGOGY, AND	PRACTICES, IN THE NEW AGE OF	15/01/2024	24/01/2024	80		CPDCFT TRAINING CENTER
TEACHIN	IG AND LEARNING O	ONLINE SEMINAR HIGH SCHOOL TEACHERS SCIENCE,	-	-			
TECHNOLOGY,	ENGINEERING AND I	MATHEMATICS STRAND	01/02/2024	10/02/2024	80		CPDCFT TRAINING CENTER
EASTERN VI	SAYAS STAFF DEVE	LOPMENT SEMINAR	26/03/2025	28/03/2025	24	SUPERVISORY	CPDCFT TRAINING CENTER
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		10.				1	
IL OTHER INFORMATIO	IN The same of the	(CE	ue on separa	te zheet if necessa	-1)		
TO A THE CONTROL OF THE		NO NO	N-ACADEMIC DIS	STINCTIONS / RECO	OGNITION		MEMBERSHIP IN ASSOCIATION/ORGANIZATIO
31 SPECIAL SKILLS	BIO FILIDOILES	32.		Vrite in full)			33 (Write in full)
COMPUTER LIT	ERATE	DIVISION REFRESHER C	BOY SCOUTS OF THE PHILIPPINES				
WRITING PO	EMS	FACILITATOR DURING TH					
WRITING STO	RIES	SUPPORT STAFF DURING TH	E ADVANCED	TRAINING CO	URSE FOR KA	WAN LEADERS	
		FACILITATOR DUR	ING THE PATI	ROL LEADERS	TRAINING COL	JRSE	
		FACILITATOR DUI					
							A company of the comp
SIGNATUI	æ	limited Ma	ntinue on separa	to sheet if nocessa		DATE	O-land.
		MANAMAN AND AND AND AND AND AND AND AND AND A	NAME OF TAXABLE	Land Land		DATE	Q-19-36 CS FORM 212 (Revised 2025), Page



chief of bureau or office or to the person who has immediate.  Bureau or Department where you will be appointed,	or recommending authority, or to the supervision over you in the Office,				
a. within the third degree?		☐ YES ☑	] NO		
b. within the fourth degree (for Local Government Unit - Care		] NO			
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:				
Have you ever been convicted of any crime or violation of an any court or tribunal?	YES NO If YES, give details:				
Have you ever been separated from the service in any of the dropped from the rolls, dismissal, termination, end of term, fi the public or private sector?	YES NO If YES, give details:				
A. Have you ever been a candidate in a national or local electron     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 ☑ NO If YES, give details:				
<ol> <li>Have you acquired the status of an immigrant or permanent</li> </ol>	☐ YES ☑ NO If YES, give details (country):				
Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag as amended); and (c) Expanded Solo Parents Welfare Act (items:	gna Carta for Disabled Persons (RA 7277, RA 11861), please answer the following				
Are you a member of any indigenous group?		☐ YES	✓ NO		
		If YES, please specify:			
Are you a person with disability?		YES If YES, please specify	☑ NO ID No:		
Are you a solo parent?		☐ YES If YES, please specify	✓ NO		
1. REFERENCES (Person not related by consanguinity or affinity to app		TCONTACT NO. AND/OR	F		
NAME	OFFICE / RESIDENTIAL ADDRESS	EMAIL			
JLIUS B. PORCADILLA	BRGY. LIBERTAD, ORMOC CITY	9653124967	400		
DNNEL M. JANDOC	BRGY. DOLORES, ORMOC CITY	9338238835			
DRENA O. ABLEN	BRGY. MAHAYAG, ORMOC CITY	9672060439			
12. I declare under oath that I have personally accomplishe complete statement pursuant to the provisions of pertin Philippines. I authorize the agency head/authorized repres agree that any misrepresentation made in this doc administrative/criminal case/s against me.	nent laws, rules, and regulations of the entative to verify/validate the contents sta	Republic of the ted herein.	LOREMAE B. PINTOY PHOTO		
Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance	areas	12.4			
Government Issued ID: PRC	Monthernal				
ID/License/Passport No.: 2154053	box)				
Date/Place of Issuance: ORMOC CITY	Date Accomplished		Right Thumbmark		
SUBSCRIBED AND SWORN to before me this	TD 10 70731 _affiant exhibitin	g his/her validly issued gov	remment ID as indicated above.		
SUBSCRIBED AND SWORM to belove the this	Line - water				
SUBSCRIBED AND SWORN ID DEIDIE THE UNS	ATTY. CLINT OCTAVIUS E Public Attorney Pursuant to 17 Angle	LABTIC '			

**CS** CamScanner

## WORK EXPERIENCE SHEET

Instructions: 1. Include only the work experiences relevant to the position being applied to.

- The duration should include start and finish dates, if known, month in abbreviated form, if known, and year in full. For the current position, use the word Present, e.g., 1998-Present. Work experience should be listed from most recent first.
  - o Duration: September 23, 2024- Present
  - o Position: Administrative Staff
  - o Name of Office/Unit: BSP Ormoc City Council
  - o Immediate Supervisor: Jonnel M. Jandoc
  - Name of Agency/Organization and Location: BSP- Ormoc City Council
  - List of Accomplishments and Contributions (if any)
    - Facilitator during the 2024 Camp-o-ral Scouting Month Culminating Activities
    - o Facilitator during the Council Scout Youth Forum 2025
    - Facilitator during the 6<sup>th</sup> Annual Local Council Meeting (ALCM)
    - Support Staff during the Advanced Training Course for Kawan Leaders
    - Facilitator during the Patrol Leaders Training Course
    - Facilitator during the Patrol Leaders Training Course

## Summary of Actual Duties

- Responsible for performing administrative and technical tasks, e.g., preparation of minutes of meetings, council memorandum, division memorandum related to scouting, status of agreements, resolutions, and responding to queries and performing other related functions.
- Duration: June 17, 2023- June 29, 2024
- Position: Senior High School Teacher
- Name of Office/Unit: St. Aloysius Institute of Technology, Inc.
- · Immediate Supervisor: John Christopher P. Cabiling
- Name of Agency/Organization and Location: St. Aloysius Institute of Technology, Inc.
  - List of Accomplishments and Contributions (if any)
    - o District Siglaro 2023- Assistant Coach 1st Arnis Secondary Girls
    - Division Siglaro 2023- Assistant Coach 2<sup>nd</sup> Arnis Secondary Girls

## Summary of Actual Duties

- Class adviser of 2 sections (12- St. Elijah and St. Francis Xavier -STEM)
- Accomplishing School Forms
- Subject teacher in the following subjects: Qualitative research, Quantitative Research, Inquiries, Investigations, and Immersion, Earth and Life Science, Biological Science, and Personal Development.
- o Classroom management
- o Lesson Planning

LOREMATE B. PINTOY

