CS Form No. 212					
Revised 2017	DEDC	ONAL DA	TA (CHEET	
	PERS	ONAL DA	IA :	ЭПЕЕІ	
	tion made in the Personal Data S	heet and the Work Experienc	e Sheet sh	all cause the filing of adminis	strative/criminal case/s against the
	TO FILLING OUT THE PERSONA				
Print legibly. Tick appropriate boxes I. PERSONAL INFORMATION	s () and use separate sheet if neces	ssary. Indicate N/A if not applicab	le. DO NOT	ABBREVIATE. 1. CS ID No.	(Do not fill up. For CSC use only
2. SURNAME	ORACION				
					NAME EXTENSION (JR., SR) N/A
FIRST NAME	JUNE PIERCE				13/13
MIDDLE NAME	AMAMANGPANG			<u> </u>	
 DATE OF BIRTH (mm/dd/yyyy) 	06/16/1998	16. CITIZENSHIP		Filipino	Dual Citizenship
		-			by birth by naturalization
4. PLACE OF BIRTH	BAYBAY CITY	If holder of dual citizensh			Pls. indicate country:
5. SEX	Male Female	please indicate the detail	ls.		N/A ▼
6 CIVIL STATUS	Single Married	17. RESIDENTIAL ADDRESS		N/A	Observat
	☐ Widowed ☐ Separated ☐ Other/s:			House/Block/Lot No. N/A	Street
7. HEIGHT (m)		-		Subdivision/Village N/A	Barangay
, ,	1.61m	7/0.0005		City/Municipality	Province
8. WEIGHT (kg)	57kg	ZIP CODE 18. PERMANENT ADDRESS	L	N/A House no. 0001	N/A
9. BLOOD TYPE	0	-	I	House/Block/Lot No.	Street
10. GSIS ID NO.	N/A	-		N/A Subdivision/Village	GA-AS Barangay
11. PAG-IBIG ID NO.	N/A			BAYBAY	LEYTE
12. PHILHEALTH NO.	N/A	ZIP CODE	652	City/Municipality	Province
13. SSS NO.	N/A	19. TELEPHONE NO.	N/A		
14. TIN NO.	N/A	20. MOBILE NO.	093926	645053	
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)		njunepierce@gmail.con	 n
II. FAMILY BACKGROUND	<u> </u>	, , , , ,		, , , ,	
22. SPOUSE'S SURNAME	N/A		23. NAME of C	CHILDREN (Write full name and list al	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	N/A	NAME EXTENSION (JR., SR) N/A	Kise N	Miguel Nodalo	03/02/2019
MIDDLE NAME	N/A	1471	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	ORACION		N/A		N/A
FIRST NAME		NAME EXTENSION (JR., SR)	N/A		N/A
	RODULFO	N/A			
MIDDLE NAME	AMAMANGPANG		N/A		N/A
25. MOTHER'S MAIDEN NAME	QUIYAWAN		N/A		N/A
SURNAME	ORACION		N/A		N/A
FIRST NAME	ALMA ROSE		N/A		N/A
MIDDLE NAME	AMAMANGPANG			(Continue on separate	sheet if necessary)

MIDDLE NAME	AMAMANGPANG			(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		LEVEL/ UNITS	YEAR GRADUATED	SCHOLARSHIP ACADEMIC HONORS
	(**************************************			From	То	EARNED (if not	01012071125	RECEIVED
ELEMENTARY	GAAS ELEMENTARY SCHOOL	N/A		2004	2010	GRADUATE	2010	SALUTATOR - IAN
SECONDARY	FRANCISCAN COLLEGE OF THE IMMACULATE CONCEPTION	N/A		2010	2014	GRADUATE	2014	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A		N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	Bachelor of Science in Agr (Soil Science Major)	culture	2014	2024	GRADUATE	2024	N/A
GRADUATE STUDIES	N/A	N/A		N/A	N/A	N/A	N/A	N/A
(Continue on separate sheet if necessary)								
SIGNATURE				DATE 10/15/2024				

WORK EXPERIENCE Includes private emoloriment. Start from your recent work! Description of duties should be indicated in the attached Work Empirience should be indicated in the attached work i		SERVICE EL								
Drivers License N/A N/A Baybay LTO 1 M Continue or superate theef invessary						ION / CONS	CEDMENT	LICENSE (f		
W. WORK EXPERIENCE Include an suprada sheel if consumy Includes the minor ment. Start from your recent work) Description of Influence should be indicated in the streeted Mork & constructors sheel (monkey) Included and include the indicated of the indicated in the streeted Mork & constructors sheel (monkey) Included a 30/7/2024 Admin Aide Office State University - Registrar's N/A N/A Job Order Office State University - Registrar's N/A N/A Job Order Office State University - Registrar's N/A N/A SA Clerk Included a 30/2020 Included Transport of Soil Science N/A N/A N/A SA SA OEM Enterprises Included Transport of Soil Science N/A				(If Applicable)		PLACE OF EXAMINAT	ON / CONFERMENT		NUMBER	Date of Validity
WORK EXPERIENCE Introducts private amolecument. Start from your recent works Description of during a hould be principated in the attached Work Exprisince about the private amolecument. Start from your recent works Description of during a hould be principated in the attached Work Exprisince about the private amolecument. White in fullow ond above during the private amolecument of the private amounts of the priv	Drivers License N/A			N/A	Baybay LTO			1	MAY 202	
V. WORK EXPERIENCE Inclusive private employment. Start from your recent works) Descriptions of distribusing biolicated in the starched Work Experience sheet. NEULINIS (ANT DESCRIPTION OF THE (White is falloon) above deal of the private and the private										
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WORK EXPERIENCE										_
Include private employment. Start from your recent work) Obscription of distins should be indicated in the streeked Work Evraceince shoel. Recommend				(Conti	nue on separate sheet if n	ecessary)				
B. INCLUSIVE DATES										
POSITION TITLE Children in full Control abbreviate DEPARTMENT / AGENCY / OFFICE / COMPANY SOUTH Y TAXABLE / PARTMENT / CHILD AND ADDRESS / CHILD AND ADDRES			ent. Start from your rec	ent work) Descri	ption of duties shoul	ld be indicated in the at	tached V		nce sheet.	
From To	(mr	m/dd/yyyy)						PAY GRADE ()f applicable \& STEP		GOV'T SERVICE
Office	From	То	(*************************************	aboronatoy				(Format 100-0")/ INCREMENT	AFFORMENT	(Y/N)
1/1/2024	//24/2024	8/07/2024	Admin Aide		Visayas State Un Office	iversity - Registrar's	N/A	N/A	Job Order	Yes
(Continue on appirale sheet # necessary)	1/1/2024	1/30/2024	Clerk		Department of	of Soil Science	N/A	N/A	SA	Yes
	6/3/2020	11/17/20	Farm Technician,	/Laborer	OEM Ente	erprises	7000	N/A	N/A	No
	-									
	\longrightarrow									
	\longrightarrow									
W				Waster.	ua on san arab cheel?	Amee and				
SIGNATURE 10/15/2024	SIGNA	TURE	X 5	(Contin	ue on separate sheet if he	DATE	10	/15/202	4	

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/I. VOLUN	ITARY WORK OR INVOLVEMENT	IN CIVIC/NO	N-GOVERNI	1ENT / PEOPLE	E/VOLUNTAR	Y ORGANIZATION/S	
29. NAME & ADDRESS OF ORGANIZATION (Witte in full)		INCLUSIVE DATES (mmiddlyyyy) From To		NUMBER OF HOURS	POSITION / NATURE OF WORK		
N/A		N/A N/A		N/A	N/A		
	<u> </u>	Ī	1				
/II I E A E	RNING AND DEVELOPMENT (L&D)	(Contin	on separate s ONS/TRAINI	heet if necessary) NG PROGRAM	S ATTENDED		
Start from th	e most recent L&D/training program and inclu	de only the relevan	t L&D/training tal	en for the last five (5) years for Division	Chiel/Executive/Managerial positions)	
	TILE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	ATTEN	DANCE (Aww) To	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
	N/A	N/A	N/A	N/A	N/A	N/A	
	1						
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			$\sqcup \!\!\! \perp$				
		\vdash	\sqcup	+-			
		\vdash	\vdash	+-	\vdash		
		\vdash	\vdash	++-	\vdash		
		\vdash	$\vdash \vdash$	++-	\vdash		
	<u> </u>	(Cont.	inue on senarate	sheet if necessary)	<u>'</u>	<u>'</u>	
VIII. OTH	HER INFORMATION	(COM	and the same are	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
31.	SPECIAL SKILLS and HOBBIES	NO		TINCTIONS / RECOG	SNITION	MEMBERSHIP IN 33. ASSOCIATION/ORGANIZATION (Write in full)	
Computer Savy			N/	Ά	N/A		
Organizational Skill							
Problem Solving							
Planning							
N/A							
	N/A						
	N/A					<u> </u>	
	SIGNATURE	Con	tinud on separate	sheet if necessary) D	ATE	10/15/2024	
		/				CS FORM 212 (Revised 2017), Page 3 of	

34.	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 YES If YES, give details:	ю				
35.	a. Have you ever been found guilty of any administrative offe	YES NO If YES, give details: N/A					
	b. Have you been criminally charged before any court?	If YES, give details: Date Filed: Status of Case/s: N/A N/A					
36.	Have you ever been convicted of any crime or violation of an regulation by any court or tribunal?	☐ YES ★ NO If YES, give details: N/A					
	Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, end phased out (abolition) in the public or private sector?	d of term, finished contract or	YES NO If YES, give details: N/A				
38.	a. Have you ever been a candidate in a national or local elect (except Barangay election)? b. Have you resigned from the government service during the the last election to promote/actively campaign for a national of the last election.	☐ YES If YES, give details: ☐ YES If YES, give details: N/A					
39.	Have you acquired the status of an immigrant or permanent of	☐ YES					
40. a. b.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magi (RA 7277); and (c) Solo Parents Welfare Act of 2000 (RA 89) Are you a member of any indigenous group? Are you a person with disability? Are you a solo parent?	If YES please specify: YES NO N/A YES NO N/A					
41.	REFERENCES (Person not related by consanguinity or affinity to applicant &	appointee)					
	NAME	ADDRESS	TEL NO.	ID picture taken within			
	N/A	N/A	N/A	the last 6 months 3.5 cm. X 4.5 cm (passport size)			
	N/A	N/A	N/A	With full and handwritten			
	N/A	N/A	N/A	name tag and signature over printed name			
42.	I declare under oath that I have personally accomplished this complete statement pursuant to the provisions of pertinent I Philippines. I authorize the agency head/authorized repreherein. I agree that any misrepresentation made in the filing of administrative/criminal case/s against me.	aws, rules and regulations of the esentative to verify/validate the	Republic of the contents stated	Computer generated or photocopied picture is not acceptable			
G	overnment Issued ID (a Passport, GSIS, SSS, PRC, Drive's Liberse, etc.) LEASE INDICATE ID Number and Date of Issuance overnment Issued ID: Drivers License Dictionse/Passport No.: H12-20-002167 ate/Place of Issuance: 6/16/2020	he box)	Right Thumbmark				
SUB	SCRIBED AND SWORN to before me this	, affant exhibiting his/her validy i		ated above.			