CS.Form-No. 212 Revised 2017	PERSO	DNAL DA	TA:	SHEET				
serson concerned. READ THE ATTACHED GUIDE	tion made in the Personal Data She TO FILLING OUT THE PERSONAL (SQ.) and use separate sheet if neces	DATA SHEET (POS) BEFO	RE ACCOM	PLISHING THE PD	FORM	(Do not fit up. For CSC use or		
2 SURNAME	AVELINO	and the second of the second of the second of	and the supplement	And the second s	AND ADDRESS OF THE PARTY OF THE			
FIRST NAME		la tie	NAME EXTENSION (JR., SP)					
MIDDLE NAME	MANDREZA	JANE						
3. DATE OF BIRTH				Filipino	510.100			
(rrmiddlyyyy)	FEBRUARY 28, 1996	16. CITIZENSHIP	TIZENSHIP			itizenship birth  by naturalization		
4. PLACE OF BIRTH	THELOBAN CITY	If holder of dual citizens	ship.			Pts. indicate country:		
5. SEX		please indicate the det						
	Male Female							
6 CIVIL STATUS	Single ☐ Married ☐ Widowed ☐ Separated	17 RESIDENTIAL ADDRESS		House/Block/Lat No.		Street DICTRICT T BLICE		
	Other/s:	Section 1		Subdivision/Village	STA-MESA	Barangay DUILS		
7 HEIGHT (m)	14x cm			DAGKIMI		LEYTE Province		
8. WEIGHT (kg)	45 9.	ZIP CODE	651	City/Municipality		7709100		
9. BLOOD TYPE	Bt	18. PERMANENT ADDRESS				Street		
10. GSIS ID NO.	1		-	House/Block/Lot No.	6TA. MES			
TO. GOIS TO NO.				Subdivision/Village		Barangay LEYTE		
11. PAG-IBIG ID NO.	1211 022 835			DING A IA I City/Municipality		Province		
12. PHILHEALTH NO.	13-250 450521-6	ZIP CODE	6515					
13. SSS NO.	06-4070933-4	19. TELEPHONE NO.	MIA					
14. TIN NO.	709-620-323	20. MOBILE NO.		7233433				
15. AGENCY EMPLOYEE NO.		21, E-MAIL ADDRESS (if any)	avelina	Khy 2 metho jame &	grail. com			
N. FAMILY BACKGROUN	D			CHILDREN (Write full ner		DATE OF BIRTH (mm/kid/yyyy		
22. SPOUSE'S SURNAME FIRST NAME	-	NAME EXTENSION (JR., SR)	25. FIRME OF	SHICDISH (ANIRE INE INE	ras arra tes est	DATE OF BRITA (BEREATY)		
MIDDLE NAME			<u> </u>					
OCCUPATION			1					
EMPLOYER/BUSINESS NAME								
BUSINESS ADDRESS								
TELEPHONE NO.								
FATHER'S SURNAME	AVEUNO		1					
FIRST NAME	JOSELITO	NAME EXTENSION (JR., SR)						
MIDDLE NAME	BELONIK	1				1		
5 MOTHER'S MAIDEN NAME	MANDREZA							
SURNAME	AVELINO		1					
55100000			+					
FIRST NAME	MA. FE					1		

MIDULE NAME	TNACES		Looustaine of acherate meet a mindrathii					
II. EDUCATIONAL BACK	(GROUND							
26. LEVEL	NAME OF SCHOOL (Write in full)	NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE		PERIOD OF ATTENDANCE		YEAR GRADUATED	SCHOLARSHIF ACADEMIC HONORS	
		(VVIND III IUN)	From	To	EARNED	GOLDONIED	RECEIVED	
ELEMENTARY	DAGAMI COUTH CEMBER		2002	2008		2008	CALUTATO	
SECONDARY	ST. JOSEPH MGH SCHOOL		2008	2012		292	NIA	
VOCATIONAL / TRADE COURSE								
COLLEGE	LEALE NORMY MININER IL	PARCHELOR OF LIBRARY AND INFORMATION (CIENCE	2012	2016		2016	MIK	
GRADUATE STUDIES								
	A	(Cantinue on separate sheet if necessary)						
SIGNATURE	andto		DAT	E	MAY	10,4	2021	
				-	CSE	WM 212 (Raussad 20	-	

7 CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE			RATING (If Applicable)	DATE OF EXAMINATION /	PLACE OF EXAMINAT	ION / CONF	FERMENT	LICENSE (III	Date of
		VIDRIVER'S LICENSE		CONFERMENT					Validity
Cipror	100 01036	WALL PARTITIONS	75.00	CEPTEMBER 17-20,2017	LEASE MAIN	or the	LORAN CITY	0008416	2/18/2
-									
			(Condi	nun on separate sheet if ne	cessary)				
	EXPERIENCE vate employme	nt. Start from your rec	int work) Descri	ption of duties should	d be indicated in the at	tached V	Vork Experie	nce sheet.	
INCLU	SIVE DATES n/dd/yyyy)	POSITION TO (Write in full/Do not a	TILE DEPARTMENT / AGENCY / OFFICE / COMPANY		ICY / OFFICE / GOMPANY	MONTHLY SALARY	SALARYI JOSY PAY GRADE (IF apalicable)& STEP (Formal 100-01)	STATUS OF APPOINTMENT	GOVT SERVICE (Y/N)
型约6	PRECENT	SCHOOL LIBER	RIAN	A EMEMOS TRIP	-	NOTEMENT	9+/w.16	N	
GOPER 9,2617	DELPMBER 31,2017	CULTANITY THE		M DEPKETMENT	MADELLON, INC.			MOA	N
1645T	DECEMBER 31,2014	GOVERNMENT -	INTERNSHIP	PE PARTMENT	OF LABOR AND MENT	-		104	y
-									
SIGNAT	TURE	Cage	Contin	ue on separate sheef if nec	DATE	í.	HY 10	2024	

OLUNTARY WORK OR INVOLVEMENT	IN CIVIC / NO	N-GOVERNN	MENT / PEOPLE	E / VOLUNTAI	RY ORGANIZATION'S	
NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyr)		MARRIER OF HOURS	POSITION / NATURE OF WORK		
	From	To				
11/4	289.4					
Path						
	-					
	-					
	-		<del>  </del>			
	(Conti	nue on separate s	heel if necessary)			
VII. LEARNING AND DEVELOPMENT (L&D)						
Start from the repot recent LEG training program and inclu	in only the mirror	DATES OF	en for the lead five p		n Chief Executive Munagerial positions:	
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS	ATTENDANCE		NUMBER OF HOURS.	Type of LO (Manageries) Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY	
(Write in full)	From To				(Write in full)	
PLATZON MATTERIAL CONFEST MICHIEN		HOVEMBEE 22, 2019				
INDUNTINE , INTERCENNECTED"	M64C+	MIGHT	-			
EXCTERN JICAYAT ETBERFIANS SURMATION FOR	ANGUST 2018	21,2018				
STATE OF ARE ART ENVIRONMENT"						
			-			
		-		4 70		
29 97 4						
		trestoffu as		ST THE A		
			and the last of the last	A SHARE		
	-					
	(Contin	ue on separate sh	eet if necessary)			
VIII. OTHER INFORMATION						
31. SPECIAL SKILLS and HOBBIES	NON-		ICTIONS / RECOGN in full)	ITION	MEMBERSHIP IN  33. ASSOCIATION/ORGANIZATION (Write in full)	
					PHILIPPHIE CIBRAFIANS	
	AIIA					
MIA					ASSOCIATION INC. (PLA)	
O LOUIS TO LOUIS CONTRACTOR OF THE PARTY OF	Vase	ue on seperate sh	DAT	76	MAY 10.2011	
SIGNATURE	YCO	que l	DA	TE.	MHY 10,2021	
	F Water				Loss Charles at La Distribution 2011 11 Principle X Of A	

34.	Are you related by consanguinity or affinity to the appointing or recommending authority, chief of bureau or office or to the person who has immediate supervision over you in the	or to				
	Bureau or Department where you will be apppointed,					
	a. within the third degree?	D YES DINO				
	b. within the fourth degree (for Local Government Unit - Career Employees)?	☐ 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?	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?		_			
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?					
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?		_			
39.	Have you acquired the status of an immigrant or permanent resident of another country?	YES ZNO If YES, give details (country):				
	(RA 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), please answer the followare you a member of any indigenous group?  Are you a person with disability?  Are you a solo parent?	YES   NO   YES, please specify ID No:   YES   NO   YES   NO   YES, please specify ID No:   YES, please specify ID No:   YES, please specify ID No:				
41.	REFERENCES (Person not related by consenguinity or affinity to applicant (appointed)		_			
	NAME ADDRESS	TEL. NO.				
F	LHODORA NAVARRO TACIROBAN CITY					
-						
42.	I declare under oath that I have personally accomplished this Personal Data Sheet which complete statement pursuant to the provisions of pertinent laws, rules and regulations of Philippines. I authorize the agency head/authorized representative to verify/validate herein. I agree that any misrepresentation made in this document and its attachmifiting of administrative/criminal case/s against me.	of the Republic of the the contents stated  MANNENETE JANE M. ANELING	7			
	Sovernment Issued ID (I.e.Passport, GSIS, SSS, PRC, Driver's (Joense, etc.) PLEASE INDICATE ID Number and Date of Issuance	Alexander of the second				
0	Soverment Issued ID: PIFC 1D	34				
H		2023				
Ľ	sterPlace of Issuance: CTY Date Accom	mplished Right Thumbmark	7			
SUE	SCRIBED AND SWORN to before me this	validly issued government ID as indicated above.				
	Person Administe	tering Oath				