CS Form No. 212 Revised 2017	PERSO	NAL	DAT	A SH	IEE1	Γ				
WARNING: Any misinterpretat	tion made in the Personal Data Sheet and the	Work Experier	nce Sheet shall	cause the filin	g of admini	strative/crin	minal case/s agail	nst the persoi	n concerned.	
	TO FILLING OUT THE PERSONAL DATA SHI	. ,			PDS FORM					
Print legibly. Tick appropriate boxes I. PERSONAL INFORMATION	s (and use separate sheet if necessary. Indicate I	N/A if not applica	able. DO NOT A	BBREVIATE.		1. CS ID No.		(Do not fill up. I	For CSC use onl	
2. SURNAME	IMPAS									
FIRST NAME							NAME EXTENSION (JI	R., SR) N/A		
	CEL-ANN JOY									
MIDDLE NAME 3. DATE OF BIRTH	VERUEN									
(mm/dd/yyyy)	JULY 25, 1993	16. CITIZENSI	16. CITIZENSHIP			ino	Dual Citizenship	_		
4. PLACE OF BIRTH	BRGY. SALVACION BASEY, SAMAR	− If h	If holder of dual citizenship,		☐ by birth Pls. indicate of	by natural	lization			
5. SEX	Male	pl	ease indicate the de	etails.					•	
6 CIVIL STATUS	☐ Single ☑ Married	17. RESIDENT	TIAL ADDRESS		<u> </u>			ZONE 5		
O OIVIE OTATOO	☐ Widowed ☐ Separated				House/Block/Lot No.			Street GUADALUPE		
	Other/s:			Sui	bdivision/Village	9		Barangay		
7. HEIGHT (m)	1.52 m			C	BAYBAY ity/Municipality			LEYTE Province		
8. WEIGHT (kg)	43 kg	ZIF	CODE		6521					
9. BLOOD TYPE	B+	18. PERMANE	NT ADDRESS	Hou	se/Block/Lat N	0	Street			
10. GSIS ID NO.	N/A			House/Block/Lot No.				SALVACION		
11. PAG-IBIG ID NO.	1211-8404-6494				Subdivision/Village BASEY			Barangay SAMAR		
12. PHILHEALTH NO.	13-025229074-6	ZIF	CODE	Ci	ity/Municipality 6720			Province		
13. SSS NO.	06-3562837-8	19. TELEPHO	NE NO.	, ,			N/A			
14. TIN NO.	455-114-422	20. MOBILE N	0.	0908 392 9170						
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL AD	DRESS (if any)		cela	ınnjoy25v	veruen@gma	il.com		
II. FAMILY BACKGROUND							- 1			
22. SPOUSE'S SURNAME	IMPAS			23. NAME of CH	ILDREN (Write	e full name and	d list all)	DATE OF BIR	TH (mm/dd/yyyy	
FIRST NAME	VIC ANGELO	NAME EXTENSI	ON (JR., SR)	ANAIAH ANGELA V. IMPAS		IPAS	AS JUNE 16, 2019			
MIDDLE NAME	LABIAL									
OCCUPATION	MECHANICAL ENGINEER / COLLEGE INST	TRUCTOR								
EMPLOYER/BUSINESS NAME	VISAYAS STATE UNIVERSITY									
BUSINESS ADDRESS	VISCA, BAYBAY CITY, LEYTE									
TELEPHONE NO.	N/A									
24. FATHER'S SURNAME	VERUEN									
FIRST NAME	ANTONIO	NAME EXTENSI	ON (JR., SR)							
MIDDLE NAME	CORPIN	•								
25. MOTHER'S MAIDEN NAME										
SURNAME	BANOSON									
FIRST NAME	CRESILDA									
MIDDLE NAME	ALVENTO				(Co	ontinue on se	parate sheet if nece	ssary)		
III. EDUCATIONAL BACK	GROUND									
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EI	DUCATION/DEGRE (Write in full)	EE/COURSE	PERIOD OF A	ATTENDANCE To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED	
ELEMENTARY	SALVACION ELEMENTARY SCHOOL	BASIC EDUC	ATION		1999	2005	N/A	2005	SECOND HONORABLE MENTION	
SECONDARY	BASEY NATIONAL HIGH SCHOOL	BASIC EDUCA	ATION		2005	2009	N/A	2009	THIRD ACADEMIC ACHIEVER	
VOCATIONAL / TRADE COURSE	EASTERN VISAYAS TECHNICAL COLLEGE	COMPUTER F	IARDWARE SERV	ICING NC-II	2009	2009	N/A	2009	N/A	
COLLEGE	EASTERN VISAYAS STATE UNIVERSITY	BACHELOR O	OF SCIENCE IN EURSHIP		2010	2016	N/A	2016	N/A	
GRADUATE STUDIES	N/A	N/A			N/A	N/A	N/A	N/A	N/A	
		Continue on sep	parate sheet if nece	essary)	1	I	I	I	<u> </u>	
SIGNATURE			DATE				CS FORM 21	2 (Revised 2017)), Page 1 of 4	

IV CIVII SI	ERVICE ELIG	IRII ITV							
				DATE OF				LICENSE (if applicable)	
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE			RATING (If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINA	OF EXAMINATION / CONFERMENT			Date of Validity
CAREER SERVICE PROFESSIONAL EXAMINATION			80.94	AUGUST 7, 2022	TACLO	BAN CITY			
V. WORK F	VEEDIENAE		(Con	ntinue on separate sheet	if necessary)				
	XPERIENCE ate employme	nt. Start from your recen	t work) Descriptio	n of duties should b	e indicated in the attach	ed Work Exp	erience shee	t	
(mr	ISIVE DATES m/dd/yyyy)	POSITION TI (Write in full/Do not a			ENCY / OFFICE / COMPANY /Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)
From 04/04/2018	To 02/09/2019	CENTER SUPERVISOR		INTERNATIONAL CULT	URAL STUDIES AND	16, 000 PHP	N/A	RESIGNED	N
07/11/2017	03/30/2018	TRAINING HEAD		PHILIPPINE OPPO MOB	ILE TECHNOLOGY INC.	16, 000 PHP	N/A	RESIGNED	N
06/23/2016	05/08/2017	ACCOUNT EXECUTIVE		CEBU ADCONSULTANT	TS INC.	14, 000 PHP	N/A	RESIGNED	N
			(Cor	ntinue on separate sheet	if necessary)				
SIGNA	ATURE			DATE			CS FORM 2	12 (Revised 2017), F	Page 2 of 4

VI. VOLUNTARY WORK OR INVOLVEMENT I	N CIVIC / NON-GOVERNMENT	PEOPLE / VC	DLUNTARY O	RGANIZATIOI	V/S			
29. NAME & ADDRESS OF ORGANIZATION (Write in full)		INCLUSIVE DATES (mm/dd/yyyy) From To		NUMBER OF HOURS	POSITION / NATURE OF WORK		N / NATURE OF WORK	
N/A			To N/A	N/A			N/A	
IV/A			1					
VII. LEARNING AND DEVELOPMENT (L&D)		tinue on separate s						
(Start from the most recent L&D/training program and include				ef/Executive/Mana	gerial positions)			
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)			DATES OF IDANCE Id/yyyy)	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)		CONDUCTED/ SPONSORED BY (Write in full)	
TRAIN THE TRAINER		01/11/2018	To 02/13/2018	14 HRS/DAY	MANAGERIAL & TEAM TRAINING	PHILIPPINE	OPPO MOBILE TECHNOLOGY, INC	
TRAIN THE TRAINER		09/29/2017	10/1/2017	14 HRS/DAY	MANAGERIAL & TEAM TRAINING	PHILIPPINE	OPPO MOBILE TECHNOLOGY, INC	
ENTREPRENUERSHIP GOALS: GENERATING OPPORTUNITIES AND ACHIEVEMENTS FOR LEADERSHIP SUCCESS			03/10/2016	8 HOURS	SKILLS TRAINING		OF BUSINESS AND NUERSHP EASTERN VISAYAS STATE	
PUBLIC RELATION: ETHICS AND PROFESSIONALISI	и	08/03/2015	08/03/2015	8 HOURS	SOFT SKILLS	COLLEGE OF BUSINESS AND ENTREPRENUERSHP EASTERN VISAYAS STATE UNIVESITY		
WIWAG BUSINESS WEEK		06/16/2014	06/19/2014	8 HOURS	SKILLS TRAINING	EMBASSY	OF SWITZERLAND	
VIII. OTHER INFORMATION	(Con	tinue on separate s	sheet if necessary)	-	_	-		
31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)				33. MEM	BERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)		
MICROSOFT OFFICE OPERATION	N/A					N/A		
PLAYING BADMINTON								
	(Con	tinue on separate s	sheet if necessarv)					
SIGNATURE	,		DATE				CS FORM 212 (Revised 2017), Page 3 of 4	

34.	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 ☑ NO ☐ YES ☑ NO If YES, give details:						
35.	a. Have you ever been found guilty of any administrative offe	YES [NO s:					
	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 an any court or tribunal?	y law, decree, ordinance or regulation by	☐ YES ☑ NO If YES, give details:					
37.	Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, end (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 electron Barangay election)? b. Have you resigned from the government service during the	☐ YES If YES, give detail ☐ YES	s:					
	election to promote/actively campaign for a national or local	If YES, give detail	_					
39.	Have you acquired the status of an immigrant or permanent	☐ YES ☑ NO If YES, give details (country): ————————————————————————————————————						
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972),	•						
a.	Are you a member of any indigenous group?		☐ YES ☑ NO If YES, please specify:					
b.	Are you a person with disability?	YES INO 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 /a	appointee)						
	NAME	ADDRESS	TEL. NO.	ID picture taken within				
JEN	NIELYN LUMOLJO	QUEZON CITY	09178558170	the last 6 months 3.5 cm. X 4.5 cm (passport size)				
DAF	RWIN G. NAVARROSA	BASEY, SAMAR	09667365117	With full and handwritten name tag and signature over				
	ARIAN DELA CRUZ	BASEY, SAMAR	09518045767	printed name Computer generated				
42.	I declare under oath that I have personally accomplished this statement pursuant to the provisions of pertinent laws, reauthorize the agency head / authorized representative to misrepresentation made in this document and its attachmagainst me.	ules and regulations of the Republic of verify/validate the contents stated herein	f the Philippines. I I. I agree that any	or photocopied picture is not acceptable PHOTO				
	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) LEASE INDICATE ID Number and Date of Issuance							
	overnment Issued ID: PHILIPPINE IDENTIFICATION CARD							
H	/License/Passport No.: 3287-3103-8201-7680	x)						
Da	ate/Place of Issuance: AUGUST 7, 2022		Right Thumbmark					
	SUBSCRIBED AND SWORN to before me this	, affiant exhibitin	g his/her validly issued	government ID as indicated above.				
		Person Administering Oath	1	CS EODM 212 (Deviced 2017). Dags 4 of				