CS Form No. 212
Revised 2017

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	BALTAZAR		
FIRST NAME	JONATHAN	NAME EXTENSION (JR., SR)	N/A
MIDDLE NAME	ALBA		
3. DATE OF BIRTH (mm/dd/yyyy)	(04/12/97)	16. CITIZENSHIP	☑ Filipino ☐ Dual Citizenship ☐ by birth ☐ by naturalization
4. PLACE OF BIRTH	TACLOBAN CITY	If holder of dual citizenship, please indicate the details.	Pls. indicate country:
5. SEX	☑ Male ☐ Female		
6 CIVIL STATUS	☑ Single ☐ Married ☐ Widowed ☐ Separated ☐ Other/s:	17. RESIDENTIAL ADDRESS	N/A (House/Block/Lot No.) N/A (Street); N/A (Subdivision/Village) GUADALUPE (Barangay); BAYBAY CITY (City/Municipality) LEYTE (Province); ZIP CODE 6521
7. HEIGHT (m)	1.72		
8. WEIGHT (kg)	83		
9. BLOOD TYPE	A	18. PERMANENT ADDRESS	N/A (House/Block/Lot No.) N/A (Street); N/A (Subdivision/Village) GUADALUPE (Barangay); BAYBAY CITY (City/Municipality) LEYTE (Province); ZIP CODE 6521
10. GSIS ID NO.	N/A		
11. PAG-IBIG ID NO.	121319478984		
12. PHILHEALTH NO.	13-250971475-8		
13. SSS NO.	N/A	19. TELEPHONE NO.	N/A
14. TIN NO.	628-310-727-00000	20. MOBILE NO.	09385009078
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	baltazar.environment@gmail.com

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	N/A		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	N/A	NAME EXTENSION (JR., SR) N/A	N/A	N/A
MIDDLE NAME	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	BALTAZAR			
FIRST NAME	NESTOR	NAME EXTENSION (JR., SR) N/A		
MIDDLE NAME	MACABENTA			
25. MOTHER'S MAIDEN NAME				
SURNAME	ELVIRA			
FIRST NAME	NUÑEZ			
MIDDLE NAME	ALBA		*(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 From	PERIOD OF ATTENDANCE To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
ELEMENTARY	ST. THERESE CHRISTIAN DEVELOPMENT CENTER FOUNDATION, INCORPORATED	N/A	06/21/2004	03/29/2010	N/A	2010	N/A
SECONDARY	LICEO DEL VERBO DIVINO	N/A	06/14/2010	04/12/2014	N/A	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 ENVIRONMENTAL MANAGEMENT	06/02/2014	08/12/2022	N/A	2022	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	11/24/2025

IV. CIVIL SERVICE ELIGIBILITY

27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
				NUMBER	Date of Validity
DRIVER'S LICENSE	N/A	10/11/2023	BAYBAY CITY, LEYTE	H12-18-002911	10/11/2023
CAREER SERVICE PROFESSIONAL EXAMINATION	81.18%	03/26/2023	TACLOBAN CITY, LEYTE	372583	06/09/2023

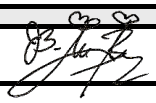
(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.

28. INCLUSIVE DATES (mm/dd/yyyy)		POSITION TITLE (Write in full/Do not abbreviate)	DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/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	To						
05/02/2023	PRESENT	DATABASE ENCODER	ALUMNI AND COMMUNITY RELATIONS OFFICE, VSU	12000.00	N/A	JOB ORDER	Y
03/01/2017	07/31/2017	INTERNET CAFÉ OPERATIONS MANAGER	BEAU CJ'S INTERNET CAFÉ	2000.00	N/A	N/A	N

(Continue on separate sheet if necessary)

SIGNATURE		DATE	11/24/2025

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

29. NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
	From	To		
N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
	From	To			
ORIENTATION ON THE ROLES AND RESPONSIBILITIES OF DOCUMENT AND RECORDS CONTROLLERS AND RE-CASCADING OF DOCUMENT AND RECORDS CONTROL PROCESSES AND GUIDLINES	09/04/2025	09/04/2025	8 HRS	MANAGERIAL	ALELI A. VILLOCINO
SEMINAR-WORKSHOP ON CULTURAL MAPPING OF VSU'S HERITAGE PROPERTIES	03/14/24	03/15/2024	16 HRS	TECHNICAL	REYNALDO P. MONREAL
UNLOCKING EXCELLENCE: THE 5S REVOLUTION FOR CLERK AND HEADS AT VISAYAS STATE UNIVERSITY	11/29/23	11/29/2023	4 HRS	SUPERVISORY	VISAYAS STATE UNIVERSITY
ISO 9001:2015 AWARENESS & RE-AWARENESS WEBINAR	08/29/23	08/29/2023	4 HRS	MANAGERIAL	VISAYAS STATE UNIVERSITY
			.		

(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
LEADERSHIP SKILLS	FIRST PLACE IN THE GROUP PRESENTATION CATEGORY ON CULTURAL MAPPING IN VSU'S HERITAGE PROPERTIES	FORMER PRESIDENT OF HELPERS IN OUTREACHING MOTHER EARTH'S STABILITY
MS OFFICE (EXCEL, WORD, AND POWER POINT)	LEADERSHIP AWARD	
PHOTO AND VIDEO EDITING SKILLS		
COMMUNICATION SKILLS		
COMPUTER SKILLS		
BIOLOGICAL AND CHEMICAL LABORATORY WORKS		

(Continue on separate sheet if necessary)

SIGNATURE		DATE	11/24/2025

34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to the chief of bureau or office or to the person who has immediate supervision over you in the Office, Bureau or Department where you will be apppointed, 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? b. Are you a person with disability? c. Are you a solo parent?	☐ YES ☑ NO If YES, please specify: ☐ YES ☑ NO If YES, please specify ID No: ☐ YES ☑ NO If YES, please specify ID No:

41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)

NAME	ADDRESS	TEL. NO.
Prof. Corazon A. Padilla	**Visayas State University, Baybay City, Leyte**	**09268463483**
Christine Gay B. Cala	**Brgy. Marcos, Baybay City, Leyte**	**09619681412**
Loreta G. Malabanan	**Brgy. Guadalupe, Baybay City, Leyte**	**09171451576**

PHOTO

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:	**Driver's License**
ID/License/Passport No.:	**H12-18-002911**
Date/Place of Issuance:	**Baybay City, Leyte**

Signature (Sign inside the box)

11/24/2025

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