

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	ABANCO		
FIRST NAME	ARLJUNE	NAME EXTENSION (JR., SR)	
MIDDLE NAME	BASLAN		
3. DATE OF BIRTH (mm/dd/yyyy)	06/16/1993	16. CITIZENSHIP If holder of dual citizenship, please indicate the details.	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:
4. PLACE OF BIRTH	INTRAMUROS, MANILA		
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		
6 CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS ZIP CODE	<div>House/Block/Lot No. Street</div> <div>SITIO LONoy SAN ISIDRO</div> <div>Subdivision/Village Barangay</div> <div>BAYBAY CITY LEYTE</div> <div>City/Municipality Province</div>
7. HEIGHT (m)	1.8M		
8. WEIGHT (kg)	85KG		
9. BLOOD TYPE			
10. GSIS ID NO.	2006562366	18. PERMANENT ADDRESS ZIP CODE	<div>House/Block/Lot No. Street</div> <div>SITIO LONoy SAN ISIDRO</div> <div>Subdivision/Village Barangay</div> <div>BAYBAY CITY LEYTE</div> <div>City/Municipality Province</div>
11. PAG-IBIG ID NO.	121353857079		
12. PHILHEALTH NO.	15-08300000-1		
13. SSS NO.			
14. TIN NO.	495-434-238	19. TELEPHONE NO.	
15. AGENCY EMPLOYEE NO.	01546	20. MOBILE NO.	09058568218
		21. E-MAIL ADDRESS (if any)	abanco.arljune12345@gmail.com

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME			23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME		NAME EXTENSION (JR., SR)		
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	ABANCO			
FIRST NAME	ARLENDITO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	IGNACIO			
25. MOTHER'S MAIDEN NAME				
SURNAME	BASLAN			
FIRST NAME	EVELYN			
MIDDLE NAME	DALANON		(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		HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	FRANCISCAN COLLEGE OF THE IMMACULATE CONCEPTION	ELEMENTARY	2000	2006	N/A	2006	
SECONDARY	FRANCISCAN COLLEGE OF THE IMMACULATE CONCEPTION	HIGHSCHOOL	2006	2010	N/A	2010	
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY - MAIN CAMPUS	BACHELOR OF SCIENCE IN HOTEL, RESTAURANT, AND TOURISM MANAGEMENT	2017	2021		2021	
GRADUATE STUDIES							
(Continue on separate sheet if necessary)							
SIGNATURE			DATE				

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		

(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			
	DISASTER RISK REDUCTION MANAGEMENT AND BASIC FIRST AID SEMINAR	12/02/2018	12/02/2018	8.0	Technical	AIREEN CLORES
	HOSPITALITY INDUSTRY SYSTEM SEMINAR	11/16/2019	11/16/2019	8.0	Technical	VENICE IBANEZ
	ADOBE PHOTOSHOP CC TRAINING - INVENTIVE MEDIA	02/18/22	02/20/22	24.0	Technical	HENRY N. ONG

(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)
	PROFICIENT COMPUTER LITERACY				
	GRAPHIC DESIGN				
	COMPUTER TROUBLESHOOTING				
	OFFICE MANAGEMENT				
	HIGHLY CRITICAL THINKER				
	FLEXIBLE TEAM PLAYER				

(Continue on separate sheet if necessary)

SIGNATURE	DATE
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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 appointed, a. within the third degree? b. within the fourth degree (for Local Government Unit - Career Employees)?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>
35. a. Have you ever been found guilty of any administrative offense? b. Have you been criminally charged before any court?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>
		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: Date Filed: _____ Status of Case/s: _____</div>
36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>
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?		<div><input checked="" type="checkbox"/> YES<input type="checkbox"/> NO</div> <div>If YES, give details: Resigned from online job to finish college studies</div>
38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)? 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?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>
		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>
39. Have you acquired the status of an immigrant or permanent resident of another country?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details (country): _____</div>
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?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div>
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)		
NAME		ADDRESS
EDGAR OMPOY		BRGY. MASLUG, BAYBAY CITY, LEYTE
JILL VIVIEN Y. LEE		QUEZON CITY
DESIREE ESCOBEDO		BULACAN
TEL. NO.		
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.		
<div>Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</div> <div>Government Issued ID: DRIVER'S LISCENSE</div> <div>ID/License/Passport No.: H12-17-000055</div> <div>Date/Place of Issuance: 2022/02/24 / LTO - BAYBAY</div>		<div></div> <div>Signature (Sign inside the box)</div> <div></div> <div>Date Accomplished</div>
		<div></div> <div>Right Thumbmark</div>
SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.		
<div></div> <div>Person Administering Oath</div>		