CS Form No. 212 Revised 2017	PERSO	NAL DAT	A SH	IEE.	 Т				
concerned.	tion made in the Personal Data Sheet and the					/criminal case/s	against the p	erson	
Print legibly. Tick appropriate boxes	TO FILLING OUT THE PERSONAL DATA SHEET) and use separate sheet if necessary. Indicate				1. CS ID No.		(Do not fill up.	For CSC use only	
I. PERSONAL INFORMATIO 2. SURNAME	NUÑEZ								
FIRST NAME	ELLA MARIE					NAME EXTENSION (JF	R., SR)		
MIDDLE NAME	GULAY								
3. DATE OF BIRTH	GOLAT	(0.017777101177							
(mm/dd/yyyy)	03/26/2000	16. CITIZENSHIP		✓ Filip	ino	Dual Citizenship by birth	by natura	lization	
4. PLACE OF BIRTH	BAYBAY CITY	If holder of dual citizen	nship,			Pls. indicate	_	iization	
5. SEX	☐ Male ☑ Female	please indicate the de	etails.	Philippines				•	
6 CIVIL STATUS	✓ Single Married	17. RESIDENTIAL ADDRESS					PUROK 1		
o division in the	☐ Widowed ☐ Separated			se/Block/Lot N SITIO NIGAD	0.		Street PLARIDEL		
	Other/s:	_	Sui	bdivision/Village	9		Barangay LEYTE		
7. HEIGHT (m)	1.51	_		ity/Municipality			Province		
8. WEIGHT (kg)	48	ZIP CODE				6521			
9. BLOOD TYPE	0	18. PERMANENT ADDRESS	Hou	se/Block/Lot N	0.		PUROK 1 Street		
10. GSIS ID NO.	N/A			SITIO NIGAD bdivision/Village	9		PLARIDEL Barangay		
11. PAG-IBIG ID NO.	N/A		E	BAYBAY CITY			LEYTE		
12. PHILHEALTH NO.	13-250378770-2	ZIP CODE	City/Municipality Pr		Province				
13. SSS NO.	06-4450993-8	19. TELEPHONE NO.	N/A						
14. TIN NO.	N/A	0. MOBILE NO.		0	9515004663				
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)			enuez39	00@gmail.cor	<u>n</u>		
II. FAMILY BACKGROUND	AN/A		00 NAME COLL	DDEN AND		e i m	DATE OF DID	T11/ /11/ \	
22. SPOUSE'S SURNAME FIRST NAME	N/A	NAME EXTENSION (JR., SR)	23. NAME of CHILDREN (Write full name and list all)				DATE OF BIRTH (mm/dd/yyyy)		
	N/A N/A		N/A					N/A	
MIDDLE NAME 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					
24. FATHER'S SURNAME	NUÑEZ				N/A			N/A N/A	
FIRST NAME	PATERNO	JR.			N/A		N/A		
MIDDLE NAME	BALILI		N/A		<u> </u>	N/A			
25. MOTHER'S MAIDEN NAME			N/A		N/A				
SURNAME	GULAY	GULAY		N/A			N/A		
FIRST NAME	REGINA ISABEI	REGINA ISABEL		N/A				N/A	
MIDDLE NAME	ESCALA	ESCALA			(Continue on separate sheet if necessary)				
III. EDUCATIONAL BACKG	ROUND								
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/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	PLARIDEL CENTRAL SCHOOL	PRIMARY EDUCATION		2006	2012	GRADUATE	2012	VALEDICTORIA N	
SECONDARY	PLARIDEL NATIONAL HIGH SCHOOL	JUNIOR AND SENIOR HIGH SCHOOL	L	2012	2018	GRADUATE	2018	SALUTATO RIAN	

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	
	, ,	, ,	From To				RECEIVED	
ELEMENTARY	PLARIDEL CENTRAL SCHOOL	PRIMARY EDUCATION	2006 2012		GRADUATE	2012	VALEDICTORIA N	
SECONDARY	PLARIDEL NATIONAL HIGH SCHOOL	JUNIOR AND SENIOR HIGH SCHOOL	2012	2018	GRADUATE	12018	SALUTATO RIAN	
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
COLLEGE	VISAYAS STATE UNIVERSITY- BAYBAY	BACHELOR OF SECONDARY EDUCATION MAJOR IN SCIENCE	2018	2022	GADUATE	しついつつ	DOST SCHOLAR	
GRADUATE STUDIES	N/A	N/A N/A		N/A	N/A	N/A	N/A	
(Continue on separate sheet if necessary)								
SIGNATURE	E Sept-on			DATE 08/23/2022				

IV. CIVIL SERVICE ELIGIBILITY									
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER		RATING	DATE OF			DMENT	LICENSE (if ap		
SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE		(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT		KMENT	NUMBER	Date of Validity	
	N/A		N/A	N/A	N/A			N/A	N/A
	N/A		N/A	N/A	N/A			N/A	N/A
	N/A	1	N/A	N/A	N	/A		N/A	N/A
	N/A	A	N/A	N/A	N		N/A	N/A	
	N/A	\	N/A	N/A	N/A			N/A	N/A
	N/A	1	N/A	N/A	N/A			N/A	N/A
	N/A	1	N/A (Con	N/A tinue on separate sheet	N/A if necessary)			N/A	N/A
	EXPERIENCE					od Work Free	oriones about		
28. INCL	USIVE DATES				e indicated in the attache		SALARY/ JOB/ PAY GRADE (if		GOV'T
From	m/dd/yyyy)	POSITION T (Write in full/Do not			ENCY / OFFICE / COMPANY I/Do not abbreviate)	MONTHLY SALARY	applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	SERVICE (Y/ N)
N/A	N/A	N/A			N/A	N/A	N/A	N/A	N/A
			_	_				_	
			_						
				_					
0.0	ATURE			tinue on separate sheet				3/2022	
SIGN	ATURE		emping		DATE			3/2022	

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S							
29. NAME & ADDRESS OF OF (Write in full)			/E DATES d/yyyy) To	NUMBER OF HOURS	POSITION / NATURE OF WORK		
N/A		N/A	N/A	N/A	N/A		
		tinue on separate s					
VII. LEARNING AND DEVELOPMENT (L&D) (Start from the most recent L&D/training program and included)				hief/Executive/Ma	nagerial positions)		
(Start from the most recent L&D/training program and include only the relevant L&D/training taken for 30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)			INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy) From To		Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
N/A				N/A	N/A	N/A	
	(Cont	tinue on separate s	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)	
WRITING ARTICLES	STUDENT INTER	LEAGUE OF SCIENCE MAJORS					
TEACHING SCIENCE							
CREATE POWERPOINT PRESENTATIONS	NS .						
READING							
USE MICROSOFT OFFICE APPLICATIONS							
			1				
SIGNATURE		(Continue on separate sheet if necess			ATE	08/23/2022	

34.	Are you related by consanguinity or affinity to the appointin chief of bureau or office or to the person who has immediat Bureau or Department where you will be apppointed,							
	a. within the third degree?	YES	✓ NO					
	b. within the fourth degree (for Local Government Unit - Ca	☐ YES	✓ NO					
			If YES, give deta	ils:				
05	a. Have you ever been found quilty of any administrative of	ifonco?						
35.	35. a. Have you ever been found guilty of any administrative offense?			☐ YES ☑ NO If YES, give details:				
			ii 123, give deta	115.				
	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 a	any law, decree, ordinance or regulation	☐ YES	√ NO				
	by any court or tribunal?		If YES, give details:					
37.	Have you ever been separated from the service in any of the		YES	✓ NO				
	retirement, dropped from the rolls, dismissal, termination, e out (abolition) in the public or private sector?	and of term, finished contract or phased	If YES, give details:					
38	a. Have you ever been a candidate in a national or local ele	ection held within the last year (except						
30.	Barangay election)?	octor note main the last year (except	☐ YES ☐ NO If YES, give details:					
	b. Have you resigned from the government service during t	he three (3)-month period before the last						
	election to promote/actively campaign for a national or loca		If YES, give details:					
39.	Have you acquired the status of an immigrant or permanen	t resident of another country?	☐ YES	✓ NO				
			If YES, give deta					
			-					
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma							
a.	7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), please answer the following items:							
u.	Are you a member of any indigenous group?			ify: NO				
b.	b. Are you a person with disability?			✓ NO				
c				ify ID No:				
o.	c. Are you a solo parent?			☑ NO ify ID No:				
41.	REFERENCES (Person not related by consanguinity or affinity to applican	t /appointee)						
	NAME	ADDRESS	TEL. NO.					
	JOVIE MARIEL L. DEGORIO	MARAO, INOPACAN, LEYTE	9121599010					
		, ,						
	VIVIAN M. RATILLA	PLARIDEL, BAYBAY CITY, LEYTE	9606638581					
	VILMA P. CAYON	PLARIDEL, BAYBAY CITY, LEYTE	9606638586					
42.	I declare under oath that I have personally accomplished			nd=				
	complete statement pursuant to the provisions of pertin Philippines. I authorize the agency head/authorized repr			ELLA MARIE G. NUNEZ				
	I agree that any misrepresentation made in this doc	•		PHOTO				
	administrative/criminal case/s against me.			,				
G	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)							
	LEASE INDICATE ID Number and Date of Issuance	omb-						
G	overnment Issued ID: PHILHEALTH ID	See 1 1						
IE	0/License/Passport No.: 13-250378770-2	ox)						
D	Date/Place of Issuance: PHILHEALTH OFFICE BAYBAY CITY Date Accomplished			Right Thumbmark				
Ľ		2 die 7 dee inplietee		. agait mananan				
	SUBSCRIBED AND SWORN to before me this	, affiant exhibiti	ng his/her validly issued	d government ID as indicated above.				
		h						