Revised 2017	PERSO	NAL DAT	'A SI	1EE	Т				
WARNING: Any misrepresentati	ion made in the Personal Data Sheet and th	ne Work Experience Sheet sl	nall cause the f	iling of adm	inistrative/	criminal case/s ad	gainst the per	son	
concerned.	TO FILLING OUT THE PERSONAL DATA SI	•					gamet are per	<i></i>	
Print legibly. Tick appropriate boxes	s () d use separate sheet if necessary. Indica				1. CS ID No.		(Do not fill up. F	or CSC use only	
I. PERSONAL INFORMATION 2. SURNAME	CONDE								
			NAME EXTENSION ((JR., SR)					
FIRST NAME	ANTHONY CHRISTIAN						,		
MIDDLE NAME 3. DATE OF BIRTH	YAMIT								
(mm/dd/yyyy)	AUGUST 28, 1997	16. CITIZENSHIP		Filipino Dual Citizenship			•		
4. PLACE OF BIRTH	BUTUAN CITY, AGUSAN DEL NORTE	If holder of dual citizenship,		Pls. indicate			by naturalicountry:	ization	
5. SEX	✓ Male	please indicate the						•	
	Single Married	17. RESIDENTIAL ADDRESS	17 DESIDENTIAL ADDDESS				ZONE 5		
6 CIVIL STATUS				use/Block/Lot No.			Street UADALUPE		
	Other/s:			ıbdivision/Village		,	Barangay		
7. HEIGHT (m)	T (m) 1.78			BAYBAY CITY City/Municipality			Province		
8. WEIGHT (kg)	92 ZIP CODE			6521					
9. BLOOD TYPE	0	18. PERMANENT ADDRESS		OCK 2 LOT 3			Street		
10. GSIS ID NO.			D	ECA HOMES	;		TUNGKIL		
11. PAG-IBIG ID NO.	1211-7124-0415		N	IINGLANIL			Barangay CEBU		
12. PHILHEALTH NO.				City/Municipality 6046		Province			
13. SSS NO.		19. TELEPHONE NO.							
14. TIN NO.	328 316 107 000	20. MOBILE NO.		0926	717 9157				
15. AGENCY EMPLOYEE NO.	21. E-MAIL ADDRESS (if any)	conde	condeanthonychristian@gmail.com						
II. FAMILY BACKGROUND		Z. Z. M. N.Z. P. S. P. N.Z. S. C. N. M. N. Y. S.	33.14	, u		,			
22. SPOUSE'S SURNAME			23. NAME of CI	HILDREN (Wr	ite full name a	and list all)	DATE OF BIRT	ΓΗ (mm/dd/yyyy)	
FIRST NAME		NAME EXTENSION (JR., SR)		ALLEN BRIAN Y. CONDE			08/1	9/1988	
MIDDLE NAME				ALVIN CLYDE Y. CONDE			08/1	6/1992	
OCCUPATION				ADRIAN JOHN Y. CONDE 0			01/0	8/1994	
EMPLOYER/BUSINESS NAME									
BUSINESS ADDRESS									
TELEPHONE NO.									
24. FATHER'S SURNAME	CONDE								
FIRST NAME	HENRY	NAME EXTENSION (JR., SR)							
MIDDLE NAME	OTERO								
25. MOTHER'S MAIDEN NAME									
SURNAME	YAMIT		1						
FIRST NAME	RUBY ESTRELLA								
MIDDLE NAME	CHAVEZ			(Co	ntinue on se	parate sheet if nece	ssary)		
III. EDUCATIONAL BACKG	ROUND	1						SCHOLARSHIP/	
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)		PERIOD OF ATTENDANCE From To		HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	ACADEMIC HONORS RECEIVED	
ELEMENTARY	TALISAY CITY CENTRAL SCHOOL			2004	2010		2010		
SECONDARY	TALISAY CITY NATIONAL HIGHSCHOOL			2010	2014		2014		
VOCATIONAL / TRADE COURSE									
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF ANIMA	BACHELOR OF ANIMAL SCIENCE		2018		2018		
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY	MS ANIMAL SCIE	ENCE	2019	2022		2022		
SIGNATURE	1/4/0	(Continue on separate sheet if ne	ecessary)		\TE	1	07/31/2025		

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/	R SERVICE/RA 1			DATE OF				LICENSE (if a	pplicable)
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE LICENSURE EXAMINATION FOR AGRICULTURIST			RATING (If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINA	TION / CONFER	RMENT	NUMBER	Date of
				NOV. 20-22,2022	TACLOE		032060	Validity 08/28/202	
	DRIVERS L		PROPER MOHON, TALISAY CITY, CEBU				Y, CEBU	0041871	08/28/202
					<u>, </u>		<u>, </u>		
	XPERIENCE	ent. Start from your red		tinue on separate sheet		attached W	lark Exparian	see sheet	
3. INCLU	SIVE DATES						SALARY/ JOB/ PAY GRADE (if		GOV'T
(mm	Vdd/yyyy) To	POSITION T (Write in full/Do not a			NCY / OFFICE / COMPANY Do not abbreviate)	MONTHLY SALARY	applicable)& STEP (Format "00-0")/	STATUS OF APPOINTMENT	SERVICE (Y/ N)
April 1, 2016	August 15,	SERVICE CREW	- DINING	JOLLIBEE	CORPORATION	₱7,000.00	INCREMENT	PROBITIONARY	N
September	2016 December	SALES ACCOUNT	SPECIALIST		OD INCORPORATION	₱21,000.00		PROBITIONARY	N
01,2019 ebruary 16, 2022	15,2019 January 16, 2023	PART-TIME INS	TRUCTOR	VISAYAS ST	VISAYAS STATE UNIVERSITY P22			PART-TIME	Υ
une 13, 2023	PRESENT	SCIENCE RESEARC	H ASSISTANT	PHILIPPINE CAR	₱22,540.00		PROJECT BASED	Y	
								BAGED	
									-
					#				
		John	(Con	tinue on separate sheet	ii necessary)		07/3		

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S							
29. NAME & ADDRESS OF OF (Write in full)		INCLUSIV (mm/dd	E DATES (/yyyy) To	NUMBER OF HOURS	POSITION / NATURE OF WORK		
VSU GRADUATE SCHOOL STUDENT ORGANIZATION/VSU			2020			2ND YEAR REPRESENTATIVE	
THE PHILIPPINE SOCIETY OF ANIMAL SCIENCE			PRESENT			MEMBER	
		inue on separate :		()			
VII. LEARNING AND DEVELOPMENT (L&D) (Start from the most recent L&D/training program and incl.)				n Chief/Executive	/Managerial positio		
30. TITLE OF LEARNING AND DEVELOPMENT INTE (Write in full)		INCLUSIVE ATTEN (mm/do	DANCE	NUMBER OF HOURS	Type of LD (Managerial/ CONDUCTED/SPONSORED BY Supervisory/ (Write in fulf) Technical(etc)		
PHILIPPINE VIRTUAL ANIMAL NUTR	ITION CONFERENCE		10/28/2021			PSAS - INSTITUTE OF ANIMAL SCIENCE	
5TH INTERNATIONAL LIVESTOCK BIOTE		10/27/2021	10/28/2021			PSAS	
58TH PHILIPPINE SOCIETY OF ANIMAL SCIENCE S CONVENTION	CIENTIFIC SEMINAR AND ANNUAL	10/20/2021	10/21/2021			PSAS	
SCIENTIFIC WRITING FOR P	UBLICATION	7/27/2022	7/28/2022			PSAS	
7th INTERNATIONAL LIVESTOCK BIOTE		10/17/2023	10/20/2023			PSAS	
60th PHILIPPINE SOCIETY OF ANIMAL SCIENCE S CONVENTION	CIENTIFIC MEETING AND ANNUAL	10/17/2023	10/20/2023			PSAS	
41st PSAS VISAYAS CHAPTER ANNUAL CONVENTION		10/17/2023	10/20/2023			PSAS	
(Continue on separate sheet if necessary) VIII. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES	24 SDECIM SKILL Cood HORDIES 22 NON-ACADEMIC DISTINCTIONS / RECOGNITION 22 MEMBERSHIP IN ASSOCIATION/ORGANIZATION						
Communication skills	22. (Wite in full) TALISAY CITY NATIONAL HIGHSCHOOL - ATHLETE OF THE YEAR - FOOTBALL					THE PHILIPPINE SOCIETY OF ANIMAL	
Microsoft office (word & excel)	SCIENCE VISAYAS STATE UNIVERSITY - VARSITY I FITER AWARDEE - FOOTBALL PHILIPPINE ASSOCIATION OF						
Playing football	AGRICULTURISTS - EASTERN VISAYAS						
Doing exercise							
,							
SIGNATURE	John (Gent	(Gentinue on separate sheet if necessary)			07/31/2025		
SIGNATURE						CS FORM 212 (Revised 2017), Page 3 of 4	

34.	Are you related by consanguinity or affinity to the appoint chief of bureau or office or to the person who has immed Bureau or Department where you will be apppointed, a. within the third degree? b. within the fourth degree (for Local Government Unit - County of the	☐ YES ☑ ☐ YES ☐ If YES, give details:	NO NO			
35.	a. Have you ever been found guilty of any administrative	☐ YES ✔ If YES, give details:	NO			
	b. Have you been criminally charged before any court?	YES V NO If YES, give details: Date Filed: Status of Case/s:				
36.	Have you ever been convicted of any crime or violation or regulation by any court or tribunal?	☐ YES ☑ NO If YES, give details:				
37.	Have you ever been separated from the service in any oretirement, dropped from the rolls, dismissal, termination phased out (abolition) in the public or private sector?		YES If YES, give details:	NO		
38.	a. Have you ever been a candidate in a national or local (except Barangay election)? b. Have you resigned from the government service during the content of the c	☐ YES				
	the last election to promote/actively campaign for a nation	If YES, give details:				
39.	Have you acquired the status of an immigrant or permar	☐ YES ☑ NO If YES, give details (country):				
	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) I (RA 7277); and (c) Solo Parents Welfare Act of 2000 (RA Are you a member of any indigenous group?	YES	₩ NO			
b.	Are you a person with disability?	If YES, please specify: YES				
C.	Are you a solo parent?	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.			
	JULIUS V. ABELA	VISCA, BAYBAY CITY, LEYTE				
	MANUEL D. GACUTAN JR.					
40	FRANCISCO G. GABUNADA JR.	VISCA, BAYBAY CITY, LEYTE				
42.	I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertin Philippines. I authorize the agency head/authorized repr I agree that any misrepresentation made in this doc administrative/criminal case/s against me.	Republic of the stated herein.	РНОТО			
	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's	11				
	overnment Issued ID: PRC ID	Thomas	pul			
ID	V/License/PassportNo.: 0041871	Signature (Sign inside the bo) ox)			
Da	ale/Place of Issuance: 08/03/2023 - ORMOC CITY, LEYTE		Right Thumbmark			
	SUBSCRIBED AND SWORN to before me this	his/her validly issued gove	mment ID as indicated above.			
		th				
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