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

READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FOR<u>M.</u> 1. CS ID No. (Do not fill up. For CSC use only) Print legibly. Tick appropriate boxes ( ) and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE I. PERSONAL INFORMATIOI 2. SURNAME **ESPARTERO** FIRST NAME GELENIO SAMILLANO MIDDLE NAME 3. DATE OF BIRTH 06/08/1988 16. CITIZENSHIP ✓ Filipino ☐ Dual Citizenship (mm/dd/yyyy) by birth by naturalization 4 PLACE OF BIRTH PALMA BARBAZA, ANTIQUE Pls. indicate country: If holder of dual citizenship please indicate the details Female ✓ Male 5. SEX ✓ Married RIVERSIDE 17. RESIDENTIAL ADDRESS Single 6 CIVIL STATUS House/Block/Lot No. Widowed Separated Stree HIGULO-AN Other/s: Subdivision/Village Barangay BAYBAY LEYTE 7. HEIGHT (m) 0.14478 Citv/Municipality Province 8. WEIGHT (kg) 67 ZIP CODE 6521 RIVERSIDE 18. PERMANENT ADDRESS 9. BLOOD TYPE 0 House/Block/Lot No. Street HIGULO-AN 10. GSIS ID NO. N/A Subdivision/Village Barangay BAYBAY LEYTE 11. PAG-IBIG ID NO. 916-029-4324-80 City/Municipality Province 0202-6468-2879 12. PHILHEALTH NO. ZIP CODE 6521 34-3866408-61 13. SSS NO. 19. TELEPHONE NO. N/A 14. TIN NO. 277-973-337-000 20. MOBILE NO. 09485599351 15. AGENCY EMPLOYEE NO N/A 21. E-MAIL ADDRESS (if any) esparterogelenio@gmail.com FAMILY BACKGROUND 22. SPOUSE'S SURNAME **ESPARTERO** 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) AME EXTENSION (JR., SR) 05/15/2015 FIRST NAME **BEANCA** ROYO MIDDLE NAME BARANGAY SECRETARY OCCUPATION EMPLOYER/BUSINESS NAME GOVERNMENT BUSINESS ADDRESS **BARANGAY HIGULO-AN** TELEPHONE NO. 24. FATHER'S SURNAME **ESPARTERO** FIRST NAME **GELENIO** MIDDLE NAME **OGATIS** MOTHER'S MAIDEN NAME SURNAME SAMILLANO RENITA FIRST NAME **ESPANOLA** MIDDLE NAME (Continue on separate sheet if necessary) EDUCATIONAL BACKGROUND SCHOLARSHIP/ HIGHEST LEVEL PERIOD OF ATTENDANCE NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE YEAR **ACADEMIC** LEVEL UNITS EARNED (Write in full) (Write in full) GRADUATED HONORS (if not graduated) RECEIVED From To CAPOYUAN ELEMENTARY SCHOOL RIMARY EDUCATION FI FMFNTARY 06/22/2000 03/22/2005 COMPLETED 2005 N/A BARBAZA NATIONAL HIGH SCHOOL 06/24/2005 03/31/2008 IGH SCHOOL 2008 N/A SECONDARY COMPLETED VOCATIONAL / N/A N/A TRADE COURSE COLLEGE N/A N/A GRADUATE STUDIES N/A N/A SIGNATURE 05/19/2022 DATE

IV. CIVIL S	ERVICE ELIG	IBILITY							
27. CARE	ER SERVICE/ RA 1	1080 (BOARD/ BAR) UNDER WS/ CES/ CSEE	RATING	DATE OF EXAMINATION /	PLACE OF EXAMINA	TION / CONCE	DMENIT	LICENSE (if ap	
BA		WS/ CES/ CSEE ITY / DRIVER'S LICENSE	(If Applicable)	CONFERMENT	PLACE OF EXAMINA	HON / CONFER	KMENT	NUMBER	Date of Validity
	N/A	1			N	/A			
	N/A	<b>A</b>			N	/A			
1/ 1/40 P//			(Cor	tinue on separate sheet	if necessary)				
	EXPERIENCE rate employme	nt. Start from your recen	t work) Description	n of duties should b	e indicated in the attache	ed Work Exp	erience sheet	t.	
(m	JSIVE DATES m/dd/yyyy)	POSITION T (Write in full/Do not			ENCY / OFFICE / COMPANY //Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)
From 03/24/2017	To 05/12/2022	SECURITY G	UARD		IRITY AND INVESTIGATION ENCY INC.	P17,000	INCREMENT N/A	PERMANENT	N
07/21/2016	12/21/2016	FACTORY W			N INCOPORATED	P15,000	N/A	CONTRUCTUAL	N
04/08/2016	06/28/2016	MACHINE OPE	RATOR	PHERICA INTERNA	ATIONAL CORPORATION	P12,000	N/A	CONTRUCTUAL	N
07/03/2015	11/03/2015	FACTORY W	ORKER	COLUMBIA INTERN	ATIONAL FOOD PRODUCT	P17,000	N/A	CONTRUCTUAL	N
08/18/2013	03/06/2015	FACTORY W	ORKER	TIFFANY BRI	EADS AND CAKES	P14,000	N/A	CONTRUCTUAL	N
	I			I		<u> </u>	<u> </u>	1	

		(Con	tinue on separate sheet	if necessary)			
SIGNA	TURE	-69		DATE	05/19/2022		

CS FORM 212 (Revised 2017), Page 2 of 4

VI. VOLUNTARY WORK OR INVOLVEMENT	IN CIVIC / NON-GOVERNMEN	T/PEOPLE/	/OLUNTARY	ORGANIZATI	ON/S	
29. NAME & ADDRESS OF O (Write in full			VE DATES ld/yyyy)	NUMBER OF HOURS		POSITIO
,	,	From	То			
N/A		N/A	N/A			
	(Con	ntinue on separate	sheet if necessar	y)		
VII. LEARNING AND DEVELOPMENT (L&D, (Start from the most recent L&D/training program and inclu				Chief/Executive/Mar	nagerial positions)	
Total Crown the most recent East anning program and mora	ac only the relevant Easy a anning taken to		DATES OF	Jilleli Excount o mai	Type of LD	
30. TITLE OF LEARNING AND DEVELOPMENT INTE (Write in full			IDANCE ld/yyyy)	NUMBER OF HOURS	( Managerial/ Supervisory/ Technical/etc)	
SERVICE ENHANCEMENT SECURITY TRAINING COU	ner	From	To	24.0		REJAN SEG
RE-TRAINING COURSE	NOE	12/01/2020	12/03/2020	24.0 60.0	N/A N/A	REJAN SEC
NE-HAMMING GOOKGE		12/04/2020	12/10/2020	00.0	II/A	REJAN SE
VIII. OTHER INFORMATION	(Con	tinue on separate	sheet if necessar	y)		
31. SPECIAL SKILLS and HOBBIES	32. NON	I-ACADEMIC DISTII		GNITION		33. MEM
COOKING		(Writ	e in full)			
WILLINGNESS TO LEARN		IN/A	`			
FLEXIBILITY						
DETERMINATION AND PERSISTENCE						
DETERMINATION AND PERSISTENCE						

	(Continue on separate sheet if necessary		
SIGNATURE	-0	DATE	

\/NATURE OF WORK
N/A
CONDUCTED/ SPONSORED BY (Write in full)
URITY TRAINING ACADEMY,INC
CURITY TRAINING ACADEMY, INC
BERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
N/A

05/19/2022			
CS FORM 212 (Revised 2017), F	Page 3 of 4		

34.	Are you related by consanguinity or affinity to the appointing 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	e supervision over you in the Office,	☐ YES ☐ YES If YES, give deta	✓ NO ✓ NO ils:
35.	a. Have you ever been found guilty of any administrative off	ense?	YES If YES, give deta	✓ NO ils:
	b. Have you been criminally charged before any court?		YES If YES, give deta Date Filed: Status of Case/s:	
36.	Have you ever been convicted of any crime or violation of any by any court or tribunal?	ny law, decree, ordinance or regulation	YES If YES, give deta	✓ NO ils:
37.	Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, er out (abolition) in the public or private sector?		YES If YES, give deta	✓ NO ils:
38.	a. Have you ever been a candidate in a national or local ele- Barangay election)?	ction held within the last year (except	☐ YES If YES, give deta	✓ NO ails:
	b. Have you resigned from the government service during the election to promote/actively campaign for a national or local		☐ YES If YES, give deta	✓ NO ails:
39.	Have you acquired the status of an immigrant or permanent	resident of another country?	YES If YES, give deta	✓ NO ils (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 If YES, please speci	✓ NO ify:
b.	Are you a person with disability?		YES If YES, please speci	✓ NO ify ID No:
C.	Are you a solo parent?		YES If YES, please spec	✓ NO ify ID No:
41.	REFERENCES (Person not related by consanguinity or affinity to applicant	t /appointee)		
	NAME	ADDRESS	TEL. NO.	
	SAMSONA T. BISMANOS	BARANGAY MONTEVERDE BAYBAY, CITY	N/A	
	WILFREDO T. PATOLILIC	BARANGAY HIGULO-AN BAYBAY,CITY	N/A	
	CELSO P. PALMA SR	BARANGAY HIGULO-AN BAYBAY,CITY	N/A	
42.	I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertine Philippines. I authorize the agency head/authorized repre I agree that any misrepresentation made in this doctadministrative/criminal case/s against me.	ent laws, rules and regulations of the esentative to verify/validate the content	Republic of the s stated herein.	
<i>Pl</i> Ge	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)  LEASE INDICATE ID Number and Date of Issuance overnment Issued ID: TIN ID  //License/Passport No.: 277-973-337-000	Signature (Sign inside the b	oox)	
Da	ate/Place of Issuance: 07/08/2009/MALABON CITY	05/19/2022 Date Accomplished		

SUBSCRIBED AND SWORN to before me this	, affiant exhibiting his/her validly issue	d government ID
	Person Administering Oath	

CS

N/A
N/A
N/A
1071
N/A
N/A
N/Δ
N/A
N/A
NI/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
N/A N/A
N/A N/A
N/A N/A
N/A N/A



Right Thumbmark

as indicated above.

FORM 212 (Revised 2017), Page 4 of 4