CS Form No. 212 Revised 2017	PERSOI	NAL DAT	A SH	IEE'	Г				
WARNING: Any misrepresenta	tion made in the Personal Data Sheet and th	e Work Experience Sheet s	hall cause the	filing of ac	lministrativ	e/criminal case/s	against the	person	
concerned.	TO FILLING OUT THE PERSONAL DATA SH	•		_			. <b>.</b>		
Print legibly. Tick appropriate boxes	$\hfill \square$ ) and use separate sheet if necessary. Indicate	• •			1. CS ID No.		(Do not fill up. F	or CSC use only	
I. PERSONAL INFORMATIO									
2. SURNAME	VERBA					NAME EXTENSION (JR	) SB)		
FIRST NAME	DAVID CHRISTIAN					NAME EXTENSION (JR	, 51()		
MIDDLE NAME	CABILLAN						N/A		
3. DATE OF BIRTH (mm/dd/yyyy)	24 06 1997	16. CITIZENSHIP	✓ Filipino		ino	Dual Citizenship  by birth by naturalizatio		ization	
4. PLACE OF BIRTH	NATIVITY MOTHER & CHILD CLINIC, TACLOBAN CITY, LEYTE	If holder of dual citize	nship,	ip,		Pls. indicate country:			
5. SEX	✓ Male Female	please indicate the de	etails.					•	
6 CIVIL STATUS	✓ Single Married	17. RESIDENTIAL ADDRESS	BLOCK 10 LOT 30  House/Block/Lot No.  VILLA LOLITA SUBDIVISION  Subdivision/Village			COGON ROAD  Street  83-B  Barangay			
	Widowed Separated								
	Other/s:	-							
7. HEIGHT (m)	1.7907		I	ty/Municipality	OBAN CITY /Municipality		LEYTE Province		
8. WEIGHT (kg)	94.3	ZIP CODE	6500						
9. BLOOD TYPE	0+	18. PERMANENT ADDRESS	1	BLOCK 10 LOT 30 House/Block/Lot No.			COGON ROAD Street		
10. GSIS ID NO.	N/A	1	VILLA LOI	LITA SUBDI	IVISION	83-B			
11. PAG-IBIG ID NO.	1212-7472-4925	-		division/Village LOBAN CIT		Barangay LEYTE			
12. PHILHEALTH NO.	13-250900916-7	ZIP CODE	6500	ty/Municipality		Province			
13. SSS NO.	34-6825623-1	19. TELEPHONE NO.	N/A						
14. TIN NO.	381-492-768-000	20. MOBILE NO.	(+63) 917-621	I-38-78					
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	davidchris		mail com				
II. FAMILY BACKGROUND	INA .	21. E-WAIL ADDRESS (II ally)	uavidenins	шапушу	man.com				
	N/A		23. NAME of CH	ILDREN (Writ	e full name and	d list all)	DATE OF BIRT	ΓΗ (mm/dd/yyyy)	
FIRST NAME	N/A	NAME EXTENSION (JR., SR)	23. NAME of CHILDREN (Write full name and			N/A			
MIDDLE NAME	N/A	N/A	N/A						
OCCUPATION	N/A	N/A							
EMPLOYER/BUSINESS NAME	N/A								
BUSINESS ADDRESS	N/A	-							
TELEPHONE NO.	N/A								
24. FATHER'S SURNAME	VERBA								
FIRST NAME	DANILO	NAME EXTENSION (JR., SR)							
MIDDLE NAME	CATENZA	N/A							
25. MOTHER'S MAIDEN NAME	CATENZA	IN/A							
	CARILLAN								
SURNAME	CABILLAN								
FIRST NAME	MARLENE								
MIDDLE NAME	SAY			(Co	ontinue on se <sub>l</sub>	parate sheet if neces	ssary)		
III. EDUCATIONAL BACKG	ROUND							SCHOLARSHIP/	
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGRE (Write in full)	EE/COURSE		To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	ACADEMIC HONORS RECEIVED	
ELEMENTARY	RIZAL CENTRAL SCHOOL	PRIMARY EDUCATION		2004	2010	ELEMENTARY	2010	N/A	
SECONDARY	EASTERN VISAYAS STATE UNIVERSITY - SECONDARY LABORATORY SCHOOL	SECONDARY EDUCATION		2010	2014	HIGHSCHOOL	2014	N/A	
VOCATIONAL / TRADE COURSE	TOYOTA MOTOR PHILIPPINES SCHOOL OF TECHNOLOGY	AUTOMOTIVE SERVICING I		2023	2024	VOCATIONAL	2024	N/A	
COLLEGE	UNIVERSITY OF SANTO TOMAS	BSBA MAJOR IN HUMAN DEVELOPMENT MANA		2014	2020	BACHELOR'S DEGREE	2020	N/A	
GRADUATE STUDIES	N/A	N/A		N/A	N/A	N/A	N/A	N/A	
		ontinue on separate sheet if nec	essary)						
SIGNATURE	Cleverba			DA	TE	AUGUST	14, 2024	1	

IV CIVIL SE	ERVICE ELIG	IRII ITV							
		1080 (BOARD/ BAR) UNDER	2172	DATE OF				LICENSE (if ap	plicable)
SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE			RATING (If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINA	PLACE OF EXAMINATION / CONFERMENT			Date of Validity
CAREER SERVICE PROFESSIONAL			81.07%	6 08 2017	QUEZON CITY			N/A	N/A
CAREER SERVICE SUB-PROFESSIONAL 8			83.74%	12 03 2017	12 03 2017 MANILA				N/A
V WORK E	XPERIENCE		(Cor	ntinue on separate sheet	if necessary)				
		nt. Start from your recer	nt work) Description	on of duties should	be indicated in the attac	hed Work Ex		et.	
	SIVE DATES n/dd/yyyy)	POSITION TI (Write in full/Do not		DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)		MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)
From	To	ADMIN ACCI	TANT.	TOFF ADTINITE	D47.000	INCREMENT			
26 01 2023 9 11 2020	30 04 2024 22 02 2021	ADMIN ASSIS		TREE ART INTERNATIONAL PTE. LTD.  MANULIFE DATA SERVICES INC.		P17,000 P19,468	N/A N/A	PROBATIONARY	N N
9 11 2020	22 02 2021	CONTACT CENTRE	ASSOCIATE	MANULIFE DA	TIA SERVICES INC.	P19,408	N/A	PROBATIONARY	N
			(Coi	ntinue on separate sheet	if necessary)				
SIGNA	TURE	Oeverba				AUGUS	ST 14, 202	24	
							-	FORM 212 (Revised 20	

VI. VOLUNTARY WORK OR INVOLVEMENT I	N CIVIC / NON-GOVERNMENT /	PEOPLE / VC	DLUNTARY O	RGANIZATION	I/S		
29. NAME & ADDRESS OF OF (Write in full)			/E DATES d/yyyy)	NUMBER OF HOURS		POSITION / NATURE OF WORK	
(Title II lei)		From To					
N/A		N/A	N/A	N/A		N/A	
		tinue on separate s		) )			
VII. LEARNING AND DEVELOPMENT (L&D)	INTERVENTIONS/TRAINING PR						
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	N/A	N/A	
	(Con	tinue on separate s	sheet if necessary	<u> </u> ')			
VIII. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)					33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
MICROSOFT OFFICE PROFICIENT	N/A					N/A	
COMPUTER LITERATE							
CUSTOMER SERVICING SKILL							
DATA ENTRY SKILL							
SIGNATURE	Acverba	tinue on separate s	sneet if necessary		ATE	AUGUST 14, 2024	
	WUVUU					CS FORM 212 (Revised 2017), 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,		TO THE RESIDENCE OF SETSON A STANLEY				
	a. within the third degree?		YES INO				
	b. within the fourth degree (for Local Government Unit - Care	er Employees)?	YES INO				
	Sales Communication Conference Co	an Employeesy:	If YES, give details:				
			II 1E3, give details.				
35.	a. Have you ever been found guilty of any administrative offe	nse?	YES VO	-			
			If YES, give details:				
			,				
	b. Have you been criminally charged before any court?	☐ YES ☑ NO					
		If YES, give details:					
		Date Filed:					
-		No. of Charles and Discontinuous	Status of Case/s:				
36.	Have you ever been convicted of any crime or violation of any	y law, decree, ordinance or regulation by	☐ YES ☑ NO If YES, give details:				
	any court or tribunal?						
	Section (Section) (Section)		By or make, the properties of the second properties of the second				
37.	Have you ever been separated from the service in any of the		☐ YES ☑ NO				
	dropped from the rolls, dismissal, termination, end of term, fin the public or private sector?	ished contract or phased out (abolition) in	If YES, give details:				
38.	a. Have you ever been a candidate in a national or local elect	tion held within the last year (except	☐ YES ☑ NO				
	Barangay election)?		If YES, give details:				
	b. Have you resigned from the government service during the		☐ YES ☑ NO				
	election to promote/actively campaign for a national or local c	andidate?	If YES, give details:				
39.	Have you acquired the status of an immigrant or permanent re	esident of another country?	YES V NO				
			If YES, give details (country):				
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magrand (c) Solo Parents Welfare Act of 2000 (RA 8972), please a	na Carta for Disabled Persons (RA 7277);					
a.	Are you a member of any indigenous group?	answer the following items.					
	, , , , , , , , , , , , , , , , , , , ,		☐ YES ☑ NO If YES, please specify:				
b.	Are you a person with disability?		YES V NO				
			If YES, please specify ID No:				
C.	Are you a solo parent?		☐ YES ☑ NO If YES, please specify ID No:				
11	DEFEDENCES (Description)		in red, places specify to the	_			
41.	REFERENCES (Person not related by consanguinity or affinity to applicant						
	NAME	ADDRESS	TEL. NO. (karenpang283@g				
_	KAREN PANG	SINGAPORE	mail.com)				
RAINIER B. CRUZ		QUEZON CITY	(rainier_cruz@ma nulife.com)				
	ELEIGHN GRACE CASTRO	MANILA	(emcastro@ust.ed u.ph)				
42.	I declare under oath that I have personally accomplished this		ct and complete				
	statement pursuant to the provisions of pertinent laws, rul						
	authorize the agency head/authorized representative to verify misrepresentation made in this document and its attachment		agree that any diverba				
	against me.	The state states the iming of definitional active	DAVID CHRISTIAN C. VERBA				
_			and the second second				
G	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)  LEASE INDICATE ID Number and Date of Issuance	MOTHEROODER'S ENGINEERING THE GRADINGTON	11 11 11 11 11 11 11 11 11 11 11 11 11				
	overnment Issued ID: PASSPORT						
H	License/Passport No.: P5311060B						
H		oox)					
Da	te/Place of Issuance: 07/13/2020	Right Thumbmark					
	SUBSCRIBED AND SWORN to before me this	2024 affiant √yhihitir	ig his/her validly issued government ID as indicated above.	_			
	30-		The state of the s				
		-04-Th					
		Person Administering Oath	180				