CS Form No. 212 Revised 2025

## **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 FIT Print legibly. Tick appropriate boxes	LLING OUT THE PERSONAL DATA SHEET (PDS) BEF s ( ) and use separate sheet if necessary. Indica			ATE	1. CS ID No.		/Do not fill up. E	or CSC use only	
I. PERSONAL INFORMATION		ate N/A ii flot applicable. <b>DO</b> i	NOT ABBREVI	AIE.	I. CS ID NO.		(Do not nii up. F	or CSC use only	
2. SURNAME	Gagno								
FIRST NAME	Katrena	NAME EXTENSION (JR., SR							
MIDDLE NAME	Mesias								
3. DATE OF BIRTH		16. CITIZENSHIP							
(mm/dd/yyyy)	(mm/dd/yyyy) 07/27/1993			Filipino Dual Citizenship  by birth by naturalization					
4. PLACE OF BIRTH	Tanauan, Leyte	If holder of dual citize	Pls. indicate country:						
5. SEX AT BIRTH	☐ Male ✓ Female	please indicate the d	etails.	Philippines					
6. CIVIL STATUS	✓ Single	17. RESIDENTIAL ADDRESS	n/a		Zone 9b				
	Widowed Separated		Hou	ise/Block/Lot N	lo.	Street Telegrafo			
	Other/s:		n/a Subdivision/Village TOLOSA City/Municipality			Barangay			
7. HEIGHT (m)	1.71	ZIP CODE							
8. WEIGHT (kg)	69.00		олулиинырашу			Province 6503			
9. BLOOD TYPE	0	18. PERMANENT ADDRESS	l lau	n/a House/Block/Lot No.			Zone 9b		
10. UMID ID NO.				n/a			Street Telegrafo		
11. PAG-IBIG ID NO.	121247262223			Subdivision/Village TOLOSA			Barangay LEYTE		
12. PHILHEALTH NO.	130253408279	ZIP CODE	Ci	ty/Municipality 6503			Province		
13. PHilSys NO. (PSN)		19. TELEPHONE NO.				N/A			
14. TIN NO.	357865525	20. MOBILE NO.		099-244-1367					
15. AGENCY EMPLOYEE NO.	V03024	21. E-MAIL ADDRESS (if any)	katrena.gagno@vsu.edu.ph			h			
II. FAMILY BACKGROUND					_				
22. SPOUSE\'S SURNAME	N/A	NAME EXTENSION (JR., SR) N/A		HILDREN (Write full name and list all)			DATE OF BIRTH (mm/dd/yyyy)		
FIRST NAME	N/A			Keillah Janelle G. Benjamin			08/07/2015		
MIDDLE NAME	N/A			lillian Katele	en G. Benja	02/27/2020			
OCCUPATION	N/A	Ka		assandra Jewelle G. Benjamin			06/01/2024		
EMPLOYER/BUSINESS NAME	N/A								
BUSINESS ADDRESS	N/A								
TELEPHONE NO.	N/A								
24. FATHER\'S SURNAME	N/A								
FIRST NAME	N/A	NAME EXTENSION (JR., SR) N/A							
MIDDLE NAME	N/A								
25. MOTHER\'S MAIDEN NAME	EMILY DE VEYRA ME	SIAS							
SURNAME	MESIAS								
FIRST NAME	EMILY								
MIDDLE NAME	DE VEYRA			(Continue on separate sheet if necessary)					
III. EDUCATIONAL BACKG	ROUND					HOUSET		DOUGLA POLITIC	
26. LEVEL	NAME OF SCHOOL BASE (Write in full)		BASIC EDUCATION/DEGREE/COURSE (Write in full)		ATTENDANCE To	HIGHEST LEVEL/UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED	
ELEMENTARY	Calogcog Elementary School	Elementary		1999	2005	(ii nor graduated)	2005	N/A	
SECONDARY	Tanauan School of Craftsmanship and Home Industries	High School		2005	2009		2009	N/A	
VOCATIONAL/ TRADE COURSE	N/A								
COLLEGE	Visayas State University Tolosa	Bachelor of Science in Cri	minology	2010	2014		2014	Cum Laude	
GRADUATE STUDIES	University of the Cordilleras	Masters of Science in Crimi		2022	2025		2025	N/A	
SIGNATURE	(Continue on separate sheet if necessary)				ATE		10/15/2025		

IV. CIVIL S	SERVICE I	ELIGIBILITY							
27. CES/CSEE/CAREER SERVICE/RA 1080 (BOARD/		DATE OF		OF		LICENSE (if applicable)			
BAR)/UND	DER SPECIAL LA	WS/CATEGORY II/ IV ELIGIBILITY IR UNIFORMED PERSONNEL	(If Applicable) EXAMI		ATION / RMENT	PLACE OF EXAMINA	ATION / CONFERMENT	NUMBER	Valid Until
N/A		N/A	N/A N/		1	N/A	N/A	N/A	
				(Continue on	separate she	eet if necessary)			
	EXPERIEI		work) Descriptio	n of duties	s should l	be indicated in the attache	d Work Experience sheet.		
28. INCLU	ISIVE DATES				s should be indicated in the attached Work Experience sheet.			OTATUS ST	GOV'T
(mm/dd/yyyy) POSITIO (Write in full/Do		not abbreviate)			DEPARTMENT / AGENCY / C (Write in full/Do not a	STATUS OF APPOINTMENT	SERVICE (Y/N)		
08/11/2025	From         To           08/11/2025         PRESENT         Instru		ictor I			Visayas State Univer	Temporary	Y	
, , , , , , , , , , , , , , , , , , , ,						,	•	. , ,	
				(Continue on	separate she	eet if necessary)		ı	I
SIGNATURE			DATE			10/15			
							C	FORM 212 (Revised 20	)17), Page 2 of

/I. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S								
29. NAME & ADDRESS OF OR (Write in full)		INCLUSIV	/E DATES  d/yyyy)   To	NUMBER OF HOURS	POSITION / NATURE OF WORK			
N/A			N/A	N/A		N/A		
		(Continue on separat	te sheet if necessary)					
VII. LEARNING AND DEVELOPMENT (L&D) (Start from the most recent L&D/training program and include	) INTERVENTIONS/TRAINING	G PROGRAM	IS ATTENDE	)	agerial positions)			
		INCLUSIVE	DATES OF		Type of LD	CONDUCTED/CDONCODED BY		
30. TITLE OF LEARNING AND DEVELOPMENT INTER (Write in full)	RVENTIONS/TRAINING PROGRAMS	ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)		
N/A		From N/A	To N/A	N/A	N/A	N/A		
1071		1471	197	14/7	1973	1071		
VIII OTUED WEODWATION		Continue on separa	te sheet if necessary)					
VIII. OTHER INFORMATION		N. 404D51410 DIO	TINOTIONS / DESC	ONITION	_	MEMBERSHIP IN ACCOUNT ON OR CANITATION		
31. SPECIAL SKILLS and HOBBIES	32. NO	ON-ACADEMIC DIS (W	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)					
N/A		N.	N/A					
		(Continue on separa	te sheet if necessary)					
SIGNATURE				DA	TE	10/15/2025		

34.	Are you related by consanguinity or affinity to the appoint the chief of bureau or office or to the person who has improved the Bureau or Department where you will be apppoint a within the which the person.		[ duo			
	<ul><li>a. within the third degree?</li><li>b. within the fourth degree (for Local Government Unit - 0</li></ul>	☐YES ☐YES  If YES, give details:	✓ 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?	TYES  If YES, give details:  Date Filed:  Status of Case/s:	✓ NO		<u> </u>	
36.	Have you ever been convicted of any crime or violation or regulation by any court or tribunal?	YES If YES, give details:	✓NO			
37.	Have you ever been separated from the service in any of retirement, 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)?	YES If YES, give detail	✓ NO S:		_	
	b. Have you resigned from the government service during last election to promote/actively campaign for a national	YES If YES, give detail	✓ NO S:			
39.	Have you acquired the status of an immigrant or perman-	YES If YES, give details (	✓NO country):		_	
40.	Pursuant to: (a) Indigenous People\'s Act (RA 8371); (b) 7277); and (c) Solo Parents Welfare Act of 2000 (RA 897					
a.	Are you a member of any indigenous group?	2), produce anower the following items.	YES	✓NO		
b.	Are you a person with disability?	If YES, please speci YES If YES, please speci	<b>✓</b> NO		_	
C.	Are you a solo parent?		YES If YES, please speci	✓ NO fy ID No		_
41.	REFERENCES (Person not related by consanguinity or affinity to applie	cant /appointee)				
	NAME	OFFICE / RESIDENTIAL ADDRESS	CONTACT NO. AND/OR EMAIL			
	Ma. Janine Aguirre	Palo, Leyte	09359855032			
	Erick Gempesao	Calubian, Leyte	09158667656		Passport-sized unfiltered digital picture taken within the last 6 months	
Ruby Ann C. Suyom Jaro, Leyte			09056506392		4.5 cm. X 3.5 cm	
42.	I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertire Philippines. I authorize the agency head/authorized representation made in this documents.	Republic of the stated herein. I		РНОТО		
	administrative/criminal case/s against me.			_		_
	Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver\'s License, c.) PLEASE INDICATE ID Number and Date of Issuance					
9	overnment Issued ID: PRC					
	D/License/Passport No.: 0117697	box)				
	ate/Place of Issuance: 10/15/2025 / PRC TACLOBAN			Right Thumbmark		
	SUBSCRIBED AND SWORN to before me this	, affiant exh	nibiting his/her validly iss	sued gove	rnment ID as indicated above.	
				-		
		ath				