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 concerned.

READ THE ATTACHED CHING TO FILLING OUT THE PERSONAL DATA SHEET (PDS) REFORE ACCOMPLISHING THE PDS FORM

READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM.									
Print legibly. Tick appropriate boxes () and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. 1. CS ID No. (Do not fill up. For CSC use only) 1. PERSONAL INFORMATION									
2. SURNAME	Milleza								
FIRST NAME	Myra NAME EXTENSION (JR., SR) N/A								
MIDDLE NAME	Ruiz								
3. DATE OF BIRTH (mm/dd/yyyy)	08/29/1976 16. CITIZENSHIP Filipino Dual Citizenship by birth by naturalization					lization			
4. PLACE OF BIRTH	Sta. Cruz, Manila	If holder of dual citize	enship,						
5. SEX	☐ Male ✓ Female	please indicate the d	etails.	Philippines					
6. CIVIL STATUS	☐ Single ☑ Married ☐ Separated ☐ Other/s:	17. RESIDENTIAL ADDRESS	Purok 1 House/Block/Lot No. Subdivision/Village			Street Gabas Barangay			
7. HEIGHT (m)	1.61			BAYBAY City/Municipality			LEYTE		
8. WEIGHT (kg)	60.00	ZIP CODE		ity/Municipality 6521			Province		
9. BLOOD TYPE	AB+	18. PERMANENT ADDRESS		Purok 1					
10. GSIS ID NO.	N/A		House/Block/Lot No.		0.	Street Gabas			
			Sui	bdivision/Villag BAYBAY	е	Barangay LEYTE			
11. PAG-IBIG ID NO.	N/A	1	С	ity/Municipality			Province		
12. PHILHEALTH NO.	N/A	ZIP CODE			6521				
13. SSS NO.	N/A	19. TELEPHONE NO.	N/A						
14. TIN NO.	N/A	N/A 20. MOBILE NO. 975-732-1363							
15. AGENCY EMPLOYEE NO.	VJO01281	21. E-MAIL ADDRESS (if any)			myrarmill	eza@gmail.com			
II. FAMILY BACKGROUND									
22. SPOUSE\'S SURNAME			23. NAME of Ch	IILDREN (Write full name and list all) DATE OF BIRTH (n			H (mm/dd/yyyy)		
FIRST NAME	EDWIN	NAME EXTENSION (JR., SR)		MARY JOYCE R. MILLEZA			08/16/1996		
MIDDLE NAME	ISRAEL			KENNETH CARL R. MILLEZA			11/02/1999		
OCCUPATION	CHAIRMAN-BANTRANS CO	OPERATIVE	TRICIA MAE R. MILLEZA		ZA	03/04/2002			
EMPLOYER/BUSINESS NAME			KHAY		KHAYCEE R. MILLEZA			02/06/2004	
BUSINESS ADDRESS		CANDADAM, BAYBAY CITY, LEYTE		MARIA RHYZA R. MLLEZA			09/08	3/2011	
TELEPHONE NO.	0965-4922-886								
24. FATHER\'S SURNAME	11.1								
FIRST NAME	·								
MIDDLE NAME	CUESTA								
25. MOTHER\'S MAIDEN NAME	GALVEZ								
SURNAME	GALVEZ								
FIRST NAME MIDDLE NAME	MARIANITA CORDOVA								
MIDDLE NAME CORDOVA (Continue on separate sheet if necessary) III. EDUCATIONAL BACKGROUND									
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGR (Write in full)	EE/COURSE	PERIOD OF A	To	HIGHEST LEVEL/UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED	
ELEMENTARY	N/A					, , , , , , , , , , , , , , , , , , , ,			
SECONDARY	N/A								
VOCATIONAL/ TRADE COURSE	N/A								
COLLEGE	N/A								
GRADUATE STUDIES	N/A								
	<u> </u>	Continue on separate sheet if nece	essary)						
SIGNATURE				DA	\TE		06/10/2024		

IV.	IV. CIVIL SERVICE ELIGIBILITY									
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER RATING			DATING	DATE OF				LICENSE (if a	LICENSE (if applicable)	
			(If Applicable)	EXAMINATION / CONFERMENT	ATION / CONFER	TION / CONFERMENT		Date of Validity		
	N/A N/A		N/A	N/A	N/A			N/A	N/A	
(Continue on separate sheet if nece				pot if pocossand						
		EXPERIE								
(Inc		vate employm JSIVE DATES	ent. Start from your recent	t work) Descripti	on of duties should k	e indicated in the attached	d Work Exper	SALARY/ JOB/		26: "
		(mm/dd/yyyy) POSITION TITLE (Write in full/Do not abbreviate)		LE obreviate)	DEPARTMENT / AG (Write in ful	MONTHLY SALARY	PAY GRADE (if applicable)& STEP (Format"00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)	
	N/A	N/A	N/A		N/A N/A N				N/A	N/A
_										
					(Continue on separate she	eet if necessary)				
	SIGNATURE					DATE	06/10/2024			
								CS	FORM 212 (Revised 20	017), Page 2 of 4

VI. 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		N/A	
		(Continue on separa	te sheet if necessary)				
VII. LEARNING AND DEVELOPMENT (L&D) (Start from the most recent L&D/training program and include					agerial positions)		
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)			E DATES OF IDANCE d/yyyy) To	NUMBER OF HOURS	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	
		0					
VIII. OTHER INFORMATION	(Continue on separate sheet if necessary) VIII. OTHER INFORMATION						
31. SPECIAL SKILLS and HOBBIES	32. NO		TINCTIONS / RECO	OGNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
N/A		N	/A			N/A	
SIGNATURE		(Continue on separa	te sheet if necessary)		NTE	06/10/2024	
SIGNATURE				UA	1/2	00/10/2024	

34.	Are you related by consanguinity or affinity to the apportune the chief of bureau or office or to the person who has in Office, Bureau or Department where you will be appporal, within the third degree? b. within the fourth degree (for Local Government Unit	YES YES If YES, give details:	_no _no			
35.	a. Have you ever been found guilty of any administrati	YES []NO			
	b. Have you been criminally charged before any court	YES If YES, give details: Date Filed: Status of Case/s:	NO			
36.	Have you ever been convicted of any crime or violation regulation by any court or tribunal?	YES If YES, give details:]NO			
37.	Have you ever been separated from the service in any retirement, dropped from the rolls, dismissal, terminati 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 loc (except Barangay election)?	YES [
	b. Have you resigned from the government service dulast election to promote/actively campaign for a nation	YES If YES, give details:				
39.	Have you acquired the status of an immigrant or perm	☐YES ☐NO If YES, give details (country):				
a. b.	Pursuant to: (a) Indigenous People\'s Act (RA 8371); (7277); and (c) Solo Parents Welfare Act of 2000 (RA 8 Are you a member of any indigenous group? Are you a person with disability? Are you a solo parent?	☐YES ☐ If YES, please specify: ☐YES ☐ If YES, please specify IC ☐YES ☐	NO			
41.	REFERENCES (Person not related by consanguinity or affinity to a	policant /appointee)	If YES, please specify ID	J NO		
	NAME	ADDRESS	TEL. NO.			
				ID picture taken within the last 6 months 3.5 cm x 4.5 cm (passport size) With full and handwritten		
				name tag and signature over printed name		
42	I declare under oath that I have personally accomplis complete statement pursuant to the provisions of pe Philippines. I authorize the agency head/authorized re agree that any misrepresentation made in this do administrative/criminal case/s against me.	rtinent laws, rules and regulations of the presentative to verify/validate the content	Republic of the stated herein. I	Computer generated or photocopied picture is not acceptable PHOTO		
е	Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driven's License, tc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: N/A					
	D/License/Passport No.: N/A	Signature (Sign inside the	box)			
	Date/Place of Issuance: N/A		Right Thumbmark			
	SUBSCRIBED AND SWORN to before me this	hibiting his/her validly issued	government ID as indicated above.			
		Doman Administration O	oth			
1		Person Administering O	aul			