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 GUIDE TO FIL Print legibly. Tick appropriate boxes	LLING OUT THE PERSONAL DATA SHEET (PDS) BEI s ( ) and use separate sheet if necessary. Indica			ATE	1. CS ID No.	,	(Do not fill up. E	or CSC use only)	
I. PERSONAL INFORMATIO		ate N/A ii Not applicable. DO i	NOT ABBREVIA	AIE.	1. C3 ID NO.		(Do Hot IIII up. F	or CSC use only	
2. SURNAME	Sy								
FIRST NAME	Joana Lin NAME EXTENSION (JR.								
MIDDLE NAME	Joana Lin  Caintic								
3. DATE OF BIRTH (mm/dd/yyyy)	01/09/1989		<b>✓</b> Filip	pino	Dual Citizenship	o	lization		
4. PLACE OF BIRTH	Baybay, Leyte	If holder of dual citize	nship,						
5. SEX	☐ Male ✓ Female	please indicate the d	etails.	Philippines					
6. CIVIL STATUS	Single Married Widowed Separated Other/s:	17. RESIDENTIAL ADDRESS		House/Block/Lot No. Subdivision/Village			Street  Barangay		
7. HEIGHT (m)	1.50			City/Municipality				Province	
8. WEIGHT (kg)	70.00	ZIP CODE		,,,					
9. BLOOD TYPE	N/A	18. PERMANENT ADDRESS	Hou	House/Block/Lot No.				Street	
10. GSIS ID NO.	N/A		Sut	odivision/Villag	10	Barangay			
11. PAG-IBIG ID NO.	121187876791		Ci	ity/Municipality	,	Province			
12. PHILHEALTH NO.	130253582929	ZIP CODE							
13. SSS NO.	3421914934	19. TELEPHONE NO.				N/A			
14. TIN NO.	712469169000	20. MOBILE NO.		939-343-9199					
15. AGENCY EMPLOYEE NO.	21. E-MAIL ADDRESS (if any)			joana.s	y@vsu.edu.ph				
II. FAMILY BACKGROUND									
22. SPOUSE\'S SURNAME	SY		23. NAME of CH	AME of CHILDREN (Write full name and list all)  DATE OF BIRTI			H (mm/dd/yyyy)		
FIRST NAME	ROEL	NAME EXTENSION (JR., SR)	Н	HELAENA KATHLEEN C. SY 08/26/2			5/2013		
MIDDLE NAME	PEDERICOS			KYZE K	AEDE C. SY	11/19/2022			
OCCUPATION	LABORER								
EMPLOYER/BUSINESS NAME	VISAYAS STATE UNIVE	ERSITY							
BUSINESS ADDRESS	BUSINESS ADDRESS								
TELEPHONE NO.									
24. FATHER\'S SURNAME									
FIRST NAME	CECILIO	NAME EXTENSION (JR., SR) Jr.							
MIDDLE NAME	ALBA								
25. MOTHER\'S MAIDEN NAME	ELENITA TARIPE VALI	ENCIA							
SURNAME	CAINTIC								
FIRST NAME	ELENITA								
MIDDLE NAME VALENCIA (Continue on separate sheet if necessary)  II. EDUCATIONAL BACKGROUND									
26.				DEDIOD OF	ATTENDANCE	HIGHEST		SCHOLARSHIP/	
LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGRI (Write in full)	EE/COURSE	From	To	LEVEL/UNITS EARNED (if not graduated)	YEAR GRADUATED	ACADEMIC HONORS RECEIVED	
ELEMENTARY	Guadalupe Elementary School	Elementary		1995	2001		2001	N/A	
SECONDARY	LEYTE STATE UNIVERSITY LABORATORY HIGH SCHOOL	High School		2001	2005		2005	N/A	
VOCATIONAL/ TRADE COURSE	N/A	Rachalor of Science in Untol Dester	rant and Tourism						
COLLEGE	LEYTE STATE UNIVERSITY	Bachelor of Science in Hotel Restat Management	arant and Tourism	2005	2009		2009	N/A	
GRADUATE STUDIES	N/A								
SIGNATURE	(C	Continue on separate sheet if nece	essary)		ATE		12/29/2023		
GIGINATURE	1			J D P	1/2	1	1212312023		

IV. CIVIL S	SERVICE I	ELIGIBILITY							
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER DATING			DATE OF				LICENSE (if applicable)		
SDECIAL LAWS/CES/CSEE ' RATING		(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT			NUMBER	Date of Validity	
(	Civil Service Professional Passer 81.36		08/04/2019	MAASIN CITY, S	MAASIN CITY, SOUTHERN LEYTE			N/A	
	(Continue on separate sheet if necessary)								
V. WORK (Include priv			t work) Descripti	ion of duties should b	oe indicated in the attached	l Work Exper	ience sheet.		
(mr	SIVE DATES n/dd/yyyy)	POSITION TITI (Write in full/Do not ab			AGENCY / OFFICE / COMPANY MONTHLY PAY GRADE applicable) &		SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format"00-0")/	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/N)
From 07/05/2023	To PRESENT	Job Order		Visavas	State University	603.40	INCREMENT -	Job Order	Y
11/10/2016	08/18/2021	Customer Service Rep	resentative		Concentrix 16,000.00		-	Permanent	N
	TITIOZOTO OSTIOZOZI CONTINUI CONTINUI REPUBBI								
				(Continue on separate she	eet if necessary)				
SIGNA	ATURE				DATE		12/29/	2023	
							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)		INCLUSIN	/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)			
			DATES OF		Type of LD	CONDUCTED/CDONCODED BY		
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)			IDANCE  d/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		
VIII. OTHER INFORMATION		(Continue on separat	te sheet if necessary)					
31. SPECIAL SKILLS and HOBBIES	32. NO		TINCTIONS / RECO	OGNITION	_	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)		
N/A		N/	/A			N/A		
	T (	(Continue on separat	te sheet if necessary)					
SIGNATURE				DA	12/29/2023			

34	Are you related by consanguinity or affinity to the apportune the chief of bureau or office or to the person who has office, Bureau or Department where you will be apppora, within the third degree?  b. within the fourth degree (for Local Government Unit	_	✓NO ✓NO		
35	a. Have you ever been found guilty of any administrati	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		
36.	Have you ever been convicted of any crime or violation regulation by any court or tribunal?	YES If YES, give details:	<b>✓</b> 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?	TYES If YES, give details:	□NO		
38.	a. Have you ever been a candidate in a national or loc (except Barangay election)?	YES If YES, give details:	✓ NO		
	b. Have you resigned from the government service du last election to promote/actively campaign for a nation	YES If YES, give details:	✓ NO		
39.	Have you acquired the status of an immigrant or perm	YES If YES, give details (co	✓ NO ountry):		
a. b.	Pursuant to: (a) Indigenous Peoplel'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	✓NO ID No ✓NO		
41	. REFERENCES (Person not related by consanguinity or affinity to a	pplicant /appointee)	, , , , , , , , , , , , , , , , , , ,	-	
	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
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 deadministrative/criminal case/s against me.	ertinent laws, rules and regulations of the epresentative to verify/validate the content	e Republic of the ss stated herein. I		printed name  Computer generated or photocopied picture is not acceptable  PHOTO
(	Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Drivert's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: N/A  D/License/Passport No.: N/A	Signature (Sign inside the			
lŀ	Date/Place of Issuance: N/A			Right Thumbmark	
L	ONDOODIDED AND OWODAY 1. (			, and the second	
	SUBSCRIBED AND SWORN to before me this	Person Administering O		ea gover	nment ID as indicated above.
	L	/			