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 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) 2. SURNAME NAME EXTENSION (JR., SR) FIRST NAME MIDDLE NAME 3. DATE OF BIRTH 16. CITIZENSHIP Filipino (mm/dd/yyyy) Dual Citizenship by birth by naturalization 4. PLACE OF BIRTH If holder of dual citizenship, Pls. indicate country: please indicate the details. Male Female 5. SEX Single Married 17. RESIDENTIAL ADDRESS 6 CIVIL STATUS Widowed Separated House/Block/Lot No. Street Other/s: Subdivision/Village Barangay 7. HEIGHT (m) City/Municipality 8. WEIGHT (kg) ZIP CODE 18. PERMANENT ADDRESS 9. BLOOD TYPE House/Block/Lot No. 10. GSIS ID NO. Subdivision/Village Barangay 11. PAG-IBIG ID NO. Citv/Municipality Province 12. PHILHEALTH NO. ZIP CODE 13. SSS NO. 19. TELEPHONE NO. 14. TIN NO. 20. MOBILE NO. 15. AGENCY EMPLOYEE NO 21. E-MAIL ADDRESS (if any) I. FAMILY BACKGROUND 22. SPOUSE'S SURNAME 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO. 24. FATHER'S SURNAME NAME EXTENSION (JR., SR) FIRST NAME MIDDLE NAME 25. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME (Continue on separate sheet if necessary) III. EDUCATIONAL BACKGROUND SCHOLARSHIP/ PERIOD OF ATTENDANCE NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE YEAR UNITS EARNED **ACADEMIC** LEVEL GRADUATED (Write in full) HONORS (if not graduated) То ELEMENTARY SECONDARY VOCATIONAL / COLLEGE GRADUATE STUDIES

SIGNATURE

DATE

IV. CIVIL SERVICE ELIGIBILITY								
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER RATING SPECIAL LAWS/ CES/ CSEE		DATE OF EXAMINATION / PLACE OF EXAMINAT		TION / CONFERMENT		LICENSE (if applicable)		
	LITY / DRIVER'S LICENSE	(If Applicable)	CONFERMENT	T B TOE OF EXTERNITY	HOIT/ GOIN EI	WEITI	NUMBER	Date of Validity
		(Cor	 ntinue on separate sheet	if necessary)				
V. WORK EXPERIENCE (Include private employment)		nt work) Descriptio	on of duties should l	be indicated in the attach	ed Work Exp	perience shee	t.	
28. INCLUSIVE DATES (mm/dd/yyyy)	POSITION TITLE		DEPARTMENT / AGENC	Y / OFFICE / COMPANY	MONTHLY	SALARY/ JOB/ PAY GRADE (if	STATUS OF	SERVICE
From To	abbreviate	(Write in full/Do not e)		(Write in not abbreviate)	SALARY	applicable)& STEP (Format "00-0")/ INCREMENT	APPOINTMENT	
SIGNATURE		(Con	ntinue on separate sheet	if necessary) DATE				

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S							
29. NAME & ADDRESS OF ORGANIZATION (Write in full)		S (mm/dd/vvvv)	NUMBER OF HOURS		POSITION / NATURE OF WORK		
		From	То				
VII. LEARNING AND DEVELOPMENT (L&D)		tinue on separate s ROGRAMS AT					
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENT	IONS/TRAINING PROGRAMS	INCLUSIVE DATES OF ATTENDANCE		Type of LD (Managerial/		CONDUCTED/ SPONSORED BY	
TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)			id/yyyy) To	NUMBER OF HOURS	Supervisory/ Technical/etc)	(Write in full)	
		From	10				
	(Con	tinue on separate s	sheet if necessary)				
VIII. OTHER INFORMATION						MEMBERSHIP IN ASSOCIATION/ORGANIZATION	
31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RE	COGNITION	(Write in full)			33. (Write in	
	10	tinue on separate s	shoot if noccoon				
SIGNATURE	Con	uo on separate s	occiii iicodoodiy)	DA	ATE		

34.	Are you related by consanguinity or affinity to the appointic chief of bureau or office or to the person who has immediately bureau or Department where you will be apppointed,					
	a. within the third degree?	│	n			
	b. within the fourth degree (for Local Government Unit - C	YES NO				
	b. Within the loant degree (for Local Covernment Clint C	aroor Employees):	If YES, give details:	J		
			ii 120, givo dotalio.			
35.	a. Have you ever been found guilty of any administrative of	☐ YES ☐ NO	n			
	, , , ,		If YES, give details:	O		
	b. Have you been criminally charged before any court?			NO		
		If YES, give details:				
		Date Filed: Status of Case/s:				
	Have you ever been convicted of any crime or violation of	010103 01 0030/3.				
36.	by any court or tribunal?	any law, decree, ordinance or regulation		NO		
	·,·,·,·		If YES, give details:			
37.	Have you ever been separated from the service in any of	the following modes: resignation,		NO		
	retirement, dropped from the rolls, dismissal, termination, out (abolition) in the public or private sector?	end of term, finished contract or phased	If YES, give details:			
		la stian hald within the last way (see at	-			
38.	 a. Have you ever been a candidate in a national or local e Barangay election)? 	lection held within the last year (except	YES NO			
	Burdinguy Globilony:		If YES, give details:			
	b. Have you resigned from the government service during	YES NO				
	election to promote/actively campaign for a national or loc		If YES, give details:			
39.	Have you acquired the status of an immigrant or permane	nt resident of another country?	☐ YES ☐ NO			
			If YES, give details (country):			
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) M					
	7277); and (c) Solo Parents Welfare Act of 2000 (RA 897)	2), please answer the following items:				
a.	Are you a member of any indigenous group?		NO			
h	Are very a groupe with disability O	If YES, please specify:				
b.	Are you a person with disability?		If YES, please specify ID No	NO NO		
C.	Are you a solo parent?	l <u> </u>	7 NO			
	,		If YES, please specify ID No			
41.	REFERENCES (Person not related by consanguinity or affinity to applica	nt /appointee)				
	NAME	ADDRESS	TEL. NO.			
	IVAIVIL	ADDRESS	TEE. NO.	ID picture taken within the last 6 months		
				4.5 cm. X 3.5 cm (passport size)		
				(passport size)		
				Computer generated		
				or photocopied picture is not acceptable		
42.	I declare under oath that I have personally accomplished					
	complete statement pursuant to the provisions of perti	•	•			
	Philippines. I authorize the agency head/authorized repre I agree that any misrepresentation made in this do			PHOTO		
	administrative/criminal case/s against me.		3 1			
0	PLEASE INDICATE ID Number and Date of					
	esuance					
G	overnment Issued ID:					
IC	0/License/Passport No.:	Signature (Sign inside the b	ox)			
D	ate/Place of Issuance:					
L		Date Accomplished		Right Thumbmark		
	SUBSCRIBED AND SWORN to before me this	, affiant exhibi	ting his/her validly issued govern	nment ID as indicated above.		
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