CS FORM 212 (Revised 2005)							
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	xes ☐ with " ✔ " and use separate sheet if necessary.			1. CS ID No.			(to be filled up by CSC)
I. PERSONAL INFORM	ATION I						
2. SURNAME		<u> </u>	<u> </u>			<u> </u>	
FIRST NAME	1 1 1	<u> </u>	1 1	l	<u> </u>		
MIDDLE NAME				3. NAME E	XTENSION (e.g. Jr., Sr.	.)	
4. DATE OF BIRTH (mm/dd/yyy	/y) /	16. RESIDENTIAL A	DDRESS				
5. PLACE OF BIRTH							
6. SEX	☐ Male ☐ Female						
7. CIVIL STATUS	☐ Single ☐ Widowed		ZIP CODE				
	☐ Married ☐ Separated ☐	17. TELEPHONE NO					
	☐ Annulled ☐ Others, specify	18. PERMANENT A	DDRESS				
8. CITIZENSHIP							
9. HEIGHT (m)							
10. WEIGHT (kg)			ZIP CODE				
11. BLOOD TYPE		19. TELEPHONE NO) .				
12. GSIS ID NO.		20. E-MAIL ADDRES	SS (if any)				
13. PAG-IBIG ID NO.		21. CELLPHONE NO	D. (if any)				
14. PHILHEALTH NO.		22. AGENCY EMPL	OYEE NO.				
15. SSS NO.		23. TIN					
II. FAMILY BACKGRO	UND						
24. SPOUSE'S SURNAME			25. NAME OF C	CHILD (Write full name an	d list all)	DATE OF	BIRTH (mm/dd/yyyy)
FIRST NAME							1 1
MIDDLE NAME							1 1
OCCUPATION							1 1
EMPLOYER/BUS. NAME							1 1
BUSINESS ADDRESS							1 1
TELEPHONE NO.							1 1
	(Continue on separate sheet if necessary)						1 1
26. FATHER'S SURNAME							1 1
FIRST NAME							1 1
MIDDLE NAME							1 1
27. MOTHER'S MAIDEN NAME	•						1 1
SURNAME							1 1
FIRST NAME							1 1
MIDDLE NAME				(Continue	on separate sheet if n	ecessary)	
III. EDUCATIONAL BA	CKGROUND		<u> </u>				
28.	NAME OF SOURCE	DEODEE COURSE	YEAR	HIGHEST GRADE/	INCLUSIVE DAT		SCHOLARSHIP/
LEVEL	NAME OF SCHOOL (Write in full)	DEGREE COURSE (Write in full)	GRADUATED (if graduated)	LEVEL/ UNITS EARNED	ATTENDAN		ACADEMIC HONORS RECEIVED
			(ii graduated)	(if not graduated)	From	То	- NEOLIVED
ELEMENTARY							
SECONDARY							
VOCATIONAL / TRADE COURSE							
COLLEGE							
GRADUATE STUDIES							
	I (Co	ntinue on separate she	l et if necessary)				
	,						Page 1 of 4

IV.	. CIVIL SI	ERVICE ELIG	BILITY							
29. CAREER SERVICE/ RA 1080 (BOARD) BARV			DATE OF				LICENSE (if applicable)			
CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE		RATING	EXAMINATION / CONFERMENT	XAMINATION / PLACE OF EXAMINAT		ION / CONFERMENT		DATE OF RELEASE		
	14/0.51/.5					sheet if necessary)				
V.			(Include private	employment	t. Start from yo	our current work)		1	T	1
30.	(mı	JSIVE DATES m/dd/yyyy)	POSITION (Write in			AGENCY / OFFICE / COMPANY (Write in full)	MONTHLY SALARY	SALARY GRADE & STEP INCREMENT (Format "00-0")	STATUS OF APPOINTMENT	GOV'T SERVICE (Yes / No)
	From / /	To / /						(FOITHAL 00-0)		, ,
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31.	NAME & ADDRESS OF ORGANIZATIO	N		VE DATES dd/yyyy)	NUMBER OF HOURS	POSITION / NATURE OF WORK	
	(Write in full)		From	To			
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			e on separate sheet i	if necessary)	l l		
VII. TRA	AINING PROGRAMS (Start from the r	nost recent tr	raining.)				
32. TI	TITLE OF SEMINAR/CONFERENCE/WORKSHOP/SHORT COURSES (Write in full)		INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	CONDUCTED/ SPONSORED BY (Write in full)	
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		(Continu	e on separate sheet	if necessary)	l l		
VIII. OT	HER INFORMATION				ı		
33.	SPECIAL SKILLS / HOBBIES:	34. N		INCTIONS / RECOGN rite in full)	NITION:	MEMBERSHIP IN 35. ASSOCIATION/ORGANIZATION (Write in full)	
		(Continu	e on separate sheet i	if necessary)	<u>'</u>		
						CS FORM 212 (Revised 2005), Page 3 of	

A Within the third degree (for National Government Employees): appointing authority, recommending authority, color of follooblureaut/department or person who has immediate supervision over you in the Office, Bureau or Department where you will be appointed? b. Within the fourth degree (for Local Government Employees): appointing authority or recommending authority where you will be appointed? If YES, give details: VES NO	36.	Are you related by consanguinity or affinity to any of t	he following:				
appointing authority or recommending authority where you will be appointed?		appointing authority, recommending authority, chief or has immediate supervision over you in the Office, Bur					
b. Have you ever been guilty of any administrative offense? YES, give details: YES, give details:		÷ ,					
b. Have you ever been guilty of any administrative offense? YES, give details: YES, give details:	37	a Have you ever been formally charged?					
38. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court of tribunal? 39. Have you ever been separated from the service in any of the following modes: resignation, retirement, dropped from the rolls, dismissal, termination, end of term, finished contract, AWOL or phased out, in the public or private sector? 40. Have you ever been a candidate in a national or local election (except Barangay election)? 41. Pursuant to: (a) indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), please answer the following items: 41. Are you a member of any indigenous group? 42. Are you a solo parent? 43. Are you a solo parent? 44. REFERENCES (Person not related by consequinty or affinity to applicent? appointee) 45. Any AME ADDRESS TEL NO. 11 District balan within being as a first this Personal Data Sheet has been accomplished by me, and is a true, correct and complete statement pursuant to the provisions of partinent laws, rules and regulations of the Republic of the Philippines. 46. I declare under oath that this Personal Data Sheet has been accomplished by me, and is a true, correct and complete statement pursuant to the provisions of partinent laws, rules and regulations of the Republic of the Philippines. 47. I declare under oath that this Personal Data Sheet has been accomplished by me, and is a true, correct and complete statement pursuant to the provisions of partinent laws, rules and regulations of the Republic of the Philippines. 48. I declare under oath that this Personal Data Sheet has been accomplished by me, and is a true, correct and complete statement pursuant to the provisions of partinent laws, rules and regulations of the Republic of the Philippines. 49. I declare under oath that this Personal Data Sheet has been accomplished by me, and is a true, correct and complete statement pursuant to the provisions of partinent laws, rules and regulations of the Republic	37	arriars you orer book formally charges.			ails:		
regulation by any court or Inbunal? If YES, give details:		b. Have you ever been guilty of any administrative off	ense?				
retirement, dropped from the rolls, dismissal, termination, end of term, finished contract, AWOL or phased out, in the public or private sector? If YES, give details: 40, Have you ever been a candidate in a national or local election (except Barangay election)? If YES, give details: 41. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 7277); and (c) Solo Perents Welfare Act of 2000 (RA 8972), please answer the following items: a Are you a member of any indigenous group? b Are you differently abled? c Are you a solo parent? ADDRESS TEL NO. If YES, please specify: YES = NO If YES			on of any law, decree, ordinance or				
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41. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), please answer the following items: a. Are you a member of any indigenous group? b. Are you differently abled? c. Are you a solo parent? ADDRESS TEL. NO. If YES, please specify: YES NO If YES, please specify: YES SNO If YE		·	ion, end of term, finished contract, AWOL or				
41. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), please answer the following items: a. Are you a member of any indigenous group? b. Are you differently abled? c. Are you a solo parent? ADDRESS TEL. NO. If YES, please specify: YES NO If YES, please							
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b. Are you a solo parent? YES NO If YES, please specify: YES NO If YES, please specify: YES, please	a.	Are you a member of any indigenous group?		□YES □NO			
c. Are you a solo parent? 42. REFERENCES (Person not related by consanguinity or affinity to applicant / appointee) NAME ADDRESS TEL. NO. ID picture taken within the last 6 months 3.5 cm. X 4.5 cm (passport size) (passport size) Compute statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I also authorize the agency head / authorized representative to verify / validate the contents stated herein. I trust that this information shall remain confidential. PHOTO COMMUNITY TAX CERTIFICATE NO. ISSUED AT ISSUED AT ISSUED ON (mmidd/yyyy) DATE ACCOMPLISHED RIGHT THUMBMARK	b.	Are you differently abled?		TYES NO			
ADDRESS TEL. NO. ID picture taken within the last 6 months a.5 cm. X 4.5 cm (passport size) 43. I declare under oath that this Personal Data Sheet has been accomplished by me, and is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I also authorize the agency head / authorized representative to verify / validate the contents stated herein. I trust that this information shall remain confidential. COMMUNITY TAX CERTIFICATE NO. ISSUED AT SIGNATURE (Sign inside the box) PHOTO RIGHT THUMBMARK	C.	Are you a solo parent?		TYES NO			
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