



DEPARTMENT OF EDUCATION
Region X-Northern Mindanao
DIVISION OF MALAYBALAY CITY

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DIVISION MEMORANDUM

No. 048 s. 2013

TO : Promotional Staff
Public Schools District Supervisors
Elementary and Secondary School Principals
Section Heads and Staff

FROM : 
EDILBERTO L. OPLENARIA
OIC, Schools Division Superintendent

DATE : February 13, 2013

Deped-MALAYBALAY CITY DIVISION
RELEASED

Date: 02/13/13 Time: 11:20am
By: chc

RE : Update of Personal Data Sheet for the 201/120 Files

1. In adherence to CSC Memorandum Circular No. 08, s. 2007 re Management of 201/120 Files, this Office hereby directs the submission of updated Personal Data Sheet (PDS) (CS Form 212) on or before February 28, 2013 to this Office Attention: Records Section for updating of the 201/120 Personnel Files.
2. For information and guidance, enclosed are the Guide to Filling Up the PDS and CSC Form 212 which can also be downloaded from the CSC website (www.csc.gov.ph).
3. For your compliance.

Encl. As stated

Copy furnished:
Records Section

GUIDE TO FILLING UP THE PERSONAL DATA SHEET

Please fill up each of the fields in the PDS when applicable.

Note:

- CSC ID No. is a systems-generated number to be filled by up the CSC-CO personnel. Do not fill up this field.
- Write name of the employee at the lower right end of every page of the PDS.
- Print entries in the PDS using black ink ballpen only. Do not use sign pen.
- All information should be provided accurately as it will be the permanent record in the CSC Personnel Information Database.
- Do not leave blank entries. Put N/A for not applicable.

I. Personal Information

- Employee's name is to be filled up in the form: surname, first name and middle name where a space is allotted for each character or letter in the name.
- Dates are in numeric form (mm/dd/yyyy)
- Specifics should be given to "Others" response in the civil status field.
- Agency employee number refers to employee ID number in the current agency.

II. Family Background

- Names of spouse and parents are to be filled up in the form: surname, first name and middle name.
- Mother's name is her maiden name, that is, when she was single or before marriage.
- List full names (first and surname) of ALL your children.
- Date of birth is in numeric form (mm/dd/yyyy)

III. Educational Background

- Indicate FULL name of schools.
- Indicate in FULL all courses taken in college (e.g. ASSO. IN ARTS, AB ECONOMICS, BS PSYCHOLOGY, MA IN HISTORY).
- Indicate all masters or doctorate courses taken.
- If graduated for every level, indicate year of graduation.

- If not graduated in any level, indicate the highest grade, level or units earned.
- Inclusive dates of attendance are stated in schoolyears.
- Indicate any scholarship and/or academic honors received in each level.

IV. Civil Service Eligibility

- Indicate all civil service eligibilities earned with corresponding rating, date and place of examination /conferment.

Example:

Career service sub-professional	EO132/790 - Veteran Preference Rating
Career service professional	PD 907 - Honor Graduate
Career service executive	RA 7883 - Barangay Health Worker
Stenographer	PD 997 - Scientific and Technological Specialist
	CSC Res. #93-3666 - Barangay Official

- If earned eligibility entails a license (RA 1080), indicate the license number and its date of release.

V. Work Experience

- Indicate all positions held both in the public and private employment starting from current work.
- Inclusive dates are indicated in numeric form (mm/dd/yyyy)
- Indicate FULL position titles and COMPLETE NAME of department/agency/office/company.
- Indicate monthly salary in figures (e.g. P21,877)
- Salary grade and step increment is stated in the format "00-0" (e.g. 24-2 for salary grade 24, step increment 2).
- Indicate status of employment (i.e., permanent, temporary, casual, contractual)
- Indicate "yes" under government service if position held is in the public or government employment or "no" if held in the private employment.

VI. Voluntary Work or involvement in civic/non-government/people/voluntary organizations

- Indicate the FULL name and address of the organization where involved as voluntary worker.
- Inclusive dates, start (from) and end (to) shall be in numeric form (mm/dd/yyyy)

- Indicate the number of hours of voluntary work rendered.
- Indicate the position /nature of voluntary work rendered.

I. VII. Training Programs

- Indicate FULL titles of seminars, conferences, workshops and short courses attended during employment. Indicate list from the most recent training.
- Inclusive dates of attendance, start (from) and end (to) shall be in numeric form (mm/dd/yyyy).
- Indicate the number of hours attended for program
- Indicate the FULL name of institution/agency that conducted or sponsored the program. Do not use abbreviation (e.g. CSC should be Civil Service Commission).

VIII. Other Information

- Indicate special skills/hobbies
- Indicate in FULL non-academic distinctions/recognition (awards received)
- Indicate membership in any professional association/organization by writing in FULL said association/organization.

#s 36-41

- Indicate response to questions 36 to 41 on the right side of the sheet.
- Give details or specifications for any yes response.

#42

- Indicate the FULL name of references with the format SURNAME, FIRST NAME MI, their addresses and respective telephone numbers

#43

- As agreement to #43 and for completion of the PDS, indicate the employee's signature and right thumb mark in the boxes provided. Also indicate the community tax certificate number, date and place of issuance in the boxes provided. Lastly, attach a RECENT PASSPORT SIZE picture with the name and signature affixed at the back and must be taken within the last 6 months. Computer generated or photocopied/xeroxed picture is not acceptable.

PERSONAL DATA SHEET

Print legibly. Mark appropriate boxes with and use separate sheet if necessary.

1. CS ID No. _____

(to be filled up by CSC)

I. PERSONAL INFORMATION

2. SURNAME			
FIRST NAME			
MIDDLE NAME			3. NAME EXTENSION (e.g., Jr., Sr.)
4. DATE OF BIRTH (mm/dd/yyyy)	/	/	16. RESIDENTIAL ADDRESS
5. PLACE OF BIRTH			
6. SEX	<input type="checkbox"/> Male <input type="checkbox"/> Female		
7. CIVIL STATUS	<input type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Annulled <input type="checkbox"/> Others, specify _____		
8. CITIZENSHIP			
9. HEIGHT (m)			
10. WEIGHT (kg)			
11. BLOOD TYPE			
12. GSIS ID NO.			
13. PAG-IBIG ID NO.			
14. PHILHEALTH NO.			
15. SSS NO.			
	ZIP CODE		17. TELEPHONE NO.
			18. PERMANENT ADDRESS
	ZIP CODE		
			19. TELEPHONE NO.
	20. E-MAIL ADDRESS (if any)		
	21. CELLPHONE NO. (if any)		
	22. AGENCY EMPLOYEE NO.		
	23. TIN		

II. FAMILY BACKGROUND

24. SPOUSE'S SURNAME		25. NAME OF CHILD (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME			/ /
MIDDLE NAME			/ /
OCCUPATION			/ /
EMPLOYER/BUS. NAME			/ /
BUSINESS ADDRESS			/ /
TELEPHONE NO.			/ /
<i>(Continue on separate sheet if necessary)</i>			
26. FATHER'S SURNAME			/ /
FIRST NAME			/ /
MIDDLE NAME			/ /
27. MOTHER'S MAIDEN NAME			/ /
SURNAME			/ /
FIRST NAME			/ /
MIDDLE NAME			/ /
<i>(Continue on separate sheet if necessary)</i>			

III. EDUCATIONAL BACKGROUND

28. LEVEL	NAME OF SCHOOL (Write in full)	DEGREE COURSE (Write in full)	YEAR GRADUATED (if graduated)	HIGHEST GRADE/ LEVEL/ UNITS EARNED (if not graduated)	INCLUSIVE DATES OF ATTENDANCE		SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
					From	To	
ELEMENTARY							
SECONDARY							
VOCATIONAL / TRADE COURSE							
COLLEGE							
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

CIVIL SERVICE ELIGIBILITY

29.	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE	RATING	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
					NUMBER	DATE OF RELEASE

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE (Include private employment. Start from your current work)

30.	INCLUSIVE DATES (mm/dd/yyyy)		POSITION TITLE (Write in full)	DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full)	MONTHLY SALARY	SALARY GRADE & STEP INCREMENT (Format '00-0')	STATUS OF APPOINTMENT	GOVT SERVICE (Yes / No)
	From	To						
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(Continue on separate sheet if necessary)

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

31. NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
	From	To		
	/ /	/ /		
	/ /	/ /		
	/ /	/ /		
	/ /	/ /		
	/ /	/ /		

(Continue on separate sheet if necessary)

VII. TRAINING PROGRAMS (Start from the most recent training.)

32. 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)
	From	To		
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(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

33. SPECIAL SKILLS / HOBBIES:	34. NON-ACADEMIC DISTINCTIONS / RECOGNITION: (Write in full)	35. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)

(Continue on separate sheet if necessary)

Are you related by consanguinity or affinity to any of the following :

a. Within the third degree (for National Government Employees):
appointing authority, recommending authority, chief of office/bureau/department or person who has immediate supervision over you in the Office, Bureau or Department where you will be appointed?

YES NO
If YES, give details:

b. Within the fourth degree (for Local Government Employees):
appointing authority or recommending authority where you will be appointed?

YES NO
If YES, give details:

37 a. Have you ever been formally charged?

YES NO
If YES, give details:

b. Have you ever been guilty of any administrative offense?

YES NO
If YES, give details:

38. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?

YES NO
If YES, give details:

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?

YES NO
If YES, give details:

40. Have you ever been a candidate in a national or local election (except Barangay election)?

YES NO
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 Parents Welfare Act of 2000 (RA 8972), please answer the following items:

a. Are you a member of any indigenous group?

YES NO
If YES, please specify: _____

b. Are you differently abled?

YES NO
If YES, please specify: _____

c. Are you a solo parent?

YES NO
If YES, please specify: _____

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)

Computer generated or xerox copy of picture is not acceptable

PHOTO

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.	SIGNATURE (Sign inside the box)	RIGHT THUMBMARK
ISSUED AT		
ISSUED ON (mm/dd/yyyy)		
	DATE ACCOMPLISHED	