| PERSONAL DAT | FA SHEET |
|--------------|-----------------|
|--------------|-----------------|

S FORM 212 (Revised 2005)

| Print legibly. Mark appropriate bo | boxes⊡ with "✔" and use separate sheet if necessary. | | | 1. CS ID No. (to be filled up by CSC) | | | |
|--|--|----------------------------------|--------------------------|---------------------------------------|----------------------|---------------|-----------------------------|
| I. PERSONAL INFORM | ATION | | | | | | |
| 2. SURNAME | | | | | | | |
| FIRST NAME | | | | | | | |
| MIDDLE NAME | | | | 3. NAME E | EXTENSION (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 | 19. TELEPHONE NO. | | | | |
| 12. GSIS ID NO. | | 20. E-MAIL ADDRE | 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 BACKGROU | JND | | | | | | |
| 24. SPOUSE'S SURNAME | | | 25. NAME OF (| CHILD (Write full name a | nd list all) | DATE OF | BIRTH (mm/dd/yyyy) |
| FIRST NAME | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| EMPLOYER/BUS. NAME BUSINESS ADDRESS | | | | | | | |
| TELEPHONE NO. | | | | | | | |
| TELEFHONE NO. | (Continue on separate sheet if necessary) | | | | | | |
| 26. FATHER'S SURNAME | | | | | | | |
| FIRST NAME | | | | | | | , , |
| MIDDLE NAME | | | | | | | / / |
| 27. MOTHER'S MAIDEN NAME | | | | | | | / / |
| SURNAME | | | | | | | / / |
| FIRST NAME | | | | | | | / / |
| MIDDLE NAME | | | | (Continue | on separate sheet | if necessary) | |
| III. EDUCATIONAL BA | CKGROUND | | | | | | |
| 28. | | | YEAR | HIGHEST GRADE/ | INCLUSIVE D | | SCHOLARSHIP/ |
| LEVEL | NAME OF SCHOOL (Write in full) | DEGREE COURSE (Write in full) | GRADUATED (if graduated) | UNITS EARNED | ATTEND/ | 1 | ACADEMIC HONORS RECEIVED |
| | | | (ii graddated) | (if not graduated) | From | To | RECEIVED |
| ELEMENTARY | | | | | | | |
| SECONDARY | | | | | | | |
| VOCATIONAL / TRADE COURSE | | | | | | | |
| COLLEGE | | | | | | | |
| | | | | | | | |
| GRADUATE STUDIES | | | | | | | |
| | | | | | | | |
| | (| Continue on separate she | et if necessary) | | | | Page 1 of 4 |