CS Form No. 212 Revised 2017	PERSOI	NAL DAT	A SH	IEE	Г				
	tion made in the Personal Data Sheet and th	e Work Experience Sheet s	shall cause the	filing of ad	ministrativ	e/criminal case/s	against the p	erson	
	TO FILLING OUT THE PERSONAL DATA SHI								
Print legibly. Tick appropriate boxes I. PERSONAL INFORMATIO) and use separate sheet if necessary. Indicate	N/A if not applicable. DO NO	T ABBREVIATE		1. CS ID No.		(Do not fill up. F	or CSC use only)	
2. SURNAME	SANTE								
FIRST NAME	EARIEL FORT					NAME EXTENSION (JF	R., SR)		
MIDDLE NAME	DIMAGIBA								
3. DATE OF BIRTH	11/25/1993	16. CITIZENSHIP				1			
(mm/dd/yyyy)	11/25/1555	10. GITIZENGI IIF		✓ Filipi	ino	Dual Citizenship by birth	by naturali	zation	
4. PLACE OF BIRTH	MAKATI PHILIPPINES	If holder of dual citize	enship,	_ ,			Pls. indicate country:		
5. SEX	☐ Male ✓ Female	please indicate the d	letails.					•	
6 CIVIL STATUS	☐ Single ✓ Married	17. RESIDENTIAL ADDRESS		13A			ZIPPER		
	☐ Widowed ☐ Separated ☐ Other/s:			se/Block/Lot No ORENZO VILL		S	SAN LORENZO		
7 UEICUT (m)	1.68m		Sub	ndivision/Village MAKATI	9		Barangay		
7. HEIGHT (m)			Ci	ty/Municipality			Province		
8. WEIGHT (kg)	61kg	ZIP CODE 18. PERMANENT ADDRESS		13A		1223	ZIDDED		
9. BLOOD TYPE	A+	16. PERMANENT ADDRESS		se/Block/Lot No		ZIPPER Street			
10. GSIS ID NO.	N/A		1	ORENZO VILLA odivision/Village		SAN LORENZO Barangay			
11. PAG-IBIG ID NO.	1211-6308-2543		Ci	MAKATI ty/Municipality		Province			
12. PHILHEALTH NO.	01-052196623-3 ZIP CODE			1223					
13. SSS NO.	34-4939962-5	+632 88170547							
14. TIN NO.	326 124 254 0000	+639175361125							
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)		efvdimagiba@yahoo.com					
II. FAMILY BACKGROUND									
22. SPOUSE'S SURNAME	SANTE	NAME EXTENSION (JR., SR)	23. NAME of CHI	LDREN (Write	full name and	list all)	DATE OF BIRT	H (mm/dd/yyyy)	
FIRST NAME	RON ALLEN	INAME EXTENSION (SIX., SIX)							
MIDDLE NAME	PE BENITO								
OCCUPATION									
EMPLOYER/BUSINESS NAME									
BUSINESS ADDRESS									
DOGINEOU ADDINEOU									
TELEPHONE NO.									
	DIMAGIBA	l in							
TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME	FORTUNATO	JR.							
TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME	-	JR.							
TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 25. MOTHER'S MAIDEN NAME	FORTUNATO LACSON	JR.							
TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 25. MOTHER'S MAIDEN NAME SURNAME	FORTUNATO LACSON VALLE								
TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 25. MOTHER'S MAIDEN NAME SURNAME FIRST NAME	FORTUNATO LACSON VALLE MARIA ELOISA								
TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 25. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME	FORTUNATO LACSON VALLE MARIA ELOISA NEYRA			(Ccc	ontinue on sej	parate sheet if neces	sary)		
TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 25. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME MIDDLE NAME MIDDLE NAME	FORTUNATO LACSON VALLE MARIA ELOISA NEYRA						sary)	SCHOLARSHIP/	
TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 25. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME	FORTUNATO LACSON VALLE MARIA ELOISA NEYRA		EE/COURSE		ATTENDANCE	parate sheet if neces HIGHEST LEVEL/ UNITS EARNED (if not graduated)	sary) YEAR GRADUATED	ACADEMIC HONORS	
TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 25. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME MIDDLE NAME III. EDUCATIONAL BACKG 26. LEVEL	FORTUNATO LACSON VALLE MARIA ELOISA NEYRA ROUND NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGR (Write in full)		PERIOD OF A	ATTENDANCE To	HIGHEST LEVEL/ UNITS EARNED	YEAR	ACADEMIC	
TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 25. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME MIDDLE NAME III. EDUCATIONAL BACKG 26. LEVEL ELEMENTARY	FORTUNATO LACSON VALLE MARIA ELOISA NEYRA ROUND NAME OF SCHOOL (Write in full) COLEGIO SAN AGUSTIN MAKATI	BASIC EDUCATION/DEGR (Write in full)	ON	PERIOD OF A	To 2007	HIGHEST LEVEL/ UNITS EARNED	YEAR	ACADEMIC HONORS	
TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 25. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME III. EDUCATIONAL BACKG 26. LEVEL ELEMENTARY SECONDARY	FORTUNATO LACSON VALLE MARIA ELOISA NEYRA ROUND NAME OF SCHOOL (Write in full) COLEGIO SAN AGUSTIN MAKATI COLEGIO SAN AGUSTIN MAKATI	BASIC EDUCATION/DEGR (Write in full)	ON	PERIOD OF A	ATTENDANCE To	HIGHEST LEVEL/ UNITS EARNED	YEAR	ACADEMIC HONORS	
TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 25. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME MIDDLE NAME III. EDUCATIONAL BACKG 26. LEVEL ELEMENTARY	FORTUNATO LACSON VALLE MARIA ELOISA NEYRA ROUND NAME OF SCHOOL (Write in full) COLEGIO SAN AGUSTIN MAKATI	BASIC EDUCATION/DEGR (Write in full)	ON	PERIOD OF A	To 2007	HIGHEST LEVEL/ UNITS EARNED	YEAR	ACADEMIC HONORS	
TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 25. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME III. EDUCATIONAL BACKG 26. LEVEL ELEMENTARY SECONDARY VOCATIONAL/	FORTUNATO LACSON VALLE MARIA ELOISA NEYRA ROUND NAME OF SCHOOL (Write in full) COLEGIO SAN AGUSTIN MAKATI COLEGIO SAN AGUSTIN MAKATI	BASIC EDUCATION/DEGR (Write in full)	ON DN	PERIOD OF A	To 2007	HIGHEST LEVEL/ UNITS EARNED	YEAR	ACADEMIC HONORS	
TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 25. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME III. EDUCATIONAL BACKG 26. LEVEL ELEMENTARY SECONDARY VOCATIONAL / TRADE COURSE	FORTUNATO LACSON VALLE MARIA ELOISA NEYRA ROUND NAME OF SCHOOL (Write in full) COLEGIO SAN AGUSTIN MAKATI COLEGIO SAN AGUSTIN MAKATI N/A ATENEO DE MANILA UNIVERSITY N/A	BASIC EDUCATION/DEGR (Write in full) BASIC EDUCATION BASIC EDUCATION BASIC EDUCATION	ON IN JDIES	PERIOD OF # From 2001 2007	To 2007 2011	HIGHEST LEVEL/ UNITS EARNED	YEAR	ACADEMIC HONORS	

IV. CIVIL SERVICE ELIGIBILITY									
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER		RATING			TION / CONFERMENT		LICENSE (if ap		
SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE			(If Applicable)	CONFERMENT	FLACE OF EXAMINA	TION / CONFER	NIVIENT	NUMBER	Date of Validity
	N/A	A							
			(Cor	ntinue on separate sheet	if necessary)				
	EXPERIENCE	ent. Start from your recei	nt work) Descriptio	on of duties should	he indicated in the attack	and Work Fy	rnarianca sha	et	
28. INCL	USIVE DATES						SALARY/ JOB/ PAY GRADE (if		GOV'T
	mm/dd/yyyy)	POSITION T (Write in full/Do not		DEPARTMENT / AGI (Write in ful	MONTHLY SALARY	applicable)& STEP (Format "00-0")/	STATUS OF APPOINTMENT	SERVICE (Y/ N)	
From 3/1/2019	To	COMPLIANCE	OFFICER	NOVO ECIJANO	TEACHERS MUTUAL	PHP	INCREMENT	PERMAMENT	N
	PRESENT			BENEFIT AS DS STUDY INTER	SSOCIATION, INC. NATIONAL EDUCATION	30,000.00 PHP			
2/26/16	2/26/19	ADMISSIONS ADM	INISTRATOR		LTANTS INC.	25,000.00		RESIGNED	N
	-								
	1								
			(Con	ntinue on separate sheet	if necessary)				
SIGN	IATURE	efedeante			DATE	April	1, 2024		

VI. VOLUNTARY WORK OR INVOLVEMENT	IN CIVIC / NON-GOVERNMENT	//PEOPLE/\	/OLUNTARY	ORGANIZATIO	ON/S		
29. NAME & ADDRESS OF O (Write in full	RGANIZATION	INCLUSI	VE DATES dd/yyyy) To	NUMBER OF HOURS		POSITION / NATURE OF WORK	
N/A		110					
VII. I FARNING AND DEVELOPMENT (I.&D		tinue on separate		1)	<u>'</u>		
VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PF 30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)			INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		Type of LD (Managerial/ Supervisory/	CONDUCTED/ SPONSORED BY (Write in full)	
,	,	From	То		Technical/etc)	(11110-111-1011)	
AML/CTF TRAINING FOR IC REGULATED ENTITIES		10/29/19	10/29/19	7 HOURS		BANGKO SENTRAL NG PILIPINAS	
CORPORATE GOVERNANCE ORIENTATION PROGR.		11/19/19	11/19/19	8 HOURS		INSTITUTE OF CORPORATE DIRECTORS	
ANTI-MONEY LAUNDERING (AML) AND COUNTER-T MODULE I: AML/CTF STANDARDS AND BASELINE T	RAINING	10/16/20	10/16/20	2.5 HOURS		SGV&CO.	
ANTI-MONEY LAUNDERING (AML) AND COUNTER-T MODULE II: AML/CTF RISK MANAGEMENT FRAMEW		11/27/20	11/27/20	2.5 HOURS		SGV&CO.	
AND ATTER MEARINATION	(Con	tinue on separate	sheet if necessary	1)			
VIII. OTHER INFORMATION	NON	A CADEMIC DICTI	NOTIONS / DECO	CALITION		MEMBERSHIP IN ASSOCIATION/ORGANIZATION	
31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)					33. (Write in full)	
N/A	N/A					N/A	
SIGNATURE	I fydeanti	tinue on separate	sheet if necessary		ATE	April 1, 2024	

34.	Are you related by consanguinity or affinity to the appointing	g or recommending authority, or to the					
	chief of bureau or office or to the person who has immediate						
	Bureau or Department where you will be apppointed,						
	a. within the third degree?	☐ YES ✓ NO					
	b. within the fourth degree (for Local Government Unit - Car	YES NO					
	b. Within the loant degree (for Eodal Government Offic Odi						
			If YES, give details:				
35.	a. Have you ever been found guilty of any administrative off	☐ YES ☑ NO					
			If YES, give details:				
		= , g =					
	b. Have you been criminally charged before any court?	☐ YES ✓ NO					
		If YES, give details:					
		Date Filed:					
		Status of Case/s:					
	Harry and the second standard of any other and delation of a						
36.	Have you ever been convicted of any crime or violation of a	ny law, decree, ordinance or regulation	YES VO				
	by any court or tribunal?		If YES, give details:				
27	Hove you over been consisted from the consistency of the	o following modes: resign=#					
37.	Have you ever been separated from the service in any of th retirement, dropped from the rolls, dismissal, termination, er		YES NO				
	out (abolition) in the public or private sector?	id of term, imistied contract or phased	If YES, give details:				
38.	a. Have you ever been a candidate in a national or local ele	ction held within the last year (except	☐ YES ☑ NO				
	Barangay election)?		If YES, give details:				
	h. Have you resigned from the government convice during the	as three (2) month period before the last					
	b. Have you resigned from the government service during the election to promote/actively campaign for a national or local		YES V NO				
	election to promote/actively campaign for a national of local	candidate?	If YES, give details:				
39.	Have you acquired the status of an immigrant or permanent	t resident of another country?	☐ YES ✓ NO				
			If YES, give details (country):				
			ii 120, give details (country).				
40							
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag						
	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 a person with disability?		☐ YES ✓ NO				
			If YES, please specify ID No:				
C.	Are you a solo parent?		YES NO				
			If YES, please specify ID No:				
44	DEFEDENCES (D						
41.	REFERENCES (Person not related by consanguinity or affinity to applican	t /appointee)					
	NAME	ADDRESS	TEL. NO.				
			and the same of th				
42.	I declare under oath that I have personally accomplished	L this Personal Data Sheet which is a tr	rue correct and				
	complete statement pursuant to the provisions of pertine						
	Philippines. I authorize the agency head/authorized repre						
	I agree that any misrepresentation made in this doc						
	administrative/criminal case/s against me.						
	, and the second						
C	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)		 1				
	LEASE INDICATE ID Number and Date of Issuance	yfvdoanti					
	overnment Issued ID:	1					
II	D/License/Passport No.:	ssport No.: Signature (Sign inside the					
<u> </u>	ata/Diago of laguages						
	ate/Place of Issuance:	April 1, 2024 Date Accomplished	Right Thumbmark				
F							
	SUBSCRIBED AND SWORN to before me this	, affiant exhibi	ting his/her validly issued government ID as indicated above.				
							
1			I				
		Dorson Administoring Oct	th				
Ī		Person Administering Oat	ui -				