



Republic of the Philippines
Department of Education
REGION VIII - EASTERN VISAYAS

January 5, 2026

OFFICE MEMORANDUM
AD-2026- **11**

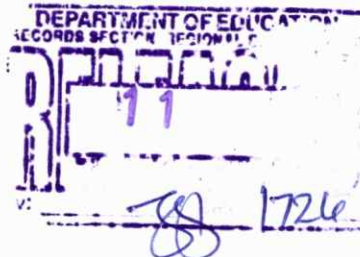
SUBMISSION OF UPDATED PERSONAL DATA SHEET (PDS)
(CS Form No. 212, Revised 2025)

To: **All DepED Regional Office VIII Permanent Employees**

1. For purposes of updating our record in the Civil Service Commission and 201 File of this Regional Office, all permanent employees are required to submit **one (1) original copy** of properly accomplished, updated, and notarized Personal Data Sheet using the CS Form No. 212, Revised 2025 to the Personnel Section on or before **April 30, 2026**.
2. Each Regional Office VIII employee is advised to compile in their custody a folder of all the Certificates of Trainings attended as enumerated in Page 3 Part VII of the PDS entitled Learning and Development (L&D) Interventions/Training Programs Attended, for personal file and reference purposes.
3. Attached are the new template of the CSC Form No. 212, Revised 2025 and Guide to Filling-Up Personal Data Sheet, for reference. Editable template can be downloaded through **www.csc.gov.ph**.
3. For strict compliance.

RONEL AL K. FIRMO CESO IV
Assistant Regional Director
Office-in-Charge
Office of the Regional Director

AD-PS-EDR



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 concerned.

READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM.

Print legibly if accomplished through own handwriting. Tick appropriate boxes ☐ and use separate sheet if necessary. Indicate N/A if not applicable. **DO NOT ABBREVIATE.**

I. PERSONAL INFORMATION

1. SURNAME			
2. FIRST NAME			NAME EXTENSION (JR., SR)
MIDDLE NAME			
3. DATE OF BIRTH (dd/mm/yyyy)		16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country: ▼
4. PLACE OF BIRTH		If holder of dual citizenship, please indicate the details.	
5. SEX AT BIRTH	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		
6 CIVIL STATUS	<input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	House/Block/Lot No. Street Subdivision/Village Barangay City/Municipality Province ZIP CODE
7. HEIGHT (m)		18. PERMANENT ADDRESS	House/Block/Lot No. Street Subdivision/Village Barangay City/Municipality Province ZIP CODE
8. WEIGHT (kg)			
9. BLOOD TYPE			
10. UMID ID NO.			
11. PAG-IBIG ID NO.			
12. PHILHEALTH NO.			
13. PhilSys Number (PSN):		19. TELEPHONE NO.	
14. TIN NO.		20. MOBILE NO.	
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)	

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME			23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (dd/mm/yyyy)
FIRST NAME		NAME EXTENSION (JR., SR)		
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME				
FIRST NAME		NAME EXTENSION (JR., SR)		
MIDDLE NAME				
25. MOTHER'S MAIDEN NAME				
SURNAME				
FIRST NAME				
MIDDLE NAME				
(Continue on separate sheet if necessary)				

III. EDUCATIONAL BACKGROUND

26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE		HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY							
SECONDARY							
VOCATIONAL / TRADE COURSE							
COLLEGE							
GRADUATE STUDIES							
(Continue on separate sheet if necessary)							

SIGNATURE

DATE

IV. CIVIL SERVICE ELIGIBILITY

[illegible]

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

(Include private employment. Start from your recent work.) Description of duties should be indicated in the attached Work Experience Sheet.

[illegible]

SIGNATURE

DATE _____

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

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

(Continue on separate sheet if necessary)

VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

[illegible]

(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE		DATE	
-----------	--	------	--

<p>34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to the chief of bureau or office or to the person who has immediate supervision over you in the Office, Bureau or Department where you will be appointed,</p> <p>a. within the third degree?</p> <p>b. within the fourth degree (for Local Government Unit - Career Employees)?</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If YES, give details: _____</p>															
<p>35. a. Have you ever been found guilty of any administrative offense?</p> <p>b. Have you been criminally charged before any court?</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <hr/> <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p style="text-align: right;">Date Filed: _____</p> <p style="text-align: right;">Status of Case/s: _____</p>															
<p>36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If YES, give details: _____</p>															
<p>37. 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 or phased out (abolition) in the public or private sector?</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If YES, give details: _____</p>															
<p>38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?</p> <p>b. Have you resigned from the government service during the three (3)-month period before the last election to promote/actively campaign for a national or local candidate?</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If YES, give details: _____</p>															
<p>39. Have you acquired the status of an immigrant or permanent resident of another country?</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If YES, give details (country): _____</p>															
<p>40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 7277, as amended); and (c) Expanded Solo Parents Welfare Act (RA 11861), please answer the following items:</p> <p>a. Are you a member of any indigenous group?</p> <p>b. Are you a person with disability?</p> <p>c. Are you a solo parent?</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If YES, please specify: _____</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p>															
<p>41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 35%;">NAME</th> <th style="width: 35%;">OFFICE / RESIDENTIAL ADDRESS</th> <th style="width: 30%;">CONTACT NO. AND/OR EMAIL</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>		NAME	OFFICE / RESIDENTIAL ADDRESS	CONTACT NO. AND/OR EMAIL												
NAME	OFFICE / RESIDENTIAL ADDRESS	CONTACT NO. AND/OR EMAIL														
<p>42. I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct, and complete statement pursuant to the provisions of pertinent laws, rules, and regulations of the Republic of the Philippines. I authorize the agency head/authorized representative to verify/validate the contents stated herein. I agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me.</p>																
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) <i>PLEASE INDICATE ID Number and Date of Issuance</i></td> </tr> <tr> <td style="padding: 2px;">Government Issued ID: _____</td> </tr> <tr> <td style="padding: 2px;">ID/License/Passport No.: _____</td> </tr> <tr> <td style="padding: 2px;">Date/Place of Issuance: _____</td> </tr> </table>	Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) <i>PLEASE INDICATE ID Number and Date of Issuance</i>	Government Issued ID: _____	ID/License/Passport No.: _____	Date/Place of Issuance: _____	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="height: 100px; vertical-align: bottom; padding: 5px;"> <p style="text-align: center;">Signature (Sign inside the box)</p> <hr/> <p style="text-align: center;">Date Accomplished</p> </td> </tr> </table>	<p style="text-align: center;">Signature (Sign inside the box)</p> <hr/> <p style="text-align: center;">Date Accomplished</p>										
Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) <i>PLEASE INDICATE ID Number and Date of Issuance</i>																
Government Issued ID: _____																
ID/License/Passport No.: _____																
Date/Place of Issuance: _____																
<p style="text-align: center;">Signature (Sign inside the box)</p> <hr/> <p style="text-align: center;">Date Accomplished</p>																
<div style="border: 1px solid black; width: 150px; height: 100px; margin: 0 auto; text-align: center; padding: 5px;"> <p>Passport-sized unfiltered digital picture taken within the last 6 months 4.5 cm. X 3.5 cm</p> </div> <p style="text-align: center; margin-top: 5px;">PHOTO</p> <div style="border: 1px solid black; width: 150px; height: 100px; margin: 0 auto; text-align: center; padding: 5px;"> <p>Right Thumbmark</p> </div>																
<p>SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.</p> <div style="border: 1px solid black; width: 200px; height: 60px; margin: 10px auto; text-align: center; padding: 5px;"> <p>Person Administering Oath</p> </div>																

GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS)

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 concerned.

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

Note:

- The PDS may be accomplished using the MS Word format or MS Excel format.
- In the MS Excel format, all the tick boxes will automatically be marked once clicked.
- The PDS must bear the wet signature/e-signature/digital certificate of the employee and date of accomplishment at the bottom of every page.
- Entries in the PDS may be filled out through handwriting or via typewriter/computer. If handwritten, entries should be in block capital (e.g. PRINT) format using a pen.
- All information should be provided accurately.
- Do not leave blank entries. Put N/A if not applicable.
- The additional sheet for work experience should be accomplished as a required attachment to the PDS.

I. Personal Information

- Employee's name is to be filled out in the following format: surname, first name, name extension (if any), middle name. A space is allotted for each character or letter in the name.
- Dates are in numeric format: dd/mm/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.
- For holders of foreign/dual citizenship, please select from the dropdown list the foreign country where you were born/naturalized or type/write the same in the space provided therein.

II. Family Background

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

III. Educational Background

- Indicate FULL name of schools. DO NOT ABBREVIATE.
- For Elementary Level, indicate ELEMENTARY if graduated
- For Secondary Level, indicate HIGH SCHOOL if graduated under the old curriculum; or JUNIOR HIGH SCHOOL or SENIOR HIGH SCHOOL if graduated under the K-12 curriculum.
- Indicate in FULL all courses taken in college (e.g. ASSOCIATE IN ARTS, AB ECONOMICS, BS PSYCHOLOGY, MA IN HISTORY).
- Indicate all masters or doctorate degrees taken.
- If graduated for every level, indicate year of graduation.
- If not graduated in any level, indicate the highest grade, level or units earned.
- Period of attendance are stated in school years (e.g. 1992-1996)
- 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	Barangay Official
PD 997 – Scientific and Technological Specialist	

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

V. Work Experience

- Indicate all positions held both in the public and private employment starting from current work.
- Inclusive dates are indicated in numeric format: dd/mm/yyyy.
- Indicate FULL position titles and COMPLETE NAME of department/agency/office/company. DO NOT ABBREVIATE.
- Indicate status of employment (e.g. 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.
- Additional sheet for work experience should be accomplished and submitted together with the PDS in case of application to a vacant position. This should be accomplished only for work experience relevant to the position being applied to.

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) should be in numeric format: dd/mm/yyyy.
- Indicate the number of hours of voluntary work rendered.
- Indicate the position/nature of voluntary work rendered.

VII. Learning and Development Interventions

- Indicate FULL titles of learning and development (L&D) interventions attended during employment. Indicate list from the most recent L&D.
- Inclusive dates of attendance, start (from) and end (to) should be in numeric format: dd/mm/yyyy.
- Indicate the number of hours attended for program.
- Indicate the type of L&D intervention (e.g. managerial, supervisory, technical).
- Indicate the FULL name of institution/agency that conducted or sponsored the program. DO NOT ABBREVIATE. (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.

34-40

- Indicate response to questions 34 to 40 on the right side of the sheet.
- Provide details or specifications for any yes response.

41

- Indicate the FULL name of references with the format FIRST NAME, MI, SURNAME, their office or residential addresses and respective contact numbers (mobile and/or landline) and/or email addresses.

42

- As agreement to and for completion of the PDS, the employee's signature and right thumb mark (for those who are unable to sign) should be affixed in the boxes provided. Indicate also the government ID number and date of issuance in the boxes provided. Lastly, attach a passport-sized ID or unfiltered digital picture (4.5 cm. x 3.5 cm) taken within the last six (6) months.