



# MEMBER'S DATA FORM (MDF)

FOR Pag-IBIG Fund USE ONLY									
Pag-IBIG MID NUMBER									
1	2	1	1		7	1	4	2	
REGISTRATION TRACKING NUMBER									
916147142056									

### INSTRUCTIONS

- Accomplish this form in one (1) copy only. If registration is thru online, the form should be printed back to back on one single sheet of paper.
- Type or print all entries in BLOCK or CAPITAL LETTERS.
- All fields which are marked with asterisk (\*) are mandatory.
- On the "OCCUPATIONAL STATUS" portion, if without employment or purpose is pre-employment or never been employed, select "UNEMPLOYED/NOT YET EMPLOYED".
- The "NAME EXTENSION" shall refer to JR., II, III and the like.
- Indicate the full name of your FATHER and MOTHER as they appear in your birth certificate.
- On the "OCCUPATION" portion, indicate occupation based on the List of Occupation, as provided in the Philippine Standard Occupational Classification (PSOC).
- On the "HEIRS" portion, the provision on the Laws on Succession, as provided in the New Civil Code of the Philippines, as amended by the New Family Code, shall be observed.
- For any subsequent change of information, please secure and accomplish Member's Change of Information Form (MCIF, HQP-PFF-049) and submit to the concerned Pag-IBIG Branch.

<b>*OCCUPATIONAL STATUS</b>		<input type="checkbox"/> EMPLOYED		<input checked="" type="checkbox"/> UNEMPLOYED/ NOT YET EMPLOYED	
<b>*MEMBERSHIP CATEGORY</b>					
<b>MANDATORY</b>		<input type="checkbox"/> EMPLOYED PRIVATE		<input type="checkbox"/> EMPLOYED GOVERNMENT	
<b>VOLUNTARY</b>		<input type="checkbox"/> OVERSEAS FILIPINO WORKER (OFW)		<input type="checkbox"/> SELF-EMPLOYED (SE)	
<b>EMPLOYED</b>		<input type="checkbox"/> EMPLOYED FOREIGN GOVERNMENT		<input type="checkbox"/> BARANGAY OFFICIAL/EMPLOYEE	
<b>INDIVIDUAL PAYOR (IP)</b>		<input type="checkbox"/> NON-WORKING SPOUSE		<input type="checkbox"/> MEMBER OF RELIGIOUS GROUP	
<b>PENSIONER/INVESTOR/LESSOR</b>		<input type="checkbox"/> MEMBER OF COOPERATIVE/TRADE UNION		<input type="checkbox"/> OTHERS <i>Please specify</i>	
	<b>LAST NAME</b>	<b>FIRST NAME</b>	<b>NAME EXTENSION</b> <i>(e.g. Jr., II)</i>	<b>MIDDLE NAME</b>	<b>NO MIDDLE NAME</b> <i>(check if applicable only)</i>
<b>*MEMBER</b>	MANTOS	DIESSA MARIE		YGOT	<input type="checkbox"/>
<b>FATHER</b>	MANTOS	ADRIANO		SANTOUSIDAD	<input type="checkbox"/>
<b>*MOTHER (Maiden Name)</b>	YGOT	DIOSDADA		SOLON	<input type="checkbox"/>
<b>*SPOUSE (If Married)</b>					<input type="checkbox"/>
<b>MEMBER'S NAME AS APPEARING IN THE BIRTH CERTIFICATE</b>	MANTOS	DIESSA MARIE		YGOT	<input type="checkbox"/>
<b>*DATE OF BIRTH</b>		<b>*MARRIAGE STATUS</b>		<b>TAXPAYER IDENTIFICATION NUMBER (TIN)</b>	
0 1 0 6 1 9 9 6 <i>mm dd yyyy</i>		<input checked="" type="checkbox"/> Single/Unmarried <input type="checkbox"/> Widow/er <input type="checkbox"/> Annulled <input type="checkbox"/> Married <input type="checkbox"/> Legally Separated		[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]	
<b>*PLACE OF BIRTH (City/Municipality/Province/Country)</b> <i>(Please indicate country if born outside the Philippines)</i>		<b>*CITIZENSHIP</b>		<b>SSS/GSIS NUMBER</b>	
CEBU CITY, CEBU		FILIPINO		[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]	
<b>*SEX</b>	<b>HEIGHT</b>	<b>WEIGHT</b>	<b>PROMINENT DISTINGUISHING FACIAL FEATURES</b> <i>(Ex. Molés, Scars, etc.)</i>		<b>EMPLOYEE NUMBER</b>
<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	162 (cm)	72 (kg)			[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]
<b>COMMON REFERENCE NUMBER (CRN)</b> <i>(If Available)</i>		<b>FREQUENCY OF MEMBERSHIP SAVINGS (MS) PAYMENT</b> <i>(If payment of MS is not thru payroll deduction)</i>		<b>For AFP/PNP Employee, Serial/Badge No.</b>	
[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]		<input type="checkbox"/> Monthly <input type="checkbox"/> Semi-Annually <input type="checkbox"/> Quarterly <input type="checkbox"/> Annually		[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]	
				<b>For DepEd Employee, Division Code-Station Code</b>	
				[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]	
<b>ADDRESS AND CONTACT DETAILS</b>					
<b>*PERMANENT HOME ADDRESS</b>				<b>(Indicate country code if abroad)</b>	
Unit/Room No., Floor	Building Name	Lot No., Block No., Phase No.	House No	Street Name	Subdivision
Barangay UPPER TINGUB	Municipality/City MANDAUE CITY	Province/State/Country(if abroad) CEBU	ZIP Code 6014	COUNTRY + AREA CODE 032	TELEPHONE NUMBER 5056917
<b>*PRESENT HOME ADDRESS</b>				<b>Cell Phone</b>	
Unit/Room No., Floor	Building Name	Lot No., Block No., Phase No.	House No	Street Name	Subdivision
Barangay UPPER TINGUB	Municipality/City MANDAUE CITY	Province/State/Country(if abroad) CEBU	ZIP Code 6014	0943	0301173
<b>*PREFERRED MAILING ADDRESS</b>				<b>Business (Direct Line)</b>	
<input checked="" type="checkbox"/> Present Home Address <input type="checkbox"/> Permanent Home Address <input type="checkbox"/> Employer/Business Address				[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]	
				<b>Business (Trunk Line)</b>	
				[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]	
				<b>Local</b>	
				[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]	
				<b>Email Address</b>	
				diessamarie18@gmail.com	