



EMPLOYEE PERSONAL DATA SHEET

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

PERSONAL INFORMATION

2. SURNAME	VILLARAIN	3. NAME EXTENSION (e.g. Jr., Sr.)	
FIRST NAME	FIRELIA RIZZIA		
MIDDLE NAME	HORTEZA		
4. DATE OF BIRTH (mm/dd/yyyy)	12 / 30 / 1994	16. RESIDENTIAL ADDRESS	PASEO ARCENAS, BANANA Cebu City
5. PLACE OF BIRTH	Tabogon, Cebu	ZIP CODE	6000
6. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	17. TELEPHONE NO.	
7. CIVIL STATUS	<input type="checkbox"/> Single <input type="checkbox"/> Widowed <input checked="" type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Annulled <input type="checkbox"/> Others, specify _____	18. PERMANENT ADDRESS	Daantabogon, Tabogon, Cebu
8. CITIZENSHIP	FILIPINO	ZIP CODE	6009
9. HEIGHT (m)	4'11	19. TELEPHONE NO.	
10. WEIGHT (kg)	45 kg	20. E-MAIL ADDRESS (if any)	fireliahortez@ gmail . com
11. BLOOD TYPE		21. CELLPHONE NO. (if any)	09330078518
12. GSIS ID NO.		22. AGENCY EMPLOYEE NO.	
13. PAG-IBIG ID NO.	121180270599	23. TIN	
14. PHILHEALTH NO.			
15. SSS NO.			

FAMILY BACKGROUND

4. SPOUSE'S SURNAME	25. NAME OF CHILD (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
VILLARAN	CASSANDRA FAITH	02/02/2015
FIRST NAME YVES BRIAN	VILLARAN	/ /
MIDDLE NAME DAVID		/ /
OCCUPATION CALL CENTER AGENT		/ /
EMPLOYER/BUS. NAME		/ /
BUSINESS ADDRESS		/ /
TELEPHONE NO.		/ /
(Continue on separate sheet if necessary)		
6. FATHER'S SURNAME		/ /
FIRST NAME HORTEZA		/ /
MIDDLE NAME ALVIN		/ /
		/ /
7. MOTHER'S MAIDEN NAME		/ /
SURNAME PEREZ		/ /
FIRST NAME ELINETH		/ /
MIDDLE NAME SAMPILLO		/ /
(Continue on separate sheet if necessary)		

<p>37 a. Have you ever been formally charged?</p> <p>b. Have you ever been guilty of any administrative offense?</p>	<p>YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p> <p>If YES, give details: _____</p> <p>DYES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p> <p>If YES, give details: _____</p>
<p>38. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?</p>	<p>DYES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p> <p>If YES, give details: _____</p>
<p>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?</p>	<p>DYES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p> <p>If YES, give details: _____</p>
<p>40. Have you ever been a candidate in a national or local election (except Barangay election)?</p>	<p>DYES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p> <p>If YES, give details: _____</p>
<p>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:</p> <p>a. Are you a member of any indigenous group?</p> <p>b. Are you differently abled?</p> <p>c. Are you a solo parent?</p>	<p>_____</p> <p>DYES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p> <p>If YES, please specify: _____</p> <p>DYES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p> <p>If YES, please specify: _____</p> <p>DYES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p> <p>If YES, please specify: _____</p>

42. REFERENCES (Person not related by consanguinity or affinity to applicant / appointee)

NAME	ADDRESS	TEL. NO.
FREDDIE GUITERRERZ	LORTEGA Cebu City	

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

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	