



Privacy Consent Form

I acknowledge and understand that my personal information will be collected pursuant to iPloy Staffing Solutions, Inc. and that the company is collecting and will be using this personal employee information only for the establishment, management and conclusion of my employment relationship, including payroll, company benefits in case of emergencies contact information and other reasonable purposes regarding my employment. In agreement to this, the company will only breach the data within the management team only which includes the Operations Management and Human Resources Department when the needs arise.

I agree that the iPloy Inc holds my personal data about me and consent the company to keep my records.

Upon signing this consent form on the 8 day of JANUARY, 2019 I therefore agree that my personal information be collected.

Employee Name : KAREN D. TABLA
 Employee Signature : *[Signature]*
 Date : 01/08/2019

FIRST NAME		(mm/dd/yyyy)
LAST NAME		/ /
		/ /
		/ /
		/ /
(Continue on separate sheet if necessary)		
FATHER'S SURNAME	TABLA	07 / 09 / 1968
FIRST NAME	CARMELO	/ /
MIDDLE NAME	ENSON	/ /
MOTHER'S MAIDEN NAME		/ /
SURNAME	DELEGADO	11 / 13 / 1960
FIRST NAME	(CASTILLA) ANTONIA	/ /
MIDDLE NAME	CASTILLA	/ /
25. NAME OF CHILD		
(Write full name and list all)		
		/ /
		/ /
		/ /
		/ /

44. 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