



EMPLOYEE PERSONAL DATA SHEET

Print legibly. Mark appropriate boxes **D** with **/** and use separate sheet if necessary.

I. PERSONAL INFORMATION

2. SURNAME	D-E-L-I-A C-R-U-Z		3. NAME EXTENSION (a.g., Jr., Sr.)	
FIRST NAME	L-A-D-Y R-O-S-E			
MIDDLE NAME	H-A-T-A-M-O-S-A			
4. DATE OF BIRTH (mm/dd/yyyy)	10 / 05 / 1988	16. RESIDENTIAL ADDRESS	B9 LOT 14 VILLA AZALEA COTCOT LILDAN CEBU	
5. PLACE OF BIRTH	CEBU CITY	ZIP CODE	6002	
6. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	17. TELEPHONE NO.	425 6045	
7. CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Annulled <input type="checkbox"/> Others, specify _____	18. PERMANENT ADDRESS	B9 LOT 14 VILLA AZALEA COTCOT LILDAN CEBU	
8. CITIZENSHIP	FILIPINO	ZIP CODE	6002	
9. HEIGHT (m)	152	19. TELEPHONE NO.	425 6045	
10. WEIGHT (kg)	46	20. E-MAIL ADDRESS (if any)	delacruz_ladyrose@yahoo.com	
11. BLOOD TYPE		21. CELLPHONE NO. (if any)	0915 528 1375	
12. GSIS ID NO.		22. AGENCY EMPLOYEE NO.		
13. PAG-IBIG ID NO.	1210 3418 2523	23. TIN	313 205 428	
14. PHILHEALTH NO.	12 051163672 3			
15. SSS NO.	0631387972			

II. FAMILY BACKGROUND

24. SPOUSE'S SURNAME	25. NAME OF CHILD (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME		/ /
MIDDLE NAME		/ /
OCCUPATION		/ /
EMPLOYER/BUS. NAME		/ /
BUSINESS ADDRESS		/ /
TELEPHONE NO.		/ /
(Continue on separate sheet if necessary)		
26. FATHER'S SURNAME	DELA CRUZ	1 / 05 / 1978
FIRST NAME	(LADY) EDUARDO	/ /
MIDDLE NAME	ENRIQUEZ	/ /
27. MOTHER'S MAIDEN NAME		/ /
SURNAME	HATAMOSA	11 / 04 / 1960
FIRST NAME	DELIA	/ /
MIDDLE NAME	PALACA	/ /
(Continue on separate sheet if necessary)		