



Republic of the Philippines
SOCIAL SECURITY SYSTEM
PERSONAL RECORD/UNIFIED MULTI-PURPOSE ID
(UMID) CARD APPLICATION (E-1/E-6)

MO0364IW202309276787 Date/Time Generated: 27 September 2023 01:30:12 PM

SS NUMBER 06-4676885-8						
NAME						
(LAST NAME) SEPADA		(FIRST NAME) CLYDE		(MIDDLE NAME) BADANA		(SUFFIX)
FACTS OF BIRTH						
(DATE OF BIRTH (MMDDYYYY)) 08302003	(PLACE OF BIRTH)	(CITY/MUNICIPALITY) DANAO CITY	(PROVINCE/STATE) CEBU	(COUNTRY) PHILIPPINES	(SEX) MALE	
FATHER'S NAME (LAST NAME) SEPADA	(FIRST NAME) DANTE		(MIDDLE NAME) ALEGADA		(SUFFIX)	
MOTHER'S MAIDEN NAME (LAST NAME) BADANA	(FIRST NAME) MERIAN		(MIDDLE NAME) GICA		(SUFFIX)	
DEMOGRAPHIC DATA						
HOME ADDRESS (RM./FLR./UNIT NO. & BLDG. NAME or HOUSE/LOT NO. & BLK NO.)			(STREET NAME) COGON		(SUBDIVISION)	
(BARANGAY/DISTRICT/LOCALITY) GUINSAY	(CITY/MUNICIPALITY) DANAO CITY		(PROVINCE) CEBU		POSTAL CODE 6004	COUNTRY CODE 0063
CIVIL STATUS SINGLE	HEIGHT (IN CENTIMETERS) 170	WEIGHT (IN KILOGRAMS) 51	DISTINGUISHING FEATURE(S)		NATIONALITY FILIPINO	RELIGION CHRISTIAN
OTHER CARD APPLICANT DATA						
TELEPHONE NUMBER (AREA CODE + TEL NO.)		MOBILE NUMBER (0927) 206-6259	EMAIL ADDRESS Clydesepada643@gmail.com			
DEPENDENT(S)/BENEFICIARY/IES						
SPOUSE	(LAST NAME)	(FIRST NAME)	(MIDDLE NAME)	(SUFFIX)	DATE OF BIRTH (MMDDYYYY)	
CHILDREN	(LAST NAME)	(FIRST NAME)	(MIDDLE NAME)	(SUFFIX)	DATE OF BIRTH (MMDDYYYY)	
1						
2						
3						
4						
5						
OTHER BENEFICIARY/IES (if without spouse & child and parents are both deceased)						
(LAST NAME)	(FIRST NAME)	(MIDDLE NAME)	(SUFFIX)	RELATIONSHIP	DATE OF BIRTH (MMDDYYYY)	
1						
2						
FOR SELF-EMPLOYED/OVERSEAS FILIPINO WORKER/NON-WORKING SPOUSE						
SELF-EMPLOYED (SE)		OVERSEAS FILIPINO WORKER (OFW)		NON-WORKING SPOUSE (NWS)		
Profession/Business 2166 Year Prof./Business Started 09272023 Monthly Earnings 4,000.00		Foreign Address _____ _____ _____		SS No./Common Reference No. of Working Spouse _____ Monthly Income of Working Spouse (P) _____		
Monthly Earnings		Monthly Earnings		Are you applying for membership in the Past Fund Program? <input type="checkbox"/> YES <input type="checkbox"/> NO		
PURPOSE OF APPLICATION						
PURPOSE SELF EMPLOYED		PROFESSION/BUSINESS 2166			ESTIMATED MONTHLY SALARY 4,000.00	