



# EMPLOYEE PERSONAL DATA SHEET

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

## PERSONAL INFORMATION

2. SURNAME	P O L I G U I T		
FIRST NAME	C H E R R Y A N N		
MIDDLE NAME	SALES		3. NAME EXTENSION (e.g. Jr., Sr.)
4. DATE OF BIRTH (mm/dd/yyyy)	11 / 20 / 1990	16. RESIDENTIAL ADDRESS	VILLABUSCA, BULACAO TAUSA CEBU CITY
5. PLACE OF BIRTH	BAYBAY, CITY LEYTE	ZIP CODE	6045
6. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	17. TELEPHONE NO.	
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	VILLABUSCA, BULACAO TAUSA CEBU CITY
8. CITIZENSHIP	Filipino	ZIP CODE	6045
9. HEIGHT (m)	5'5	19. TELEPHONE NO.	
10. WEIGHT (kg)		20. E-MAIL ADDRESS (if any)	tempgirlcherry03@gmail.com
11. BLOOD TYPE	O	21. CELLPHONE NO. (if any)	0943054461 / 09067397628
12. GSIS ID NO.		22. AGENCY EMPLOYEE NO.	
13. PAG-IBIG ID NO.	121163406880	23. TIN	476337498000
14. PHILHEALTH NO.	020259169802		
15. SSS NO.	0630750801		

## FAMILY BACKGROUND

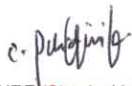
4. SPOUSE'S SURNAME	25. NAME OF CHILD (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	ZACH ANTHONY P. LOBERANES	05 / 27 / 2016
MIDDLE NAME		/ /
OCCUPATION		/ /
EMPLOYER/BUS. NAME		/ /
BUSINESS ADDRESS		/ /
TELEPHONE NO.		/ /
(Continue on separate sheet if necessary)		
6. FATHER'S SURNAME		/ /
FIRST NAME	Antonio JR.	/ /
MIDDLE NAME	CARINIC	/ /
7. MOTHER'S MAIDEN NAME		/ /
SURNAME	PODIGUIT	05 / 13 / 1966
FIRST NAME	CHARITO	/ /
MIDDLE NAME	SALES	
(Continue on separate sheet if necessary)		

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

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

NAME	ADDRESS	TEL. NO.	
			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) _____ SEPT 29 2016 DATE ACCOMPLISHED	RIGHT THUMBMARK _____ _____
ISSUED AT		
/ /		
ISSUED ON (mm/dd/yyyy)		