



EMPLOYEE PERSONAL DATA SHEET

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

Schedule: _____

I. PERSONAL INFORMATION

Team Lead: _____

2. SURNAME	NARON A		
FIRST NAME	ANN CHARMELOE		
MIDDLE NAME	APARICIO	3. NAME EXTENSION (e.g. Jr., Sr.)	
4. DATE OF BIRTH (mm/dd/yyyy)	08 / 21 / 1995	17. RESIDENTIAL ADDRESS	
5. PLACE OF BIRTH	IPHO MAASIN CITY SOUTHERN LEYTE	LOBARDE COMPOUND NASIPIT TALABAM CEBU CITY 6000	
6. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	ZIP CODE	
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. TELEPHONE NO.	
8. CITIZENSHIP	FILIPINO	19. PERMANENT ADDRESS	
9. HEIGHT (m)	5'2	ASUNCION MAASIN CITY SOUTHERN LEYTE	
10. WEIGHT (kg)	59 kg	ZIP CODE	
11. BLOOD TYPE	O	6000	
12. GSIS ID NO.		20. TELEPHONE NO.	
13. PAG-IBIG ID NO.	121175274918	21. E-MAIL ADDRESS (if any)	
14. PHILHEALTH NO.	120515198477	annaron8@gmail.com	
15. SSS NO.	06-3895879-4	22. CELLPHONE NO. (if any)	
16. TIN	391-885-482	0923731147	
		23. EMPLOYEE ID NO.	
		00803	

II. FAMILY BACKGROUND

24. SPOUSE'S SURNAME		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	NARONA	08 / 25 / 1949
FIRST NAME	JOY EMETERIO	/ /
MIDDLE NAME	DALO	/ /
27. MOTHER'S MAIDEN NAME		/ /
SURNAME	APARICIO	05 / 12 / 1949
FIRST NAME	GLENDA	/ /
MIDDLE NAME	WENCESLAO	/ /
25. NAME OF CHILD		/ /
(Write full name and list all)		/ /
		/ /
		/ /
		/ /
		/ /

37. a. Have you ever been formally charged?
 DYES ~~NO~~
 If YES, give details

b. Have you ever been guilty of any administrative offense?
 DYES ~~NO~~
 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 ~~NO~~
 If YES, give details

39. Have you ever been separated from the service in any 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 ~~NO~~
 If YES, give details

40. Have you ever been a candidate in a national or local election (except Barangay election)?
 DYES ~~NO~~
 If YES, give details

41. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 7277); and Solo-Parents Welfare Act 2000 (RA-8972), please answer the following items:

a. Are you a member of any indigenous group?
 DYES ~~NO~~
 If YES, give please specify: _____

b. Are differently abled?
 DYES ~~NO~~
 If YES, give please specify: _____

c. Are you a solo parent?
 DYES ~~NO~~
 If YES, give please specify: _____

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

NAME	ADDRESS	TEL NO.
Eranny Legario	Cebu Business Park Cebu City	09177960339
Kevin Clyde Andres	Capito Cebu City	09324302152
Litchel Doo	Labangon Cebu City	09474892014

43. EMPLOYMENT RECORD (latest)

COMPANY NAME	POSITION	FROM	TO
WPRO DPO LTD	Customer serv. Rep	July 14, 2016	Oct 17, 2018

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 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.

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

COMMUNITY TAX CERTIFICATE NO.	RIGHT THUMBMARK
ISSUED AT	
ISSUED ON (mm/dd/yyyy)	

IN CASE OF EMERGENCY:
 Please Contact: LOPE NABONA
 Contact Number: 09282725411

Ann Carmelle Narona 10/29/18
 Ann Carmelle Narona
 SIGNATURE (Sign in the box)