



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	IBASETA		
3. FIRST NAME	MARIA SALOME		
4. MIDDLE NAME	BONGON	5. NAME EXTENSION (e.g. Jr., Sr.)	
6. DATE OF BIRTH (mm/dd/yyyy)	07/24/1969	17. RESIDENTIAL ADDRESS	498 NAZARETA TUNGKOP, MINGLANILLA CEBU
7. PLACE OF BIRTH	STA MESA, MAINILA	18. ZIP CODE	6046
8. SEX	D Male <input type="checkbox"/> Female <input checked="" type="checkbox"/>	18. TELEPHONE NO.	0932 529 9676
9. 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 _____	19. PERMANENT ADDRESS	498 NAZARETA TUNGKOP, MINGLANILLA, CEBU
10. CITIZENSHIP	FILIPINO	19. ZIP CODE	6046
11. HEIGHT (m)	5'2 1/2 (1.57m)	20. TELEPHONE NO.	same as above
12. WEIGHT (kg)	160 lbs. (80K)	21. E-MAIL ADDRESS (if any)	ibaseeta.salome@ outlook.com
13. BLOOD TYPE	A+	22. CELLPHONE NO. (if any)	0932 529 9679
14. GSIS ID NO.	N.A.	23. EMPLOYEE ID NO.	
15. PAG-IBIG ID NO.	1210-3053-3512		
16. PHILHEALTH NO.	19-050118845-3		
17. SSS NO.	03-9490054-4		
18. TIN	501-596-751-000		

II. FAMILY BACKGROUND

24. SPOUSE'S SURNAME	N.A.		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	IBASETA		
FIRST NAME	JOSE LUIS		09/15/1946
MIDDLE NAME	ZAFRA		
27. MOTHER'S MAIDEN NAME	(DECEASED - 8/15/2018)		
SURNAME	BONGON		
FIRST NAME	MILAGROS		11/05/1949
MIDDLE NAME	CLAPIS		
25. NAME OF CHILD			
(Write full name and list all)			
STEFANO LUIS, I. ARRIOLA			07/03/2002