MEMBER'S DATA FORM (MDF)

FOR Pag-IBIG Fund USE ONLY

Pag-IBIG MID NUMBER: 1211 0349 1514

REGISTRATION TRACKING NUMBER: 913301000374

INSTRUCTIONS

1. **Accomplish this form in one (1) copy only.** If registration is thru online, the **form should be printed back to back on one single sheet of paper.**
2. **Type or print all entries in BLOCK or CAPITAL LETTERS.**
3. **All fields which are marked with asterisk (*) are mandatory.**
4. **On the "OCCUPATIONAL STATUS" portion, if without employment or purpose is pre-employment or never been employed, select "UNEMPLOYED/NOT YET EMPLOYED".**
5. **The "NAME EXTENSION" shall refer to JR., II, III and the like.**
6. **Indicate the full name of your FATHER and MOTHER as they appear in your birth certificate.**
7. On the "OCCUPATION" portion, indicate occupation based on the List of Occupation, as provided in the Philippine Standard Occupational Classification (PSOC).
8. On the "HEIRS" portion, the provision on the Laws on Succession, as provided in the New Civil Code of the Philippines, as amended by the New Family Code, shall be observed.
9. For any subsequent change of information, please secure and accomplish Member's Change of Information Form (MCIF, HQP-PFF-049) and submit to the concerned Pag-IBIG Branch.

***OCCUPATIONAL STATUS** ☒ EMPLOYED ☐ UNEMPLOYED/ NOT YET EMPLOYED

***MEMBERSHIP CATEGORY**

MANDATORY

☒ EMPLOYED PRIVATE ☐ EMPLOYED GOVERNMENT ☐ OVERSEAS FILIPINO WORKER (OFW) ☐ SELF-EMPLOYED (SE)

VOLUNTARY

EMPLOYED
☐ EMPLOYED FOREIGN GOVERNMENT
☐ BARANGAY OFFICIAL/EMPLOYEE

INDIVIDUAL PAYOR (IP)
☐ NON-WORKING SPOUSE
☐ MEMBER OF RELIGIOUS GROUP

☐ PENSIONER/INVESTOR/LESSOR
☐ MEMBER OF COOPERATIVE/TRADE UNION

☐ OTHERS *Please specify*

	LAST NAME	FIRST NAME	NAME EXTENSION (e.g. Jr., II)	MIDDLE NAME	NO MIDDLE NAME (check if applicable only)
*MEMBER	RAMBOY	MILDRED		PULVERA	☐
FATHER	PULVERA	MARIO		PATALINGHUG	☐
*MOTHER (Maiden Name)	JUMAMOY	LEONARDA		CARTOCIANO	☐
*SPOUSE (If Married)	RAMBOY	NOEL		LLONEVITE	☐
MEMBER'S NAME AS APPEARING IN THE BIRTH CERTIFICATE	RAMBOY	MILDRED		PULVERA	☐

*DATE OF BIRTH: 01 17 1980 (mm dd yyyy)

*MARITAL STATUS: ☐ Single/Unmarried ☐ Widow/er ☐ Annulled ☒ Married ☐ Legally Separated

TAXPAYER IDENTIFICATION NUMBER (TIN):

*PLACE OF BIRTH (City/Municipality/Province/Country) (Please indicate country if born outside the Philippines): CEBU CITY, CEBU

*CITIZENSHIP: FILIPINO

SSS/GSIS NUMBER:

*SEX: ☐ Male ☒ Female

HEIGHT: _____ (cm)

WEIGHT: _____ (kg)

PROMINENT DISTINGUISHING FACIAL FEATURES (Ex. Moles, Scars, etc.):

EMPLOYEE NUMBER:

For AFP/PNP Employee, Serial/Badge No.:

COMMON REFERENCE NUMBER (CRN) (If Available):

FREQUENCY OF MEMBERSHIP SAVINGS (MS) PAYMENT (If payment of MS is not thru payroll deduction)
☐ Monthly ☐ Semi-Annually ☐ Quarterly ☐ Annually

For DepEd Employee, Division Code-Station Code:

ADDRESS AND CONTACT DETAILS

*PERMANENT HOME ADDRESS

Unit/Room No., Floor	Building Name	Lot No., Block No., Phase No.	House No	Street Name	Subdivision
				VILLA	

Barangay	Municipality/City	Province/State/Country (if abroad)	ZIP Code
BASAK SAN NICOLAS	CEBU CITY	CEBU	6000

*PRESENT HOME ADDRESS

Unit/Room No., Floor	Building Name	Lot No., Block No., Phase No.	House No	Street Name	Subdivision
				VILLA	

Barangay	Municipality/City	Province/State/Country (if abroad)	ZIP Code
BASAK SAN NICOLAS	CEBU CITY	CEBU	6000

*PREFERRED MAILING ADDRESS

☐ Present Home Address ☐ Permanent Home Address ☒ Employer/Business Address

(Indicate country code if abroad)

	COUNTRY + AREA CODE	TELEPHONE NUMBER
Home		
Cell Phone	0933	5591087
Business (Direct Line)		
Business (Trunk Line)		Local

Email Address: mildredramboy@yahoo.com

THIS FORM MAY BE REPRODUCED. NOT FOR SALE.