



# EMPLOYEE PERSONAL DATA SHEET

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

Schedule: \_\_\_\_\_

## I. PERSONAL INFORMATION

Team Lead: \_\_\_\_\_

2. SURNAME	B O N G O		
FIRST NAME	E L E N J U N B O R O		
MIDDLE NAME	G A R C E		3. NAME EXTENSION (e.g. Jr., Sr.)
4. DATE OF BIRTH (mm/dd/yyyy)	09/10/1994		17. RESIDENTIAL ADDRESS
5. PLACE OF BIRTH	CEBU CITY		I/C DOÑA RITA VILLAGE BAMILAD CEBU CITY
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)			I/C DOÑA RITA VILLAGE BAMILAD CEBU CITY
10. WEIGHT (kg)			ZIP CODE
11. BLOOD TYPE			6000
12. GSIS ID NO.			20. TELEPHONE NO.
13. PAG-IBIG ID NO.			21. E-MAIL ADDRESS (if any)
14. PHILHEALTH NO.			elenjuncorog@gmail.com
15. SSS NO.			22. CELLPHONE NO. (if any)
16. TIN			09227292078
			23. EMPLOYEE ID NO.

## 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	BONDO	/ /
FIRST NAME	LEONARDO JR.	/ /
MIDDLE NAME	OSANG	06/26/1962
27. MOTHER'S MAIDEN NAME		/ /
SURNAME	GARCIA	/ /
FIRST NAME	CAROLINA	/ /
MIDDLE NAME	CARAYAN	10/24/1967
25. NAME OF CHILD (Write full name and list all)		/ /
CARL LOURIE BONDO		03/11/2014
EDUARDO YLADIMIR BONDO		07/14/2017
		/ /
		/ /

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  ~~DNO~~  
 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  ~~DNO~~  
 If YES, give details Resigned, account close

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 8173), (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  ~~DNO~~  
 If YES, give please specify: \_\_\_\_\_

b. Are differently abled? DYES  ~~DNO~~  
 If YES, give please specify: \_\_\_\_\_

c. Are you a solo parent? DYES  ~~DNO~~  
 If YES, give please specify: \_\_\_\_\_

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


NAME	ADDRESS	TEL NO.

43. EMPLOYMENT RECORD (latest)

COMPANY NAME	POSITION	FROM:	TO
STRES ASIA	TSR	April 10, 2018	September 23, 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 P.I. applies.

I also authorize the agency head/ authorized representative to verify/ validate the contents stated herein. I trust that this information shall remain confidential.

<table border="1"> <tr><td>COMMUNITY TAX CERTIFICATE NO.</td></tr> <tr><td>ISSUED AT</td></tr> <tr><td>ISSUED ON (mm/dd/yyyy)</td></tr> </table>	COMMUNITY TAX CERTIFICATE NO.	ISSUED AT	ISSUED ON (mm/dd/yyyy)	
COMMUNITY TAX CERTIFICATE NO.				
ISSUED AT				
ISSUED ON (mm/dd/yyyy)				

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

IN CASE OF EMERGENCY:  
 Please Contact: \_\_\_\_\_

*[Signature]*  
 \_\_\_\_\_ (Place in the box)