

## EMPLOYEE PERSONAL DATA SHEET

Discription	t legibly. Mark appropriate b	oxes D with "/" and use separate sheet if necessary.				
PLEIVIE   PLIVIE	PERSONAL INFOR	<u>MATION</u>				
PLEIVIE   PLIVIE	SURNAME	CATILOSA	1 1 1 1 1			
NAME EXPENSION (e.g. sr. sr.)	FIRST NAME					
DATE OF BIRTH (mm/dd/yyyy)	MIDDLE NAME		-	3. NAME EXTENSION (e.g.	Jr Sr)	
PLACE OF BIRTH  AR MENT  DATE	DATE OF BIRTH (mm/dd/y)		0 16. RESIDENTIAL ADDRESS		CT Cha	
D   D   D   D   D   D   D   D   D   D	PLACE OF BIRTH	CARMEN, DAVAD DEL NORTE	1		5. 500 6117 600	
Disingle	SEX		-			
FILIPINO   5 4	CIVIL STATUS	.BMarried Dseparated	17. TELEPHONE NO.	268-9835	43.43.0	
STAME     STAME     STAME     STAME	CITIZENSHIP		=		, • • • • • • • • • • • • • • • • • • •	
SECOND   S	HEIGHT (m)		-	02AMIZ CITY, MI		
19. TELEPHONE NO.   20. E-MAIL ADDRESS (if any)   DCATILOSA @ GMAIL - COM	WEIGHT (kg)		719.0	7200		
20. E-MAIL ADDRESS (if any)   DCATILUSA @ GMAIL COM     21	BLOOD TYPE		$\dashv$	7200		
2   -    5 68 - 3 2 45   21. CELLPHONE NO. (if any)   O 9 0 8 3) 14 27 5 6	GSIS ID NO.			DCATH DSA @ CMAN		
16 - 02 5 2 2 5 4 4 8 - 1   22. AGENCY EMPLOYEE NO.	PAG-IBIG ID NO.	1211-15 68 - 3245		0 C O 1 1/12 . C		
23. TIN   943~376~152	PHILHEALTH NO.			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
POUSE'S SURNAME FIRST NAME MARK ANTHONY MIDDLE NAME MIDDLE NAME MPLOYERBUS. NAME MPLOYERBUS. NAME MPLOYERBUS. NAME GIANI RUME P. CATILOSA 1 / 1  USINESS ADDRESS ELEPHONE NO.  CCOntinue on separate sheet if necessary)  THER'S SURNAME  PUYAT UTRES SURNAME PUYAT UTRES	SSS NO.					
FIRST NAME  MARY ANTHONY  MIDDLE NAME  GUIMA DA  CCUPATION  NUNE  MPLOYERIBUS. NAME  GIANI PUMP P. GATILUSA  IZ 113 / 2011  ELEPHONE NO.  (Continue on separate sheet if necessary)  THER'S SURNAME  PUYAT  OCCUPATION  (Continue on separate sheet if necessary)  THER'S SURNAME  PLANAS  OTHER'S MAIDEN NAME  PLANAS  OTHER'S MAIDEN NAME  PUYAT  OCCUPATION  OCCUPATION  I 1 / OTHER'S MAIDEN NAME  PUYAT  OCCUPATION  OCCUPATION  I 1 / OTHER'S MAIDEN NAME  PUYAT  OCCUPATION  OCCUPATION  I 1 / OTHER'S MAIDEN NAME  PUYAT  OCCUPATION  OCCUPATION  I 1 / OTHER'S MAIDEN NAME  PUYAT  OCCUPATION  OCCUPATION  I 1 / OTHER'S MAIDEN NAME  PUYAT  II / OTHER'S MAIDEN NAME  PUYA	FAMILY BACKGRO	UND		119 944 192		
FIRST NAME MIDDLE NAME QUIMADA  CCUPATION NUNE  CCUPATION NUNE  CCUPATION NUNE  CIANI PUME P. CATILOSA OI 07/ 2011 USINESS ADDRESS ELEPHONE NO.  COntinue on separate sheet if necessary)  CCOntinue on separate sheet if necessary)  CCONTINUE OI SEPANAS  CUMADA  CONTINUE OI SEPANAS  C	POUSE'S SURNAME			E OF CHILD (Write full name and list all)	DATE OF BIRTH (mm/dd/seasy)	
MIDDLE NAME  CCUPATION  NUNE  GIANI PUME P. CATILOSA  OI 07/ 2011  EZIAH ULY P. CATILOSA  IZ /13 / 2011  CCOntinue on separate sheet if necessary)  THER'S SURNAME  PUYAT  OC / 30 / 1967  PLANAS  OTHER'S MAIDEN NAME  PUYAT  PUYAT  OF / 30 / 1967  OTHER'S MAIDEN NAME  PUYAT  OULE NAME  PUYAT	FIRST NAME			,		
CCUPATION   NUNE	MIDDLE NAME	QUIMADA				
GIANI   LOME   P. CATILOSA   OI   07   2011     USINESS ADDRESS   EZIAH   ULY   P. CATILOSA   12   13   2011     Continue on separate sheet if necessary)	OCCUPATION	NONE				
ELEPHONE NO.  (Continue on separate sheet if necessary)  THER'S SURNAME  PUYAT  OCIDINA  PLANAS  OTHER'S MAIDEN NAME  PUYAT  OF 130/1967  I I  OTHER'S MAIDEN NAME  PUYAT  II I OTT 1960  DDLE NAME  PUYAT	MPLOYER/BUS, NAME		GIA	N ROME P. CATH ON		
Continue on separate sheet if necessary)	USINESS ADDRESS					
(Continue on separate sheet if necessary)  THER'S SURNAME  PUYAT  O6 / 30 / 1967  VER GIL 10  PLANAS  OTHER'S MAIDEN NAME  PUYAT  RST NAME  PUYAT  II / 07/ 1960  DDLE NAME  PUYAT  RST NAME  PUYAT  P	ELEPHONE NO.			TATI OUT TO SATILO SA		
THER'S SURNAME  PUYAT  VER GIL 10  DDLE NAME  PLANAS  PLANAS  I I  III O71 1960  DDLE NAME  DDLE NAME  PUYAT  RST NAME  PUYAT  RST NAME  PUYAT  DDLE NAME  PUYAT  II I O71 1960  DDLE NAME		(Continue on separate sheet if necessary)				
DDLE NAME  PLANAS  PLANAS  III  PLANAS  III  PLANAS  III  PLANAS  III  PLANAS  III  PLANAS  III  III  PLANAS  III  III  III  III  III  III  III	THER'S SURNAME	PUYAT				
DDLE NAME PLANAS  OTHER'S MAIDEN NAME  PUYAT  RST NAME PUYAT  PUY	RST NAME	VER GILIO				
	IDDLE NAME	PLANAS				
PUYAT	OTHER'S MAIDEN NAME					
DDLE NAME   LVFA   / /	URNAME	PUYAT				
DDLE NAME D) (5.41	RST NAME	RVFA				
	DDLE NAME	DIGAL		(Continue on senarate cheef	1	

27.2 Have you over been formally obergad?			.1	
37 a. Have you ever been formally charged?	TS DNO			
			If YES, give details:	
b. Have you ever been guilty of any administrative	DYES DNO			
			details:	
88. Have you ever been convicted of any crime or viola	tion of any law, decree, ordinance or	DYES DNO		
regulation by any court or tribunal?		If YES, give details:		
9. Have you ever been separated from the service in	n any of the following modes: resignation.	DYES DNO		
retirement, dropped from the rolls, dismissal, termin	DIES DINO			
phased out, in the public or private sector?		If YES, give details:		
n Have you ever been a candidate in a notional and	ocal plantion (over-t D to the control of the			
40. Have you ever been a candidate in a national or local election (except Barangay election)?			DYES DNO	
		If YES, give of	letails:	
1 Diversion May (a) In III				
11. Pursuant to: (a) Indigenous People's Act (RA 8371) 7277); and (c) Solo Parents Welfare Act of 2000 (R				
	70072), please answer the following items:			
a. Are you a member of any indigenous group?		DYES DNO		
b. Are you differently abled?		If YES, please specify:		
The you difficilly abled?		DYES DNO If YES, please specify:		
c. Are you a solo parent?		DYES DNO		
	If YES, please specify:			
2. REFERENCES (Person not related by consanguinity or affinity	y to applicant / appointee)			
NAME	ADDRESS	TEL. NO.		
MS. IRENT ROSALTS	TALISAY, CEBU CITY			
MR. RYAN KHARL ALESANDA			ID picture taken within the last 6 months	
			3.5 cm. X 4.5 cm	
3. I declare under oath that this Personal Data Sheet	t has been accomplished by me, and is a true	. correct and	(passport size)	
complete statement pursuant to the provisions of pe Philippines.	rtinent laws, rules and regulations of the Repub	licofthe	Computer generated	
			or xerox copy of picture	
I also authorize the agency head / authorized representat this information shall remain confidential.	sentative to verify / validate the contents stated	herein. I trust	is not acceptable	
COMMUNITY TAX CERTIFICATE NO.				
	Jun Jun			
	SIGNATURE			
ISSUED AT			11.1	
ISSUED AT	SIGNATURE (Sign inside the box)			
/ / ISSUED ON (mm/dd/yyyy)	DATE ACCOMPLISHED		RIGHT THUMBMARK	