



# EMPLOYEE PERSONAL DATA SHEET

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

Schedule:

Team Lead:

## I. PERSONAL INFORMATION

2. SURNAME	D A N O		
FIRST NAME	M E L J A D R A N E		
MIDDLE NAME	P O L O		
3. NAME EXTENSION (e.g. Jr., Sr.)			
4. DATE OF BIRTH (mm/dd/yyyy)	02 / 24 / 1997		
5. PLACE OF BIRTH	SABAH, MALAYSIA		
6. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		
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 _____		
17. RESIDENTIAL ADDRESS	MATAHAY, BANKAL, LAPU-LAPU CITY, CEBU		
18. TELEPHONE NO.	6015 N/A		
19. PERMANENT ADDRESS	MATAHAY, BANKAL, LAPU-LAPU CITY, CEBU		
21. E-MAIL ADDRESS (if any)	mjdanoa@gmail.com		
22. CELLPHONE NO. (if any)	09287417850		
23. EMPLOYEE ID NO.			
ZIP CODE	6015		

## 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	D A N O	11 / 06 / 1979
FIRST NAME	MELWADES	/ /
MIDDLE NAME	AYING	/ /
27. MOTHER'S MAIDEN NAME		/ /
SURNAME	P O L O	06 / 29 / 1969
FIRST NAME	R O S A L I E	/ /
MIDDLE NAME	A G U L O	/ /
25. NAME OF CHILD (Write full name and list all)		/ /
		/ /
		/ /
		/ /
		/ /
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.	ID picture taken within the last 6 months 3.5 cm. X 4.5 cm (passport size)	
I also authorize the agency head/ authorized representative to verify/ validate the contents stated herein. I trust that this information shall remain confidential.		

### IN CASE OF EMERGENCY:

Please Contact: ROSALIE POLO DANO

Contact Number: \_\_\_\_\_

Relation: MOTHER

[Signature]  
SIGNATURE (Sign in the box)

DATE ACCOMPLISHED



37 a. Have you ever been formally charged?	DYES <input checked="" type="checkbox"/> <del>DNO</del> If YES, give details						
b. Have you ever been guilty of any administrative offense?	DYES <input checked="" type="checkbox"/> <del>DNO</del> 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 <input checked="" type="checkbox"/> <del>DNO</del> 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?	<del>DYES</del> <input checked="" type="checkbox"/> <del>DNO</del> If YES, give details						
40. Have you ever been a candidate in a national or local election (except Barangay election)?	DYES <input checked="" type="checkbox"/> <del>DNO</del> If YES, give details						
41. Pursuant to: (a) Indigenouse People's Act (RA 83710); (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 <input checked="" type="checkbox"/> <del>DNO</del> If YES, give please specify: _____						
b. Are differently abled?	DYES <input checked="" type="checkbox"/> <del>DNO</del> If YES, give please specify: _____						
c. Are you a solo parent?	DYES <input checked="" type="checkbox"/> <del>DNO</del> If YES, give please specify: _____						
<b>42. REFERENCES</b> (Person not related by consanguinity or affinity to applicant/appointee)							
NAME	ADDRESS	TEL NO.					
PATRICK JOHN CABALDO	GUINDULMAN, BOHOL	N/A					
<b>43. EMPLOYMENT RECORD</b> (latest)							
COMPANY NAME	POSITION	FROM	TO				
LIVE?SEN INC.	TELESALES EXECUTIVE	AUG 2015 - AUG 2016	AUG 2016				
WIPRO LTD.	CSA	OCT 2016 - JUNE 2017	JUNE 2017				
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