



# EMPLOYEE PERSONAL DATA SHEET

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

Schedule:	
Grade Level:	

## I. PERSONAL INFORMATION

2. SURNAME	TILLER		
FIRST NAME	PAUL IMAKI		
MIDDLE NAME	ERMAS	3. NAME EXTENSION (e.g. Jr., Sr.)	
4. DATE OF BIRTH (mm/dd/yyyy)	Aug 103 / 1989	17. RESIDENTIAL ADDRESS	L.C. Cabrera St., Cosuntigan, Mandau City, Cebu
5. PLACE OF BIRTH	CEBU	ZIP CODE	6014
6. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	18. TELEPHONE NO.	N/A
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 _____	19. PERMANENT ADDRESS	L.C. Cabrera St., Cosuntigan, Mandau City, Cebu
21. E-MAIL ADDRESS (if any)	paulina.kimura@ gmail.com	ZIP CODE	6014
22. CELLPHONE NO. (if any)	0929 213 2200		
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	Tiller	DATE OF BIRTH	April / 16 / 1954
FIRST NAME	Gerardo	/ /	
MIDDLE NAME	Ind - Ind	/ /	
27. MOTHER'S MAIDEN NAME		/ /	
SURNAME	Ermas	DATE OF BIRTH	Aug / 05 / 1951
FIRST NAME	Cecilia	/ /	
MIDDLE NAME	Ranile	/ /	
25. NAME OF CHILD		/ /	
(Write full name and birth date)		/ /	
		/ /	
		/ /	
		/ /	
		/ /	

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.

I also authorize the agency head/ authorized representative to verify/validate

ID picture taken within the last 6 months 3.5 cm. X 4.5 cm (passport size)

37 a. Have you ever been formally charged? DYES  NO   
If YES, give details \_\_\_\_\_

b. Have you ever been guilty of any administrative offenses? DYES  NO   
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  NO   
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  NO   
If YES, give details \_\_\_\_\_

40. Have you ever been a candidate in a national or local election (except Barangay election)? DYES  NO   
If YES, give details \_\_\_\_\_

41. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 7277); and Solo Parents Welfare Act 2000 (RA 8973), please answer the following items:

a. Are you a member of any indigenous group? DYES  NO   
If YES, give please specify: \_\_\_\_\_

b. Are differently abled? DYES  NO   
If YES, give please specify: \_\_\_\_\_

c. Are you a solo parent? DYES  NO   
If YES, give please specify: \_\_\_\_\_

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


NAME	ADDRESS	TEL NO.
Dave Nella	Lapu-Lapu City	0996 791 7930
James S. Singson	Cebu City	05 776407484
Marie Claire Cuiza	Mandaluyod City	0910 4050579

43. EMPLOYMENT RECORD (latest)

COMPANY NAME	POSITION	FROM	TO
911 locals	Report Analyst	Sept. 2017	Dec. 2019

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.

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

COMMUNITY TAX CERTIFICATE NO. _____ ISSUED AT _____ / / ISSUED ON (mm/dd/yyyy) _____	RIGHT THUMBMARK 	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
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IN CASE OF EMERGENCY:  
Please Contact: cecilia tiller

SIGNATURE (Sign in the box)  
