



EMPLOYEE PERSONAL DATA SHEET

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

Schedule: _____

I. PERSONAL INFORMATION

Team Lead: _____

2. SURNAME	D E L M I G U E Z		
FIRST NAME	M E R I A M		
EMPLOYEE AKA/ALIAS	C A M P O S O		3. NAME EXTENSION (e.g. Jr., Sr.)
4. DATE OF BIRTH (mm/dd/yyyy)	05 / 16 / 85		17. RESIDENTIAL ADDRESS
5. PLACE OF BIRTH	CEBU CITY		SRTO LEMONCITO, LANAAN II, TALISAY CITY
6. SEX	D Male <input checked="" type="checkbox"/> Female		ZIP CODE
7. CIVIL STATUS	<input checked="" type="checkbox"/> Single D Widowed D Married D Separated D Annulled D Others, specify _____		18. TELEPHONE NO.
8. CITIZENSHIP	FILIPINO		19. PERMANENT ADDRESS
9. HEIGHT (m)	1' 9"		SRTO LEMONCITO, LANAAN II, TALISAY CITY
10. WEIGHT (kg)	42 KGS.		ZIP CODE
11. BLOOD TYPE			6045
12. GSIS ID NO.			20. TELEPHONE NO.
13. PAG-IBIG ID NO.	121127915015		21. E-MAIL ADDRESS (if any)
14. PHIC/HEALTH NO.	120254493673		delmiguez.meriam @gmail.com
15. SSS NO.	06-3382009-8 311-151-222 (607-947-468-800)		22. CELLPHONE NO. (if any)
16. TIN			09207907117
			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	DELMIGUEZ	03 / 21 / 58
FIRST NAME	RUBEN	/ /
MIDDLE NAME	ABELNOSA	/ /
27. MOTHER'S MAIDEN NAME		/ /
SURNAME	CAMPOSO	01 / 24 / 56
FIRST NAME	CRISTINA	/ /
MIDDLE NAME	RUBIA	/ /
25. NAME OF CHILD		
(Write full name and list all)		