



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	M I O U I L A		
FIRST NAME	J O H N C A R L O		
MIDDLE NAME	AUGUSTO	3. NAME EXTENSION (e.g. Jr., Sr.)	N/A
4. DATE OF BIRTH (mm/dd/yyyy)	10 / 12 / 1995	17. RESIDENTIAL ADDRESS	43-C GREYHOUND SUBD., KINASANG-AN, CEBU CITY
5. PLACE OF BIRTH	SIPALAY CITY, NEG. OCC.	18. TELEPHONE NO.	(032) 345-0745
6. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	19. PERMANENT ADDRESS	43-C GREYHOUND SUBD., KINASANG-AN, CEBU CITY
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 _____	20. TELEPHONE NO.	(032) 345-0745
8. CITIZENSHIP	FILIPINO	21. E-MAIL ADDRESS (if any)	Johncarlomiquila1995@gmail.com
9. HEIGHT (m)	5'7"	22. CELLPHONE NO. (if any)	09493481693
10. WEIGHT (kg)	54	23. EMPLOYEE ID NO.	
11. BLOOD TYPE	AB		
12. GSIS ID NO.			
13. PAG-IBIG ID NO.	121169410578		
14. PHILHEALTH NO.	12-051491896-7		
15. SSS NO.	06-3814160-3		
16. TIN	327-614-823-000		

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	MIGUILA		
FIRST NAME	CONRADO		
MIDDLE NAME	GOZON		
27. MOTHER'S MAIDEN NAME			
SURNAME	AUGUSTO		
FIRST NAME	MA. CECILIA		
MIDDLE NAME	ABELES		
25. NAME OF CHILD (Write full name and list all)			
P/A			