

EMPLOYEE PERSONAL DATA SHEET

Print legibly. Mark appropriate	boxes D with "/" and use separate sheet if necessary.	Schedule:		
I. PERSONAL INFORM	ATION	Team Lead:		
2. SURNAME	ROSALES			
FIRST NAME	SHEW LORD	0 0 0 0 0 0		
MIDDLE NAME	JAMORA	3. NAME EXTENSION (e.g. Jr.,		
4. DATE OF BIRTH (mm/dd/yyyy) O7 / 30 / 1999 17. RESIDENTIAL ADDRESS			399 FORTUNE	
5. PLACE OF BIRTH	DI POLOG CITT		COMPOUND ENDLIS V-RAMA, BUADALUPE	
6. SEX	♂ Male D Female		CBBU CITY	
7. CIVIL STATUS	Ø Single DWidowed	ZIP CODE	6000	
	DMarried DSeparated	18. TELEPHONE NO.		
	DAnnulled DOthers, specify	19. PERMANENT ADDRESS	CITY DIPOLOG	
8. CITIZENSHIP	FILIPINO	WAR WITH		
9. HEIGHT (m)	1.453			
10. WEIGHT (kg)	1.76 lbs			
11. BLOOD TYPE	0+	ZIP CODE	7100	
12. GSIS ID NO.		20. TELEPHONE NO.	908-0033	
13. PAG-IBIG ID NO.	919312570349	21. E-MAIL ADDRESS (if any)	shem lord agmail.com	
14. PHILHEALTH NO.	1925 29 29 1413		, , , , , , , , , , , , , , , , , , , ,	
15. SSS NO.	073599293-3	22. CELLPHONE NO. (if any)	09 43854494	
16. TIN		23. EMPLOYEE ID NO.		
II. FAMILY BACKGROU	ND			
24. SPOUSE'S SURNAME			DATE OF BIRTH	
FIRST NAME				
MIDDLE NAME			/ /	
OCCUPATION			/ /	
EMPLOYER/BUS. NAME			/ /	
BUSINESS ADDRESS			/ /	
TELEPHONE NO.		:	1 1	
	(Continue on separate sheet if necessary)		/ /	
26. FATHER'S SURNAME	ROSALES		12/69/1957	
FIRST NAME	ENRILO CARUSO		1 /	
MIDDLE NAME	SAMSON		1 1	
27. MOTHER'S MAIDEN NAME	STAGE TO SELECT THE SECOND STAGE OF THE SECOND		1 1	
SURNAME	JA MORA		01/01/1960	
FIRST NAME	TNAME LEONILA		/ /	
MIDDLE NAME	SARANILLO	/ /		
THE PARK HAVE BEEN BE	25. NAME OF CHILD		1 1	
	/ /			
	3	·	1 1	
			/ /	
			/ /	
			1 1	

37 a. Have you ever been formally	If YES, give	νο details			
b. Have you ever been guilty of	Dyes PNO If YES, give details				
38. Have you ever been convicted of a ordinance or regulation by any court o	Dyes If YES, give	ĎNO details			
39. Have you ever been separated from th retirement, dropped from the rolls, dismis contract, AWOL or phased out, in the publ	Dyes PNO If YES, give details				
40. Have you ever been a candidate in Barangay election)?	Dyes DNO If YES, give details				
41. Pursuant to: (a) Indigenouse People's Act (RA 8 and Solo Parents Welfare Act 2000 (RA 8972), plea		ersons (RA 7277)			
a. Are you a member of any indigenous group? b. Are differently abled? c. Are you a solo parent?				DYES ØNO If YES, give please specify: DYES ØNO If YES, give please specify: DYES ØNO	
42. REFERENCES (Person not related by consa	nguinity or affinity to applicant/appo	intee)	If YES, give	please specify:	
NAME	ADDRESS			TEL NO.	
DR. SONIA B. SYGALO DESSA QUESADO PALM	DUMAGNETE, NEBROS ORIENTAL DUMAGNETE, NEBROS ORIENTAL		6905 43570 80		
TOTAL GODDING THE	<i>p</i> 0(3)10 - 2 (3)				
43. EMPLOYMENT RECORD (latest)					
COMPANY NAME	POSITION	FF	ROM	ТО	
44. I declare under oath that this Person correct and complete statement pursuan the Re I also authorize the agency head/ authorize the contents stated herein. I trust that this person correct and complete statement pursuant the contents stated herein.	t to the provisions of pertinent epublic of the Philippines. ed representative to verify/ val	laws, rules and		ID picture taken within the last 6 months 3.5 cm. X 4.5 cm (passport size)	
ISSUED AT ISSUED ON (mm/dd/yyy		RIGHT THU	JMBMARK	Computer generated or xerox copy of picture is not acceptable	
IN CASE OF EMERGENCY:	s. ROSPIES			CCOMPLISHED	