



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	R O M A R E S	3. NAME EXTENSION (e.g. Jr., Sr.)	
FIRST NAME	D A I L A T H A E H Y A C I N T H	17. RESIDENTIAL ADDRESS	14 EP. DEL ROSARIO EXT., SAMBAG 1 CEBU
MIDDLE NAME	SERENO	ZIP CODE	6000
4. DATE OF BIRTH (mm/dd/yyyy)	08 / 27 / 00	18. TELEPHONE NO.	
5. PLACE OF BIRTH	OSLOB, CEBU	19. PERMANENT ADDRESS	Purok 1, Pungtod, Oslob, Cebu
6. SEX	D Male / Female	ZIP CODE	6025
7. CIVIL STATUS	Single / Widowed Married / Separated Annulled / Others, specify _____	20. TELEPHONE NO.	0922 462 0454
8. CITIZENSHIP	FILIPINO	21. E-MAIL ADDRESS (if any)	romaresdailathae@gmail.com
9. HEIGHT (m)	1.68 m	22. CELLPHONE NO. (if any)	0922 462 0454
10. WEIGHT (kg)	68.8 kg	23. EMPLOYEE ID NO.	
11. BLOOD TYPE			
12. GSIS ID NO.			
13. PAG-IBIG ID NO.	1212-6234-1039		
14. PHILHEALTH NO.	12-025871231-0		
15. SSS NO.	06-4377247-8		
16. TIN			

II. FAMILY BACKGROUND

24. SPOUSE'S SURNAME	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	/ /
MIDDLE NAME	/ /
OCCUPATION	/ /
EMPLOYER/BLIS NAME	/ /
BUSINESS ADDRESS	/ /
TELEPHONE NO.	/ /
(Continue on separate sheet if necessary)	
26. FATHER'S SURNAME	/ /
FIRST NAME	/ /
MIDDLE NAME	/ /
27. MOTHER'S MAIDEN NAME	10 / 08 / 74
SURNAME	ROMARES, BATA THE JOAN IMACULADA S.
FIRST NAME	JOAN IMACULADA
MIDDLE NAME	SERENO
25. NAME OF CHILD	/ /
(Write full name and list all)	
	/ /
	/ /
	/ /
	/ /
	/ /

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

b. Have you ever been guilty of any administrative offense? 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) 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 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.
Richmond Ruedas	LATHUG, CEBU, CITY	09 97 982 2448
Friam Nikka Friolo	POBLACION, OSLOB, CEBU	09 27 648 3430 47
Mary Ann Benson	WOOD, OSLOB, CEBU	09 66 991 1879 47

43. EMPLOYMENT RECORD (latest)

COMPANY NAME	POSITION	FROM	TO

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

IN CASE OF EMERGENCY:

Please Contact: JOAN IMACULADA ROMARTEZ

Contact Number: 09 39 736 3739

Relation: MOTHER

Joia Romarte
SIGNATURE (Sign in the box)

DATE ACCOMPLISHED 01-20-20