



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	N A V A R E Z		
FIRST NAME	R O N D E L L		
MIDDLE NAME	V I L O R I A	3. NAME EXTENSION (e.g. Jr., Sr.)	N/A
4. DATE OF BIRTH (mm/dd/yyyy)	11/17/1993	17. RESIDENTIAL ADDRESS	Jayme St. Zone Pechay Paknaan Mandaue City
5. PLACE OF BIRTH	Cebu City	ZIP CODE	6014
6. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female Male	18. TELEPHONE NO.	
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	Jayme St. Zone Pechay Paknaan Mandaue City
8. CITIZENSHIP	Filipino	ZIP CODE	6014
9. HEIGHT (m)		20. TELEPHONE NO.	
10. WEIGHT (kg)	75 kg.	21. E-MAIL ADDRESS (if any)	rondell-navarez @ yahoo.com
11. BLOOD TYPE	O+	22. CELLPHONE NO. (if any)	09333340619
12. GSIS ID NO.		23. EMPLOYEE ID NO.	
13. PAG-IBIG ID NO.	1211-2272-1408		
14. PHILHEALTH NO.	12-025383138-9		
15. SSS NO.	06-3562031-8		
16. TIN	318-276-581-000		

II. FAMILY BACKGROUND

24. SPOUSE'S SURNAME	N/A	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	N/A	
MIDDLE NAME	N/A	
OCCUPATION	N/A	
EMPLOYER/BUS. NAME	IPLOY STAFFING SOLUTIONS	/ /
BUSINESS ADDRESS	9th Floor Ayala Center Cebu Tower Bohol St.	/ /
TELEPHONE NO.	Cebu Business Park, Cebu City 6000 Philippines	/ /
(Continue on separate sheet if necessary)		
26. FATHER'S SURNAME	NAVAREZ	/ /
FIRST NAME	FRANCISCO JR.	/ /
MIDDLE NAME	VILLAYER	/ /
27. MOTHER'S MAIDEN NAME		/ /
SURNAME	VILORIA	/ /
FIRST NAME	NELIA	/ /
MIDDLE NAME	PABLO	/ /
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
Resignation from prev comp.

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 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.
Sherwin Anos		
Jan Raymond Kwan		
Maja Marlberry Garces		

43. EMPLOYMENT RECORD (latest)

COMPANY NAME	POSITION	FROM	TO
Eperformax Contact Centers & BPO	CSR	July 2015 - Jan 2017	January 2017
The Results Companies	CSR	March 2017 - Aug 2017	August 2017
Teleperformance	CSR	Sept 2017 - Nov 2019	November 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.

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

COMMUNITY TAX CERTIFICATE NO.
ISSUED AT
ISSUED ON (mm/dd/yyyy)

RIGHT THUMBMARK

IN CASE OF EMERGENCY:
Please Contact: Nelia Navarez
Contact Number: _____

SIGNATURE (Sign in the box)