



## EMPLOYEE PERSONAL DATA SHEET

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

Schedule:

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### I. PERSONAL INFORMATION

Team Lead:

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2. SURNAME	<input type="checkbox"/> CAPAROSO		
FIRST NAME	<input type="checkbox"/> MARY PRINCESS		
MIDDLE NAME	CHAVIT	3. NAME EXTENSION (e.g. Jr., Sr.)	
4. DATE OF BIRTH (mm/dd/yyyy)	04 / 06 / 1992	17. RESIDENTIAL ADDRESS	V28 Juana Osmeña Ext. Purok 8 Kamputhaw Cebu City
5. PLACE OF BIRTH	CEBU CITY		
6. SEX	D Male <input type="checkbox"/> Female		
7. CIVIL STATUS	D Single DWidowed <input type="checkbox"/> Married DSeparated DAnnulled DOthers, specify _____	ZIP CODE	6000
8. CITIZENSHIP	FILIPINO	18. TELEPHONE NO.	(032) 384-0376
9. HEIGHT (m)	1.53m	19. PERMANENT ADDRESS	V28 Juana Osmeña Ext. Purok 8 Kamputhaw Cebu City
10. WEIGHT (kg)	40kg		
11. BLOOD TYPE	A+	ZIP CODE	6000
12. GSIS ID NO.	None	20. TELEPHONE NO.	(032) 384-0376
13. PAG-IBIG ID NO.	1210-9343-5214	21. E-MAIL ADDRESS (if any)	mpccaparoso@gmail.com
14. PHILHEALTH NO.	12-051314734-7		
15. SSS NO.	06-3408604-7	22. CELLPHONE NO. (if any)	09955347468
16. TIN	317-527-105	23. EMPLOYEE ID NO.	

### II. FAMILY BACKGROUND

24. SPOUSE'S SURNAME	CAPAROSO	DATE OF BIRTH (mm/dd/yyyy)
	FIRST NAME DONALD IAN	
MIDDLE NAME	ARANCO	11 / 14 / 1993
OCCUPATION	N/A	/ /
EMPLOYER/BUS. NAME	N/A	/ /
BUSINESS ADDRESS	N/A	/ /
TELEPHONE NO.	N/A	/ /
(Continue on separate sheet if necessary)		/ /
26. FATHER'S SURNAME	CHAVIT	12 / 07 / 1963
	FIRST NAME CECIL	/ /
	MIDDLE NAME MORATA	/ /
27. MOTHER'S MAIDEN NAME		/ /

SURNAME FIRST NAME MIDDLE NAME	CRUZ	01 / 11 / 1964
	MA. LOURDES	/ /
	PIELAGO	/ /
25. NAME OF CHILD (Write full name and list all)		/ /
TYRONE PSALM CHAVIT CAPAROSO		06 / 15 / 2017
MARY ELIANA CHAVIT CAPAROSO		01 / 03 / 2020
		/ /
		/ /
		/ /
		/ /

37 a. Have you ever been formally charged?	DYES <input type="checkbox"/> NO If YES, give details _____
b. Have you ever been guilty of any administrative offense?	DYES <input type="checkbox"/> 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 <input type="checkbox"/> 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?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details <u>Resignation; to look for more stable job</u>
40. Have you ever been a candidate in a national or local election (except Barangay election)?	DYES <input type="checkbox"/> 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 <input type="checkbox"/> NO If YES, give please specify: _____
b. Are differently abled?	DYES <input type="checkbox"/> NO If YES, give please specify: _____
c. Are you a solo parent?	DYES <input type="checkbox"/> NO If YES, give please specify: _____

42. REFERENCES (Person not related by consanguinity or affinity to applicant/appointee)		
NAME	ADDRESS	TEL NO.
Stephanie Rae R. Dabalos	Subangdako Mandaue City	09053286186
Leah S. Sala	Camp Marina Kalunasan Cebu City	09154886329
Renmen R. Hortelano	Sambag II Cebu City	09772713019

43. EMPLOYMENT RECORD (latest)			
COMPANY NAME	POSITION	FROM	TO
Cebu Parklane International Hotel	Human Resource Assistant	June, 2015	July, 2020
Cebu Parklane International Hotel	Hotel Shift Nurse	July, 2014	June, 2015
ePerformax	Customer Service Rep	October, 2013	April, 2014

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.

<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td style="padding: 2px;">COMMUNITY TAX CERTIFICATE NO.</td></tr> <tr><td style="padding: 2px;">ISSUED AT</td></tr> <tr><td style="padding: 2px;">/ /</td></tr> <tr><td style="padding: 2px;">ISSUED ON (mm/dd/yyyy)</td></tr> </table>	COMMUNITY TAX CERTIFICATE NO.	ISSUED AT	/ /	ISSUED ON (mm/dd/yyyy)	<div style="border: 1px solid black; width: 100px; height: 100px; margin: 0 auto;"></div> <p style="text-align: center; margin: 0;">RIGHT THUMBMARK</p>
COMMUNITY TAX CERTIFICATE NO.					
ISSUED AT					
/ /					
ISSUED ON (mm/dd/yyyy)					

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

<b>IN CASE OF EMERGENCY:</b> Please Contact: <u>Donald Ian A. Caparoso</u> Contact Numbe <u>09266694052</u> Relation: <u>_____ Husband</u>	<div style="border: 1px solid black; width: 100%; height: 100%; position: relative;"> <div style="position: absolute; top: 5px; right: 5px; font-size: small;">07/08/2020</div> <div style="position: absolute; top: 20px; left: 20px; font-size: x-small;">SIGNATURE (Sign in the box)</div> <div style="position: absolute; bottom: 5px; left: 20px; font-size: x-small;">DATE ACCOMPLISHED</div> </div>
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