

EMPLOYEE PERSONAL DATA SHEET

Print legibly. Mark appropriate box	xes D with "/" and use separate sheet if necessary.	Schedule:				
I. PERSONAL INFORMAT	TION	Team Lead:				
2. SURNAME GUZMAN						
FIRST NAME ISABEL MYGAN						
MIDDLE NAME	TUMARONG	3. NAME EXTENSION (e.g. Jr., S	r.) N/A			
4. DATE OF BIRTH (mm/dd/yyy	08 / 21 / 2020	17. RESIDENTIAL ADDRESS	316K GONZALES COMPOUND,			
5. PLACE OF BIRTH	GUIHULNGAN CITY, NEG. OR.		BARANGAY			
6. SEX	D Male Ø Female		CAMPUTHAW, CEBU CITY			
7. CIVIL STATUS	ℬ Single DWidowed	ZIP CODE	6000			
	DMarried DSeparated	18. TELEPHONE NO.	32 402 9045			
	DAnnulled DOthers, specify	19. PERMANENT ADDRESS	316K GONZALES			
8. CITIZENSHIP	FILIPINO		COMPOUND, BARANGAY			
9. HEIGHT (m)	160 cm		CAMPUTHAW, CEBU CITY			
10. WEIGHT (kg)	45 kg		CLBC CITT			
11. BLOOD TYPE	n/a	ZIP CODE	6000			
12. GSIS ID NO.	n/a	20. TELEPHONE NO.	32 402 9045			
13. PAG-IBIG ID NO.	1212 4615 1610	21. E-MAIL ADDRESS (if any)	isabelmyganguzman			
14. PHILHEALTH NO.	12-025800390-5		@gmail.com			
15. SSS NO.	06-4265779-8	22. CELLPHONE NO. (if any)	09273984530			
16. TIN	743-897-032	23. EMPLOYEE ID NO.	n/a			
II. FAMILY BACKGROUN	D					
24. SPOUSE'S SURNAME	n/a		DATE OF BIRTH			
FIRST NAME	n/a		(mm/dd/yyyy)			
MIDDLE NAME	n/a		n/a / /			
OCCUPATION	n/a		n/a / /			
EMPLOYER/BUS. NAME	n/a		n/a / /			
BUSINESS ADDRESS	n/a		n/a / /			
TELEPHONE NO.	n/a		n/a / /			
	(Continue on separate sheet if necessary)		/ /			
26. FATHER'S SURNAME	GUZMAN	11 / 23 / 1966				
FIRST NAME	ISAGANI CLEMENT		/ /			
MIDDLE NAME	VERGARA		/ /			
27. MOTHER'S MAIDEN NAME			/ /			
SURNAME	TOMARONG		01 / 23 / 1976			
FIRST NAME	MYRNA		/ /			
MIDDLE NAME	YBAÑEZ		/ /			
	25. NAME OF CHILD		/ /			
	(Write full name and list all)		/ /			
n/a n/a			/ /			
n/a			/ /			
n/a			/ /			
n/a			/ /			
n/a			/ /			

COMPANY NAME POSITION FROM TO EPERFORMAX CSR APRIL 2019 JANUARY 2020 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. Jalso 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 SIGNATURE (Sign in the box)	37 a. Have you ever been formally c	Dyes	₽ NO			
b. Have you ever been guilty of any administrative offense? Drss		If YES, give	details			
Are you a member of any indigenous group? 13. Pursuant to (a) Indigenous People's Art (BA 88710, ID) Magna Caras for Disabled Persons (BA 7277); and 500 Parents welfare Act 2000 IRA 88710, ID) Magna Caras for Disabled Persons (BA 7277); b. Are globe a solo parent? 24. References (b) French out reliabled? 25. Are you a solo parent? 26. Are you a solo parent? 27. Are you a solo parent? 27. Are you a solo parent? 28. Application of any indigenous group? 31. Pursuant to (a) Indigenous People's Art (BA 88710, ID) Magna Caras for Disabled Persons (BA 7277); b. Are differently abled? 26. Are you a member of any indigenous group? 27. Are you a solo parent? 28. Application of the policy on a parent? 29. Are you a solo parent? 29. Are you a solo parent? 20. Are you a solo parent? 20. C. Are you a solo parent? 21. Pursuant to (b) Indigenous People's Art (BA 88710, ID) Magna Caras for Disabled Persons (BA 7277); bress place of the young of young						
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38. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal? 39. Have you ever been separated from the service in any following modes: resignation, the provision of the contract, AWOL or phased out, in the public or private sector? 40. Have you ever been a candidate in a national or local election (except large of from the provision of the care of my moditer when she got sick of the care o	b. Have you ever been guilty or a	iny administrative offer	iser		·	
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39. Have you ever been separated from the service in any following modes: resignation, returnment, dropped from the rolls, dismissal, termination, end of term, finished contract, AWOL or phased out, in the public or private sector? 40. Have you ever been a candidate in a national or local election (except like and provide care of my morther when she got sick. 40. Have you ever been a candidate in a national or local election (except like and provide care of my morther when she got sick. 40. Have you ever been a candidate in a national or local election (except like and provide care of my morther when she got sick. 40. Have you ever been a candidate in a national or local election (except like and provide care of my morther when she got sick. 40. Have you are following them: 41. Pursuant to: (a) indigenous People's Act (IA 83710; (b) Magna Cata for Disabled Persons (IA 7277); and Solo Parents Welfare Act 2000 (IN 8972), please answer the following items: 41. A rey you a member of any indigenous group? 42. A rey you a solo parent? 42. REFERENCES (Person not related by consanguinity or affinity to applicant/appointee) A DORESS 43. EMPLOYMENT RECORD (latest) 44. A Jack of the provide of the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. 44. I declare under cost 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. 44. I declare under cost 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. 44. I declare under cost that this information shall remain confidential. 45. I SSUED AT RIGHT THUMBMARK 86. I SSUED AT RIGHT THUMBMARK 87. I SSUED ON Imm/ds/yyyy) 88. I SIGNATIFett (Sign in the box)			law, decree,	Dyes	₽NO	
retrement, dropped from the rolls, dismissal, termination, end of term, finished contract, AWOL or phased out, in the public or private sector? 40. Have you ever been a candidate in a national or local election (except Barangay election)? 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 8971), please answer the following tens: a. Are you a member of any indigenous group? b. Are differently abled? c. Are you a solo parent? Dyes Pho If YES, give please specify:	ordinance or regulation by any court or	tribunal?		If YES, give	details	
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If YES, give please specify: DYES DINO If YES, give please specify: 142. REFERENCES (Person not related by consanguinity or affinity to applicant/appointee) NAME ADDRESS TEL NO. Lorraine Leonor 312 N Escario St. Purok 4, Lower Camputhaw 09985854195 Aaron Sagaoinit Barangay Apas 09292527550 43. EMPLOYMENT RECORD (latest) COMPANY NAME POSITION FROM TO EPERFORMAX CSR APRIL 2019 JANUARY 2020 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) N CASE OF EMERGENCY: Please Contact: Faith Mary Mae Guzman Contact Number: 32 402 9045				If YES, give	please specify:	
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