

EMPLOYEE PERSONAL DATA SHEET

Print legibly. Mark appropriate bo	oxes D with "/" and use separate sheet if necessary.	Schedule:	
I. PERSONAL INFORMA	TION	Team Lead:	
2. SURNAME			
FIRST NAME		E E	
MIDDLE NAME	DUARTE	3. NAME EXTENSION (e.g. Jr., S	r.)
4. DATE OF BIRTH (mm/dd/yy	10 / 14 / 1991	17. RESIDENTIAL ADDRESS	33- O MC ARTHUR
5. PLACE OF BIRTH	ORMOC CITY		BLVD., BRGY. TINAGO, CEBU CTY
6. SEX	D Male 1 Female		
7. CIVIL STATUS	Ø Single DWidowed	ZIP CODE	6000
	DMarried DSeparated	18. TELEPHONE NO.	
	DAnnulled DOthers, specify	19. PERMANENT ADDRESS	BRGY. BUENAVISTA, PADRE BURGOS SO.
8. CITIZENSHIP	FILIPINO		LEYTE
9. HEIGHT (m)	1.6 m		
10. WEIGHT (kg)	62 kg		
11. BLOOD TYPE	O+	ZIP CODE	6602
12. GSIS ID NO.		20. TELEPHONE NO.	
13. PAG-IBIG ID NO.	1210 4477 2738	21. E-MAIL ADDRESS (if any)	sheilladeelumasag8309@
14. PHILHEALTH NO.	12 051109756 3		gmail.com
15. SSS NO.	06 3286288 1	22. CELLPHONE NO. (if any)	0928-978-0928
16. TIN	312 319 605	23. EMPLOYEE ID NO.	
II. FAMILY BACKGROUN	ND		
24. SPOUSE'S SURNAME			DATE OF BIRTH
FIRST NAME			(mm/dd/yyyy)
MIDDLE NAME			/ /
OCCUPATION			/ /
EMPLOYER/BUS. NAME			/ /
BUSINESS ADDRESS			/ /
TELEPHONE NO.			/ /
	(Continue on separate sheet if necessary)		/ /
26. FATHER'S SURNAME	LUMASAG		04 / 09 / 1965
FIRST NAME	EDDIE		/ /
MIDDLE NAME	BAGAAN		/ /
27. MOTHER'S MAIDEN NAME			/ /
SURNAME	LUMASAG		12 / 02 / 1968
FIRST NAME	PRISCILLA	/ /	
MIDDLE NAME	DUARTE		/ /
	25. NAME OF CHILD		/ /
	(Write full name and list all)		/ /
ETHAN L. CADAMPOG			09 / 12 / 2013
ELLEZE L. CADAMPOG			02 / 15 / 2016
			/ /
			//
			/ /

37 a. Have you ever been formally cl	DYES DNO If YES, give details ———————————————————————————————————						
b. Have you ever been guilty of a	DYES DNO If YES, give details						
38. Have you ever been convicted of any	DYES	D NO					
38. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?				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 Øno If YES, give details			
40. Have you ever been a candidate in a Barangay election)?	Dyes DNO If YES, give details						
41. Pursuant to: (a) Indigenouse People's Act (RA 837 and Solo Parents Welfare Act 2000 (RA 8972), please							
, , , , , , , , , , , , , , , , , , , ,				Dyes DNO If YES, give please specify:			
b. Are differently abled?				Dyes DNO If YES, give please specify: Dyes DNO			
c. Are you a solo parent?			If YES, give please specify:				
42. REFERENCES (Person not related by consang	guinity or affinity to applicant/appoin	ntee)	,				
NAME	ADDI	RESS		TEL NO.			
GLAIZA PONCE	MARIGONDON, LAPU-LAF	U CITY CEBU	ſ	0945-694-3400			
LUI JOY NARIA MARIGONDON, LAPU-LAPU CITY CEBU			ſ	0948-691-0531			
43. EMPLOYMENT RECORD (latest)							
COMPANY NAME	POSITION	FRC	OM	ТО			
PLANTATION BAY RESORT AND SPA	FOOD ATTENDANT	JULY 2012		DEC. 2017			
PLANTATION BAY RESORT AND SPA	ROOM ATTENDANT	OCT. 2019		MARCH 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) RIGHT THUMBMARK IN CASE OF EMERGENCY: Please Contact: KERVIN ARTHUR CADAMPOG Contact Number: 0919-326-2299 Relation: LIVE IN PARTNER DATE ACCOMPLISHED							