



# EMPLOYEE PERSONAL DATA SHEET

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

Signature

Team Lead

## I. PERSONAL INFORMATION

2. SURNAME	RIVERA		
FIRST NAME	JARARHIA		
MIDDLE NAME	CORTES	3. NAME EXTENSION (e.g. Jr., Sr.)	
4. DATE OF BIRTH (mm/dd/yyyy)	01 / 15 / 1997	17. RESIDENTIAL ADDRESS	B9119 LESSANDRA DALAMBAN, BRGY. PULANGBATO, CC
5. PLACE OF BIRTH	SIGNALOR	ZIP CODE	6000
6. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	18. TELEPHONE NO.	344 5567
7. CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated <input type="checkbox"/> Annulled <input type="checkbox"/> Others, specify _____	19. PERMANENT ADDRESS	B 9119, LESSANDRA DALAMBAN, BRGY. PULANGBATO, CC
8. CITIZENSHIP	FILIPINO	ZIP CODE	6000
9. HEIGHT (m)	1.67m	20. TELEPHONE NO.	344 5567
10. WEIGHT (kg)	55 kg	21. E-MAIL ADDRESS (if any)	jariverradits@gmail.com
11. BLOOD TYPE	B+	22. CELLPHONE NO. (if any)	0936 862 9709
12. GSIS ID NO.		23. EMPLOYEE ID NO.	
13. PAG-IBIG ID NO.	1212 - 0633 - 0791		
14. PHILHEALTH NO.	1202 - 5669 - 2597		
15. SSN NO.	06 - 3870628 - 4 // <del>06-3870628-4</del>		
16. TIN	703 - 458 - 630 - 000		

## II. FAMILY BACKGROUND

24. SPOUSE'S SURNAME		DATE OF BIRTH (mm/dd/yyyy)	
FIRST NAME			
MIDDLE NAME			
OCCUPATION			
EMPLOYER/BUS. NAME			
BUSINESS ADDRESS			
TELEPHONE NO.			
(Continue on separate sheet if necessary)			
26. FATHER'S SURNAME	DANIEL RIVERA		
FIRST NAME	DANIEL		
MIDDLE NAME	KUTZOW		
27. MOTHER'S MARRIEN NAME			
SURNAME	CORTES		
FIRST NAME	MARIA JESINDA		
MIDDLE NAME	MONTE		
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 WALOW Resignation

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 8373); (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.
Carlos Goting	iPlay Inc.	0917 880 3790
Angel Mercado	Mabuhay Filament Inc.	255 9260
Elena Langlid	Mabuhay Filament Inc.	0915 885 2255

43. EMPLOYMENT RECORD (latest)

COMPANY NAME	POSITION	FROM	TO
Mabuhay Filament, Inc.	Executive Assistant	Oct 2019	March 2020
Stark Global	Lead Generations	Nov 2016	Feb 2018
Graphix Color & Animation	Lead Generations	May 2016	Nov 2016

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

12 picture taken within the last 6 months 3.5 cm. x 4.5 cm (passport size)

Computer generated or zeroed copy of picture is not acceptable

IN CASE OF EMERGENCY:  
 Please Contact: JEDANIMAR MARIE C. RIVERA  
 Contact Number: 0915 493 8385

SIGNATURE (Sign in the box)