



# EMPLOYEE PERSONAL DATA SHEET

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

Schedule: \_\_\_\_\_

Team Lead: \_\_\_\_\_

## I. PERSONAL INFORMATION

|                                   |   |  |  |
|-----------------------------------|---|--|--|
| 2. SURNAME                        | BARILI  |  |  |
| FIRST NAME                        | JOY MARIE   |  |  |
| MIDDLE NAME                       | CANON   |  |  |
| 3. NAME EXTENSION (e.g. Jr., Sr.) |   |  |  |
| 4. DATE OF BIRTH (mm/dd/yyyy)     | 7 / 05 / 1990   |  |  |
| 5. PLACE OF BIRTH                 | MALIBOG SO. LEYTE   |  |  |
| 6. SEX                            | D Male / Female   |  |  |
| 7. CIVIL STATUS                   | D Single DWidowed<br>/ Married DSeparated<br>DAnnulled DOthers, specify _____ |  |  |
| 8. CITIZENSHIP                    | FILIPINO  |  |  |
| 9. HEIGHT (m)                     |   |  |  |
| 10. WEIGHT (kg)                   |   |  |  |
| 11. BLOOD TYPE                    | O+  |  |  |
| 12. GSIS ID NO.                   |   |  |  |
| 13. PAG-IBIG ID NO.               |   |  |  |
| 14. PHILHEALTH NO.                | 0202-5664-1101  |  |  |
| 15. SSS NO.                       | 06-3284110-3  |  |  |
| 16. TIN                           | 312-069-344   |  |  |
| 17. RESIDENTIAL ADDRESS           |   |  |  |
| ZIP CODE                          |   |  |  |
| 18. TELEPHONE NO.                 |   |  |  |
| 19. PERMANENT ADDRESS             | BLK 2 LOT 7 SIMO<br>CAMANSI BLDG.<br>LORETA CEBU<br>CITY                      |  |  |
| ZIP CODE                          | 6000  |  |  |
| 20. TELEPHONE NO.                 |   |  |  |
| 21. E-MAIL ADDRESS (if any)       | barilijoymarie@gmail.com  |  |  |
| 22. CELLPHONE NO. (if any)        | 09054852073   |  |  |
| 23. EMPLOYEE ID NO.               |   |  |  |

## II. FAMILY BACKGROUND

|                      |             |                            |
|----------------------|-------------|----------------------------|
| 24. SPOUSE'S SURNAME | BARILI      | DATE OF BIRTH (mm/dd/yyyy) |
| FIRST NAME           | JONDE       | 12 / 03 / 1990             |
| MIDDLE NAME          | DOLLER      | / /                        |
| OCCUPATION           | STOCK CLERK | / /                        |
| EMPLOYER/BUS. NAME   | WATSONS     | / /                        |
| BUSINESS ADDRESS     |             | / /                        |
| TELEPHONE NO.        |             | / /                        |

(Continue on separate sheet if necessary)

|                          |          |               |
|--------------------------|----------|---------------|
| 26. FATHER'S SURNAME     |          | / /           |
| FIRST NAME               |          | / /           |
| MIDDLE NAME              |          | / /           |
| 27. MOTHER'S MAIDEN NAME |          | / /           |
| SURNAME                  | CANON    | 6 / 19 / 1967 |
| FIRST NAME               | NARIBETH | / /           |
| MIDDLE NAME              | OLVINA   | / /           |

### 25. NAME OF CHILD

(Write full name and list all)

|                        |               |
|------------------------|---------------|
| IVAN EZEKIEL C. BARILI | 1 / 03 / 2018 |
|                        | / /           |
|                        | / /           |