



EMPLOYEE PERSONAL DATA SHEET

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

PERSONAL INFORMATION

SURNAME	GOMEZ		
FIRST NAME	JAKE LAWRENCE		
MIDDLE NAME	BERMISO	3. NAME EXTENSION (e.g. Jr., Sr.)	
DATE OF BIRTH (mm/dd/yyyy)	07/03/1983	16. RESIDENTIAL ADDRESS	
PLACE OF BIRTH	TACUBAN CITY	KINASANG-AN PAROO CEBU CITY	
SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	ZIP CODE	
CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Annulled <input type="checkbox"/> Others, specify _____	6000	
CITIZENSHIP	FIUPINO	17. TELEPHONE NO.	
HEIGHT (m)	5'6	18. PERMANENT ADDRESS	
WEIGHT (kg)	150 lbs.	BULGOS ST. BRGY. SAN ROQUE TAMAYAN, LEYTE	
BLOOD TYPE	A+	ZIP CODE	
GSIS ID NO.		6502	
PAG-IBIG ID NO.		19. TELEPHONE NO.	
PHILHEALTH NO.	19089871711 2	20. E-MAIL ADDRESS (if any)	
SSS NO.	06 2299605 5	21. CELLPHONE NO. (if any)	
		09391289383	
		22. AGENCY EMPLOYEE NO.	
		23. TIN	
		313 216 982	

FAMILY BACKGROUND

SPOUSE'S SURNAME	25. NAME OF CHILD (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME		/ /
MIDDLE NAME		/ /
OCCUPATION		/ /
EMPLOYER/BUS. NAME		/ /
BUSINESS ADDRESS		/ /
TELEPHONE NO.		/ /
(Continue on separate sheet if necessary)		
FATHER'S SURNAME		12/18/1945
FIRST NAME	GOMEZ	/ /
MIDDLE NAME	JOSE III DIZON	/ /
MOTHER'S MAIDEN NAME		/ /
SURNAME	BERMISO	09/16/1949
FIRST NAME	CORNELIA	/ /
MIDDLE NAME	REPADAS	
(Continue on separate sheet if necessary)		

37 a. Have you ever been formally charged? YES ~~DNO~~
 If YES, give details: _____

b. Have you ever been guilty of any administrative offense? DYES ~~DNO~~
 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 ~~DNO~~
 If YES, give details: _____

39. Have you ever been separated from the service in any of the 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 ~~DNO~~
 If YES, give details: _____

40. Have you ever been a candidate in a national or local election (except Barangay election)? DYES ~~DNO~~
 If YES, give details: _____

41. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), please answer the following items:

a. Are you a member of any indigenous group? DYES ~~DNO~~
 If YES, please specify: _____

b. Are you differently abled? DYES ~~DNO~~
 If YES, please specify: _____

c. Are you a solo parent? DYES ~~DNO~~
 If YES, please specify: _____

42. REFERENCES (Person not related by consanguinity or affinity to applicant / appointee)

NAME	ADDRESS	TEL. NO.
MS. ANN SILVA - CRUZ	CEBU CITY	0922801122
MR. ARGIE REQUIZO	CEBU CITY	09104035543



43. 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)

 SIGNATURE (Sign inside the box)
DATE ACCOMPLISHED

RIGHT THUMBMARK
