



# EMPLOYEE PERSONAL DATA SHEET

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

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

## I. PERSONAL INFORMATION

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

2. SURNAME	L I M		
FIRST NAME	S T E F F I N I C O L E		
MIDDLE NAME	MALOLOY-ON		3. NAME EXTENSION (e.g. Jr., Sr.)
4. DATE OF BIRTH (mm/dd/yyyy)	11 / 25 / 98		17. RESIDENTIAL ADDRESS
5. PLACE OF BIRTH	CEBU CITY		VILLA BONITA SUBDV. JUGAN CONSTRUCCION CEBU
6. SEX	D Male <input checked="" type="checkbox"/> Female		ZIP CODE
7. CIVIL STATUS	<input checked="" type="checkbox"/> Single D Widowed D Married D Separated D Annulled D Others, specify _____		6001
8. CITIZENSHIP	FILIPINO		18. TELEPHONE NO.
9. HEIGHT (m)	(165 cm)		520-8059
10. WEIGHT (kg)	50 kg		19. PERMANENT ADDRESS
11. BLOOD TYPE	A+		VILLA BONITA SUBDV. JUGAN CONSTRUCCION CEBU
12. GSIS ID NO.			ZIP CODE
13. PAG-IBIG ID NO.			6001
14. PHILHEALTH NO.			20. TELEPHONE NO.
15. SSS NO.			520-8059
16. TIN			21. E-MAIL ADDRESS (if any)
			limsteffinicole@gmail.com
			22. CELLPHONE NO. (if any)
			09567423750
			23. EMPLOYEE ID NO.

## 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	LIM	09 / 13 / 74
FIRST NAME	CRISTOPHER	/ /
MIDDLE NAME	PASTORPIDE	/ /
27. MOTHER'S MAIDEN NAME		/ /
SURNAME	MALOLOY-ON	07 / 11 / 63
FIRST NAME	MARIA TERESA	/ /
MIDDLE NAME	CODILLA	/ /
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 \_\_\_\_\_

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) Indigenouse People's Act (RA 83710; (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.
CHILOU BENITEZ, RPh	UNIVERSITY OF SAN CARLOS	09268416452
JUVELYN BARAYO	MARIA MONTESSORI INT. SCHOOL	092750607920
FLORAMAI HOYAL	TELEPERFORMANCE	09422393597

43. EMPLOYMENT RECORD (latest)

COMPANY NAME	POSITION	FROM	TO

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.

ID picture taken within the last 6 months 3.5 cm. X 4.5 cm (passport size)

Computer generated or xerox copy of picture is not acceptable

COMMUNITY TAX CERTIFICATE NO. \_\_\_\_\_

ISSUED AT \_\_\_\_\_

/ /

ISSUED ON (mm/dd/yyyy) \_\_\_\_\_

RIGHT THUMBMARK

**IN CASE OF EMERGENCY:**  
 Please Contact: MARIA TERESA M. LIM

SIGNATURE (Sign in the box)

