

EMPLOYEE PERSONAL DATA SHEET

7. CIVIL STATUS	Print legibly. Mark appropriate boxes D with "/" and use separate sheet if necessary. Schedule:			
FIRST NAME	I. PERSONAL INFORMA		Team Lead:	
MIDDLE NAME BELARMINO 3. NAME EXTENSION (e.g., Jr., Sr.)	2. SURNAME	ROJAS		
A. DATE OF BIRTH (mm/dd/yyyy)	FIRST NAME	CHRISTINE MAE		0 0 0 0 0
S. PLACE OF BIRTH	MIDDLE NAME	BELARMINO	3. NAME EXTENSION (e.g. Jr., S	r.)
S. PLACE OF BIRTH CEBU CITY G. SEX D. Male # Female Female Gity, Cebu Gity,	4. DATE OF BIRTH (mm/dd/yy	yy) 12 / 15 / 1996	17. RESIDENTIAL ADDRESS	Ampalaya Village,
S.EX	5. PLACE OF BIRTH	CEBU CITY		Gun-ob, Lapu-lapu
DMarried DSeparated DAnnulled Dothers, specify 19, PERMANENT ADDRESS Same as above	6. SEX	D Male Ø Female		City, Cebu
Dannulled Dothers, specify 19, PERMANENT ADDRESS Same as above	7. CIVIL STATUS	Single DWidowed	ZIP CODE	6015
8. CITIZENSHIP Filipino 9. HEIGHT (m) 5 feet 10. WEIGHT (kg) 48 kgs 11. BLOOD TYPE type O 20. TELEPHONE NO. 12.12 0681 5231 21. E-MAIL ADDRESS (if any) 12. E-MAIL A		DMarried DSeparated	18. TELEPHONE NO.	
9. HEIGHT (m) 5 feet 10. WEIGHT (kg) 48 kgs 11. BLOOD TYPE type O 12. GSIS ID NO. 13. PAG-IBIG ID NO. 14. PHILHEALTH NO. 1202-5651-2861 15. SSS NO. 0640122364 26. TELEPHONE NO. 17. E-MAIL ADDRESS (If any) 27. ELLIPHONE NO. (If any) 28. SPOUSE'S SURNAME FIRST NAME MIDDLE NAME OCCUPATION 10. Continue on separate sheet if necessary) 10. FATHER'S SURNAME FIRST NAME MIDDLE NAME MIDDLE NAME SURNAME FIRST NAME MIDDLE NAME MIDDLE NAME MIDDLE NAME SURNAME FIRST NAME MIDDLE NAME SURNAME MIDDLE NAME MIDDLE NAME MIDDLE NAME SURNAME MIDDLE NAME MIDDLE NAME MIDDLE NAME SURNAME MIDDLE NAME MIDDLE NAME SURNAME MIDDLE NAME MIDDLE NAME MIDDLE NAME SURNAME MIDDLE NAME MIDDL		DAnnulled DOthers, specify	19. PERMANENT ADDRESS	Same as above
10. WEIGHT (kg)	8. CITIZENSHIP	Filipino		
11. BLOOD TYPE type O	9. HEIGHT (m)	5 feet		
12. GSIS ID NO. 20. TELEPHONE NO. 21. FOR STATE	10. WEIGHT (kg)	48 kgs		
13. PAG-IBIG ID NO. 1212 0681 5231 21. E-MAIL ADDRESS (if any) 1202-5651-2861 22. CELLPHONE NO. (if any) 22. CELLPHONE NO. (if any) 23. EMPLOYEE ID NO. 11. FAMILY BACKGROUND 24. SPOUSE'S SURNAME FIRST NAME MIDDLE NAME PIRST NAME FIRST NAME FIRST NAME RIST NAME FIRST NAME BUSINESS ADDRESS FIRST NAME MIDDLE NAME PIRST NAME FIRST NAME MIDDLE NAME PIRST NAME MIDDLE NAME PIRST NAME MIDDLE NAME PIRST NAME MIDDLE NAME PIRST NAME SURNAME PIRST NAME MIDDLE NAME PIRST NAME NOTICE NAME PIRST NAME SURNAME PIRST NAME NOTICE NAME PIRST NAME SURNAME PIRST NAME SURNAME PIRST NAME NOTICE NAME PIRST NAME SURNAME PIRST NAME SURNAME PIRST NAME SURNAME PIRST NAME NOTICE NAME PIRST NAME NOTICE NAME PIRST NAME SURNAME PIRST NAME NOTICE NAME PIRST NAME NOTICE NAME PIRST NAME SURNAME PIRST NAME NOTICE NAME PIRST NAME NOTICE NAME PIRST NAME PIRST NAME NOTICE NAME PIRST NAME NOTICE NAME PIRST NAME PIRST NAME PIRST NAME NOTICE NAME PIRST	11. BLOOD TYPE	type O	ZIP CODE	
14. PHILHEALTH NO. 1202-5651-2861 15. SSS NO. 0640122364 22. CELLPHONE NO. (If any) 16. TIN 339-847-769 23. EMPLOYEE ID NO. 11. FAMILY BACKGROUND 24. SPOUSE'S SURNAME FIRST NAME MIDDLE NAME 25. FATHER'S SURNAME FIRST NAME MIDDLE NAME 26. FATHER'S SURNAME FIRST NAME MIDDLE NAME 27. MOTHER'S MAIDEN NAME 28. Belarmino Norievin Sumalinog 29. NAME OF CHILD (Write full name and list all) 20. SEAL PHONE NO. (If any) 22. CELLPHONE NO. (If any) 22. CELLPHONE NO. (If any) 22. EMPLOYEE ID NO. 23. EMPLOYEE ID NO. 24. SPOUSE'S SURNAME (mm//dd//yyyy) 25. FATHER'S SURNAME FIRST NAME NOTIEVIN (Morata) 26. FATHER'S SURNAME FIRST NAME NOTIEVIN (Morata) 27. MOTHER'S MAIDEN NAME 28. SAME OF CHILD (Morate full name and list all)	12. GSIS ID NO.		20. TELEPHONE NO.	
15. SSS NO. 0640122364 22. CELLPHONE NO. (If any) 23. EMPLOYEE ID NO. 23. EMPLOYEE ID NO. 23. EMPLOYEE ID NO. 24. SPOUSE'S SURNAME FIRST NAME MIDDLE NAME OCCUPATION EMPLOYEE, BUSINESS ADDRESS TELEPHONE NO. (Continue on separate sheet if necessary) / / / / / / / / / / / / / / / / / / /	13. PAG-IBIG ID NO.	1212 0681 5231	21. E-MAIL ADDRESS (if any)	rojas.christinemae.ict@gmail.com
16. TIN 339-847-769 23. EMPLOYEE ID NO. II. FAMILY BACKGROUND	14. PHILHEALTH NO.	1202-5651-2861		
II. FAMILY BACKGROUND 24. SPOUSE'S SURNAME FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUS. NAME BUSINESS ADDRESS TELEPHONE NO. (Continue on separate sheet if necessary) FIRST NAME MIDDLE NAME MIDDLE NAME SURNAME FIRST NAME FIRST NAME MIDDLE NAME SURNAME FIRST NAME FIRST NAME MIDDLE NAME SURNAME MIDDLE NAME SURNAME MIDDLE NAME SURNAME MIDDLE NAME MIDDLE NAME SURNAME MIDDLE NAME Wirtle full name and list all) (Write full name and list all)	15. SSS NO.	0640122364	22. CELLPHONE NO. (if any)	09955660874
24. SPOUSE'S SURNAME FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUS. NAME BUSINESS ADDRESS TELEPHONE NO. (Continue on separate sheet if necessary) (Continue on separate sheet if necessary) 7 / 7 26. FATHER'S SURNAME FIRST NAME MIDDLE NAME Noriata 27. MOTHER'S MAIDEN NAME FIRST NAME MIDDLE NAME SURNAME FIRST NAME MIDDLE NAME V / CONTINUE ON SEPARATE ON SEPA	16. TIN	339-847-769	23. EMPLOYEE ID NO.	
FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUS. NAME BUSINESS ADDRESS TELEPHONE NO. (Continue on separate sheet if necessary) 7 (Continue on separate sheet if necessary) Rojas Rojas Rojas Rojas Rolito Morata 27. MOTHER'S MAIDEN NAME FIRST NAME MIDDLE NAME BElarmino Norievin SURNAME MIDDLE NAME Norievin SUMALIENCE SUMALIENCE V (Write full name and list all) Norievin (Write full name and list all)	II. FAMILY BACKGROU	ND		
MIDDLE NAME OCCUPATION EMPLOYER/BUS. NAME BUSINESS ADDRESS TELEPHONE NO. (Continue on separate sheet if necessary) 7 (Continue on separate sheet if necessary) PROjas Rojas Rojas Rolito Morata 7 / Morata 7 / 27. MOTHER'S MAIDEN NAME FIRST NAME FIRST NAME MIDDLE NAME SURNAME FIRST NAME FIRST NAME MIDDLE NAME SURNAME FIRST NAME MIDDLE NAME SURNAME FIRST NAME MIDDLE NAME SURNAME MIDDLE NAME SURNAME MIDDLE NAME SURNAME MIDDLE NAME V / Write full name and list all)	24. SPOUSE'S SURNAME	n/a		DATE OF BIRTH
CCCUPATION	FIRST NAME			(mm/dd/yyyy)
EMPLOYER/BUS. NAME	MIDDLE NAME			/ /
BUSINESS ADDRESS TELEPHONE NO. (Continue on separate sheet if necessary) 26. FATHER'S SURNAME FIRST NAME MIDDLE NAME SURNAME FIRST NAME MIDDLE NAME Belarmino Norievin Sumalinog 1, // Morata 1, // Morata 1, // Morata 1, // Morata 1, // Morata 1, // 27. MOTHER'S MAIDEN NAME FIRST NAME MIDDLE NAME SURNAME MIDDLE NAME SURNAME MIDDLE NAME SURNAME MIDDLE NAME SUMALINOG Norievin Sumalinog / // (Write full name and list all)	OCCUPATION			/ /
TELEPHONE NO. / / (Continue on separate sheet if necessary) / / 26. FATHER'S SURNAME FIRST NAME MOTATA / / MIDDLE NAME SURNAME FIRST NAME FIRST NAME FIRST NAME SURNAME FIRST NAME FIRST NAME SURNAME / / MIDDLE NAME SURNAME / / / SURNAME FIRST NAME SURNAME / / / Morievin / / Sumalinog / / 25. NAME OF CHILD / / (Write full name and list all)	EMPLOYER/BUS. NAME			/ /
(Continue on separate sheet if necessary) 26. FATHER'S SURNAME FIRST NAME MIDDLE NAME MOrata 27. MOTHER'S MAIDEN NAME FIRST NAME FIRST NAME MIDDLE NAME SURNAME FIRST NAME MIDDLE NAME SURNAME FIRST NAME MIDDLE NAME SUMMIDDLE NAME 1 25. NAME OF CHILD (Write full name and list all)	BUSINESS ADDRESS			/ /
26. FATHER'S SURNAME FIRST NAME MIDDLE NAME 27. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME MIDDLE NAME SURNAME MIDDLE NAME SUMAILINO Norievin Sumalinog (Write full name and list all) 103 / 26 / 1974 / / // // // // // // // //	TELEPHONE NO.			/ /
Rolito		/ /		
Morata	26. FATHER'S SURNAME	Rojas		03 / 26 / 1974
27. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME Sumalinog (Write full name and list all)	FIRST NAME			/ /
SURNAME Belarmino 03 / 12 / 1975	MIDDLE NAME	Morata		/ /
FIRST NAME MIDDLE NAME Norievin Sumalinog / / 25. NAME OF CHILD / / (Write full name and list all)	27. MOTHER'S MAIDEN NAM			/ /
Sumalinog 25. NAME OF CHILD (Write full name and list all)	SURNAME	Belarmino		03 / 12 / 1975
25. NAME OF CHILD // / (Write full name and list all) // /	FIRST NAME	Norievin		/ /
(Write full name and list all)	MIDDLE NAME	Sumalinog		/ /
		25. NAME OF CHILD		/ /
n/a / /		/ /		
		/ /		
				/ /
				/ /
/ /				//
				/ /

37 a. Have you ever been formally charged?				Dyes D NO If YES, give details	
b. Have you ever been guilty of any administrative offense?				Dyes Øno If YES, give details	
38. Have you ever been convicted of any	crime or violation of any l	aw. decree.	Dyes	Ø NO	
ordinance or regulation by any court or t		If YES, give details			
39. Have you ever been separated from the retirement, dropped from the rolls, dismissa contract, AWOL or phased out, in the public	DYES If YES, give	p NO details			
40. Have you ever been a candidate in a Barangay election)?	Dyes If YES, give	ØNO details			
41. Pursuant to: (a) Indigenouse People's Act (RA 837 and Solo Parents Welfare Act 2000 (RA 8972), please					
a. Are you a member of any indigenousb. Are differently abled?	DYES If YES, give Dyes	pno please specify: pno			
c. Are you a solo parent?	If YES, give	If YES, give please specify:			
42. REFERENCES (Person not related by consang	guinity or affinity to applicant/appo	ointee)	II ILJ, give	piease specify	
NAME	I	DRESS		TEL NO.	
n/a					
43. EMPLOYMENT RECORD (latest)					
COMPANY NAME			ROM	то	
Plantation Bay Resort and Spa	Food Attendant	June 25, 2019		November 5, 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 ISSUED AT / /			Computer generated or xerox copy of picture is not acceptable		
ISSUED ON (mm/dd/yyyy) IN CASE OF EMERGENCY:		RIGHT THU	JMBMARK // //		
Please Contact: Norievin Rojas Contact Number: 09207793957		L	SIGNATURE	(Sign in the box)	
Relation: Mother			DATE A	CCOMPLISHED	