



# EMPLOYEE PERSONAL DATA SHEET

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

## I. PERSONAL INFORMATION

2. SURNAME	GENTICA		
FIRST NAME	AMALIA GUY		
MIDDLE NAME	BATAWA	3. NAME EXTENSION (e.g. Jr., Sr.)	
4. DATE OF BIRTH (mm/dd/yyyy)	09/24/1992	16. RESIDENTIAL ADDRESS	
5. PLACE OF BIRTH	CEBU CITY	D. B. NERI ST., STO. NIÑO GUIZO, MANDAUE CITY	
6. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	ZIP CODE	6014
7. 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 _____	17. TELEPHONE NO.	
8. CITIZENSHIP	FILIPINO	18. PERMANENT ADDRESS	D. B. NERI ST., STO. NIÑO GUIZO, MANDAUE CITY
9. HEIGHT (m)	5'3	ZIP CODE	6014
10. WEIGHT (kg)	52kg	19. TELEPHONE NO.	
11. BLOOD TYPE	O+	20. E-MAIL ADDRESS (if any)	amalia.gentica@gmail.com
12. GSIS ID NO.		21. CELLPHONE NO. (if any)	09124848998
13. PAG-IBIG ID NO.	121042277461	22. AGENCY EMPLOYEE NO.	
14. PHILHEALTH NO.	020508772239	23. TIN	318507501
15. SSS NO.	0632601479		

## II. FAMILY BACKGROUND

24. SPOUSE'S SURNAME	25. NAME OF CHILD (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	CRIZIA RAIN LABRADA	12/25/2011
MIDDLE NAME	DAVID NIÑO LABRADA	08/10/2013
OCCUPATION		/ /
EMPLOYER/BUS. NAME		/ /
BUSINESS ADDRESS		/ /
TELEPHONE NO.		/ /
(Continue on separate sheet if necessary)		
26. FATHER'S SURNAME	GENTICA	/ /
FIRST NAME	ERWIN	/ /
MIDDLE NAME	GERVAÑA	/ /
27. MOTHER'S MAIDEN NAME		/ /
SURNAME	BATAWA	/ /
FIRST NAME	MARIVIC	/ /
MIDDLE NAME	LAGRITA	
(Continue on separate sheet if necessary)		

<p>37 a. Have you ever been formally charged?</p> <p>b. Have you ever been guilty of any administrative offense?</p>	<p>DYES <input type="checkbox"/> NO</p> <p>If YES, give details:</p> <p>_____</p> <p>_____</p> <p>DYES <input type="checkbox"/> NO</p> <p>If YES, give details:</p>
<p>38. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?</p>	<p>DYES <input type="checkbox"/> NO</p> <p>If YES, give details:</p>
<p>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?</p>	<p>DYES <input type="checkbox"/> NO</p> <p>If YES, give details:</p>
<p>40. Have you ever been a candidate in a national or local election (except Barangay election)?</p>	<p>DYES <input type="checkbox"/> NO</p> <p>If YES, give details:</p>
<p>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:</p> <p>a. Are you a member of any indigenous group?</p> <p>b. Are you differently abled?</p> <p>c. Are you a solo parent?</p>	<p>_____</p> <p>_____</p> <p>DYES <input type="checkbox"/> NO</p> <p>If YES, please specify:</p> <p>DYES <input type="checkbox"/> NO</p> <p>If YES, please specify: _____</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If YES, please specify:</p>

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

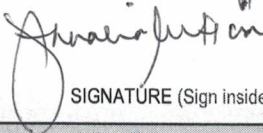
NAME	ADDRESS	TEL. NO.
Emmanuel South	Tolomben, Cebu City	097729212729
Richard Duron	Lapu Lapu City	09424972278
Kenneth Rivera	Cebu City	0917655576

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.

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

<p>COMMUNITY TAX CERTIFICATE NO.</p>	 SIGNATURE (Sign inside the box)	<div style="border: 1px solid black; width: 100%; height: 100%;"></div> <p>RIGHT THUMBMARK</p>
<p>ISSUED AT</p> <p>/ /</p> <p>ISSUED ON (mm/dd/yyyy)</p>	<p>DATE ACCOMPLISHED <i>May 10, 2017</i></p>	