



# PERSONAL DATA SHEET

**WARNING:** Any misrepresentation made in the Personal Data Sheet and the Work Experience Sheet shall cause the filing of administrative/criminal cases against the person concerned.  
 Print legibly. Tick appropriate boxes and use  spare sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE.

## I. PERSONAL INFORMATION

2. SURNAME	DELRASO		
FIRST NAME	MICHELLE LYNN		
MIDDLE NAME	TABIGNE		
3. DATE OF BIRTH (mm/dd/yyyy)	02/14/1996	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:
4. PLACE OF BIRTH	CEBU CITY	If holder of dual citizenship, please indicate the details:	
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		
6. CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:		
7. HEIGHT (m)		17. RESIDENTIAL ADDRESS	
8. WEIGHT (kg)	38 KG	House/Block/Lot No. <u>MARQUE ST</u> Street Subdivision/Village <u>TABACK</u> Barangay City/Municipality <u>MANDAUE</u> Province <u>CEBU</u>	
9. BLOOD TYPE	O	ZIP CODE	
10. OSH ID NO.		18. PERMANENT ADDRESS	
11. PAG-IBIG ID NO.	121141556840	House/Block/Lot No. <u>MARQUE ST</u> Street Subdivision/Village <u>TABACK</u> Barangay City/Municipality <u>MANDAUE</u> Province <u>CEBU</u>	
12. PHILHEALTH NO.	120254264585	ZIP CODE	
13. SSN NO.	00-3660654-8	19. TELEPHONE NO.	
14. TIN NO.	466727919000	20. MOBILE NO.	
		21. E-MAIL ADDRESS (if any)	

## II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME			
MIDDLE NAME			
OCCUPATION			
EMPLOYER/BUSINESS NAME			
BUSINESS ADDRESS			
TELEPHONE NO.			
24. FATHER'S SURNAME	DELRASO		
FIRST NAME	MODESTO		
MIDDLE NAME	LARA		
25. MOTHER'S MAIDEN NAME	TABIGNE		
SURNAME	DELRASO		
FIRST NAME	FELICITAS		
MIDDLE NAME	TABIGNE		

## III. EDUCATIONAL BACKGROUND

26. LEVEL	NAME OF SCHOOL (Write in full)	BASIS EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE		HIGHEST LEVEL/UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	TABACK ELEMENTARY SCHOOL	GRADUATED	2002	2009		2009	
SECONDARY	MANDAUE CITY COMPREHENSIVE NATIONAL HIGH SCHOOL		2009	2012		2012	
VOCATIONAL/TRADE COURSE							
COLLEGE	ST PAUL COLLEGE FOUNDATION INC.	ASSOCIATE IN COMPUTER TECHNOLOGY	2013	2015		2015	
GRADUATE STUDIES							

SIGNATURE	MICHELLE LYNN DELRASO	DATE	347 12, 2017
-----------	-----------------------	------	--------------