

	ENTERPRISE CORE SERVICES FORMS	Date Effective March 01,2013
DEPARTMENT:HRD	TITLE	FM_HRD_AHI_005.0
SECTION:RECRUITMENT	Employee Data Sheet	

2650 A. Bonifacio St., Bangkal, Makati City
Employee Data Sheet (EDS)

DESIRED POSITION: ACCOUNTING ASSISTANT DESIRED SALARY: 20,000 - 21,000
CONTACT NUMBER/S: DATE: 2017-11-08

Surname: Dela Cruz		Given Name: Juan		Middle Name Aquino		Nick Name	
City / Present Address: a a				Provincial Address: Laguna Philippines			
Birth Date: June 12, 1984		Birth Place		Age 33		Sex Male	
						Height	
						Weight	
Civil (X) () () () Status: Single Married Widow/er Separated				Citizenship		Religion	
SSS Number:		TIN:		Pag-ibig Number:		Philhealth:	

IF MARRIED

Name of Spouse:		Age:		Occupation:	
Name of Children:		Age:		Name of Children:	
				Age:	
Father's Name: Ramon Bautista		Age: 43		Occupation:	
Mother's Name:		Age:		Occupation:	
Brother's / Sister's:		Age:		Occupation:	
Brother's / Sister's:		Age:		Occupation:	

EDUCATIONAL ATTAINMENT

EDUCATION	INSTITUTION	INCLUSIDVE DATE		COURSE DEGREE FINISHED	HONORS / AWARDS
		FROM	TO		
Graduate Studies	fggsdfd	1990	1994	Graduated	first honor

WORK EXPERIENCE

COMPANY	POSITION	INCLUSIDVE DATE		NO OF YEARS / MONTHS	SALARY	REASON FOR LEAVING
		FROM:	TO:			

TRAINING/SEMINARS ATTENDED

COURSE/PROGRAM TITLE	CONDUCTED/SPONSORED BY	DATE
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EXTRA CURRICULAR ACTIVITIES

Name of Organization	Position	Date
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FRIENDS OF RELATIVE CONNECTED TO ARMADILLO HOLDINGS, INC.

Name	Relation	Position	Branch/Dept.
GARCES, JOCELYN			

CHARACTER REFERENCES (Not related to you or former employer)

Name	Organization	Position	Contact Number
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LANGUAGE/DIALECT SPOKEN:			
HOBBIES/INTEREST:			
MACHINE OPERATED:	sadsD		
SPECIAL TALENT/SKILLS:	Magsasaka		
DO YOU HAVE A DRIVER'S LICENSE? (<input checked="" type="checkbox"/>)Yes (<input type="checkbox"/>)No Type of License: (<input checked="" type="checkbox"/>)Non-Pro (<input type="checkbox"/>)Professional (<input type="checkbox"/>)Student			
DO YOU HAVE ANY PROFESSIONAL REGULATION COMISSION (PRC) LICENSE? (<input checked="" type="checkbox"/>)Yes (<input type="checkbox"/>)No			
Type of license:	DasDS	License #	4823870324
Date of Expiration:	June 11, 2019		
HAVE YOU BEEN ILL FOR THE PAST 6 MONTHS? (<input checked="" type="checkbox"/>)Yes (<input type="checkbox"/>)No			
If yes, type of illnes?			
HAVE YOU EVER BEEN TRIED IN COURT? (<input type="checkbox"/>)Yes (<input checked="" type="checkbox"/>)No (<input type="checkbox"/>)Aquitted (<input type="checkbox"/>)Found Guilty			
HOW DID YOU LEARN ABOUT THIS JOB OPENING? Job Applications			
WHEN CAN YOU START?	ASAP		
If referral, who referred you to this company?			

I understand that any misrepresentation or any omission of facts or whatever nature required by this application shall be considered sufficient cause of dismissal at any time during employment with ARMADILLO HOLDINGS, INC.

If employed, I promise to undertake and abide all rules and regulations standards, prescribed by this Company. I undertand and agree that any deviation, violation from any company rules, policies, procedures and code of discipline, established practises is a sufficient ground for termination of my service from the company.

Signature of Applicant