×			i	ENTERPRISE CORE SERVICES FORMS					Date Effective March 01,2013				
DEPARTMENT:HRD				TITLE	TITLE				FM_	FM_HRD_AHI_005.0			
SECTION:RECRUITMENT			Employee	Employee Data Sheet									
	2			cio St., Bang ee Data She		_	y						
DESIRED POSITION: ACCOUNTING ASSISTANT							5,000 - 50,000						
CONTACT NUMBER	k/S:			DATE	:		2017	-11-23			_		
Surname: Giver Dela Cruz Juan			n Name: Middle fsdfsf			liddle Name			Nick Name				
City / Present Addr	ess:		ļ-		Provincial Address:								
1365 dm compoun Caloocan	t hearoe	es del 96 d	caloo	can city		malacan	ang Phi	lippine	S				
Birth Date:	Birth P	lace				9	Sex		Height			Weight	
November 30, -0001	mindo							Male		5'6	5		170lbs
Civil (X)		() ()				Citizenship				Religion			
Status: Single	Ma	arried	Wic	low/er	Separ			ilipino				catholi	С
SSS Number: TIN: 234234				1 -	g-ibig Number: 4234234			- 1	Philhealth: 234234423				
IF MARRIED													
Name of Spouse:						Age:		(Occup	ation	:		
Name of Children:				Age:		Name of	Childre	n:				Ag	e:
Father's Name: Tirso Garcia Sr.	"		Occupation: veterinary		Mother's Name:		Ag	Age:		Occupation:			
Brother's / Sister's:		Age: Occupation:			Brother's / Sister's:			ΙΔο	Age: Occupati			ınation:	
	ļ	_		Оссирилоги		Di ociici s	9,0,000		7 19			1000	<u>арастотт</u>
EDUCATIONAL AT	TAINM	ENT											
EDUCATION		INSTITUTION										ONORS / WARDS	
	MA				2011	2016	Graduated			1st ho	nor		
Tertiary A													
Tertiary A	-		COMPANY POSITION				DVE DATE NO O YEARS MONTI		OF			1	
WORK EXPERIEN			POSI	TION		FROM:	TO:	YEA	RS /	SAL	ARY		ASON FOR EAVING

COURSE/PROGRAM TITLE	CONDUCTED/SPONSORED BY	DATE
training	ITIMOO	January 2011 to January 2013

EXTRA CURRICULAR ACTIVITIES

Name of Organization	Position	Date
affiliation	Idoctor	January 2011 to January 2015

Name	Relation	Position	Branch/Dept.	
ELISCUPIDES, ROWENA	asdf	manager	asd	
CHARACTER REFERENCE	S (Not related to you or f	ormer employer)		
Name	Organization	Position	Contact Number	
Clemente Montuerto	organization	Manager	3659302	
ANGUAGE/DIALECT SPOKE				
HOBBIES/INTEREST:	hobbies			
MACHINE OPERATED:	machine			
SPECIAL TALENT/SKILLS:	magtanim,mangisd			
OO YOU HAVE A DRIVER'S LI	CENSE? ()Yes (X)No Type	of License: ()Non-Pro ()Profe	ssional ()Student	
OO YOU HAVE ANY PROFESS	SIONAL REGULATION COMISS	SION (PRC) LICENSE? (X)Yes	()No	
Type of license:	License #	Date	of Expiration:	
HAVE YOU BEEN ILL FOR TH	E PAST 6 MONTHS? (X)Yes	()No		
f yes, type of illnes?				
IAVE YOU EVER BEEN TRIED	O IN COURT? ()Yes ()No ()A	quitted ()Found Guilty		
HOW DID YOU LEARN ABOU	T THIS JOB OPENING? JobsDE	3 - Advertising		
WHEN CAN YOU START?				
f referral, who referred you	to this company?			
be considered sufficient cau If employed, I promise to undertand and agree tha	use of dismissal at any time undertake and abide all rul t any deviation, violation f	during employment with ARM es and regulations standard	s, prescribed by this Company. I olicies, procedures and code of	
			Signature of Applica	