



HUMAN RESOURCE DEVELOPMENT OFFICE
Central Philippine University

EMPLOYEE DATA CONTROL FORM

• **New Employee**

Name: _____
(Surname) (First Name) (Middle Name)

Gender: _____ Marital Status: _____ Title: _____

Category: _____ Employee Status: _____ Rank: _____

Office/Unit: _____ Position: _____

Birth date: _____ Birthplace: _____

Home Address: _____

E-mail: _____ Tel/Cell #: _____

TIN: _____ SSS: _____ PhilHealth: _____ Pag-IBIG: _____

Date Hired: _____ Separation Date: _____ Reason: _____

Degrees (1) _____ Honors: _____ School / Year: _____

(2) _____

(3) _____

(4) _____

License(s): _____; _____; _____

• **Existing Employee:** _____

○ Add/Edit/Change Data:

From _____ To _____

• Surname _____

• Middle Name _____

• Marital Status _____

• Employment Status _____

• Category: _____

• Position _____

• Office/Unit _____

• Rank _____

• Degrees: _____ School: _____ Honors _____

Authorized by: _____

Encoded: _____

Date: _____

Date: _____