Father's Full Name:

## **APPLICATION FORM**

(GRADE VII - GRADE X)

SCHOOL YEAR		T	STUDENT NUMBER:			
GRADE LEVEL ENTRY			LEARNER'S REFERENCE NUMBER:			
☐ TRANSFEREE ☐ RETURNEE			ESC GRANTEE NU	JMBER: (If applicable)		
IMPORTANT:  1. Please print legibly all the needed information. DO NOT ABBR If the information needed is not applicable, write "N/A".  2. STUDENT'S AND PARENT'S NAME MUST BE BASED ON CHILE  3. This form and all submitted documents in compliance with the of Naga Parochial School, and are not to be returned to the all the complete of			BIRTH CERTIFICATE.  Admission Requirement shall become the property blicant.		1.5 X 1.5 COLORED PHOTO	
APPLICANT PERSONAL INFORMATION (Details as indicated in the Birth Certificate)						
NAME OF STUDENT:						
LAST NAME	FIRST NAME	M	IIDDLE NAME	MIDDLE INITIAL USED	Ελ	(TENSION NAME
COMPLETE PERMANENT HOME ADDRESS						
LOT NO, BLOCK NO, PHASE NO. HOUSE NO. STREET SUBDIVISION BARANGAY MUNICIPALITY/CITY PROVINCE						
DATE OF BIRTH:					CITIZENSHIP:	
DATE OF BAPTISM:		PLACE OF BAPTISM:			GENDER:	
	HOLY COMMUNION	YES NO			☐ MALE	FEMALE
DATE OF CONFIRMATION: PLACE FOR CONFIRMATION:						
RELIGION PRACTICED: Roman Catholic (if not, please specify)						
ACADEMIC BACKGROUND						
NAME OF LAST SCHOOL ATTENDED:					GRADE LEVEL:	
SCHOOL ADDRESS:					SCHOOL YEA	R:
SCHOOL CLASSIFICATION: PUBLIC PRIVATE-SECTARIAN PRIVATE-NON SECTARIAN						
REASON FOR TRANSFERRING/ENROLLING YOUR CHILD IN NPS:						
SCHOOL HISTOR	RY					
SCHOOL YEAR	NAME OF SCHOOL /S	ATTENDED	ADDRESS	OF SCHOOL	GRADE LEVEL	SCHOOL ID
					Grade 1	
					Grade 2	
					Grade 3	
					Grade 4	
					Grade 5	
					Grade 6	
					Grade 7	
-					Grade 8 Grade 9	
					Grade 10	
SIBLINGS STUDY	VING IN NAGA PAROCHI				Grade 10	
SIBLINGS STUDYING IN NAGA PAROCHIAL SCHOOL  NAME GRADE LEVEL NAME GRADE LEVEL  GRADE LEVEL						
1			4			
2			5			
3			6			
(Please proceed to the next page)						
>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>						
	Cl	<b>HECKLIST OF SU</b>	<b>BMITTED REQU</b>	IREMENTS		
Original Rep			Photocopy of PS	SA or LCR Birth Certifi	icate	
Photocopy of Report Card Photocopy of Baptismal Certificate						
Good Moral Certificate  Photocopy of Confirmation Certificate						
Recommendation Form Photocopy of Passport (for Dual Citizenship)						
Health Certificate  Special Study Permit (SSP)  Alian Cartificate of Registration (ACR)						
School Form 10  Alien Certificate of Registration (ACR)						
■ ESC Certificate (for Grades VIII-IX) (Certificate of Recognition as Filipino/Certificate of Re-Acquisition of 1 Recent 1.5 x 1.5 ID Picture (Citizenship/Naturalization Certificate)						
1 Recent 1.5 x 1.5 ID Picture Citizenship/Naturalization Certificate) Certificate of Grade VI Honors (Top 1 & 2) Others						
REMARKS:						
Processed/Evaluated by: Date:						
NOTE: PLEASE BRING THE ORIGINAL COPY OF THE BIRTH & BAPTISMAL CERTIFICATES FOR VERIFICATION PURPOSES.						
FAMILY BACKGROUND						

Mother's Complete Maiden Name:

## **NAME OF STUDENT:** ☐ Living ☐ Deceased ☐ Living ☐ Deceased Mobile Number: Mobile Number: Telephone Number: Telephone Number: Educational Attainment: Educational Attainment: Occupation: Occupation: Company/Business Name: Company/Business Name: Company/Business Address: Company/Business Address: Office Telephone Number: Office Telephone Number: FATHER NPS Alumnus? ☐ Yes ☐ No Grade VI Batch Year: \_\_\_ Grade X Batch Year: \_\_ ☐ Living Together ☐ Separated Widowed Remarried Single Parent Parents are Married \_\_Catholic Church \_\_Civil ☐ Father/Mother Working Abroad ☐ Others \_\_\_ Others Living Arrangement With Parents With Mother With Father Grandparents With Relatives ☐ In Boarding House / Dormitory/ Apartment Others \_\_\_\_\_ LEGAL GUARDIAN: (if applicable) Name:\_ \_\_\_Relationship to the Child: Niece/Nephew ☐ Grandchild Address: ☐ Brother/Sister Contact Number: \_\_\_\_\_ Others How did you know about Naga Parochial School? ☐ Newspaper ☐ Flyers/ Brochures ☐ Streamers ☐ Posters □ NPS Website □ NPS FB Page ☐ Orientation/Visits/Open House Referred to me by: Others \_\_\_\_ ☐ Friends ☐ Relatives Parents Siblings ■ Neighbor ☐ NPS Teachers & Staff (please indicate the name) \_\_\_

I hereby attest to the completeness and accuracy of all information supplied in this form. I understand that withholding of information or giving false information may nullify my son's/daughter's application for admission or may jeopardize his/her continued stay after admission has been granted.

I willingly give my consent to use, process, disclose, transfer or share the information gathered and documents submitted to Naga Parochial School during the enrolment to serve the educational purposes of the school, and to enable it to comply with its legal and reportorial obligations under the law and regulations, as well as improve its educational services to the community.

Parent/s or Authorized Guardian's Signature over printed name

Date