

APPLICATION FORM (NURSERY I - GRADE II & SPED)

SCHOOL YEAR		STUDENT						
GRADE LEVEL ENTRY	/EL ENTRY LEARNER'S REFERENCE NUMBER:							
□NEW □TRANSFEREE □RETURNEE								
IMPORTANT: 1. Please print legibly all the needed information. DO NOT ABBREVIATE AND DO NOT LEAVE ANY BLANK. If the information needed is not applicable, write "N/A". 2. STUDENT'S AND PARENT'S NAME MUST BE BASED ON CHILD BIRTH CERTIFICATE.					1.5 X COLORED			
APPLICANT PERSONAL INFORMATION (Details as indicated in the Birth Certificate)								
NAME OF PUPIL				•				
LAST NAME FIRST NAME	Λ	AIDDLE NAME	MIDDLE I	NITIAL USED	E)	CTENSION NAME		
COMPLETE PERMANENT HOME ADDRESS								
LOT NO, BLOCK NO, PHASE NO. HOUSE NO. STREET	SUBDI	IVISION	BARANGAY	MUI	NICIPALITY/CITY	PROVINCE		
DATE OF BIRTH: PLACE	OF BIRTI	H:			CITIZENSHIP			
DATE OF BAPTISM: PLACE	OF BAPT	ΓISM:			GENDER:			
DELICION DRACTICED BY A CALL II (15	l				☐ MALE	FEMALE		
RELIGION PRACTICED: Roman Catholic (if not ACADEMIC BACKGROUND	t, please s	specity)						
					CDADELEVE	1.		
NAME OF LAST SCHOOL ATTENDED:					GRADE LEVEL:			
SCHOOL ADDRESS: SCHOOL CLASSIFICATION: PUBLIC PRIVE	ATE CECT	ADIAN	DDIV/ATE NON SEC	TADIAN	SCHOOL YEA	R:		
REASON FOR TRANSFERRING/ENROLLING YOU			PRIVATE-NON SEC	IARIAN				
REASON FOR THANSI EMMIND, EMMOLETING TOO	in Child i	iiv ivi 5.						
SCHOOL HISTORY								
SCHOOL YEAR NAME OF SCHOOL /S ATTE	NDED		ADDRESS OF SCHO	OL	GRADE LEVEL	SCHOOL ID		
SIBLINGS STUDYING IN NAGA PAROCHIAL SCH	OOL							
NAME GRAI	DE LEVEL	NAME			G	RADE LEVEL		
1		4						
2		5						
3		6	(Dlease pro	sood to the	e next page)			
>>>>>>>>	OO NOT W	VRITE BELO	•			>>>>		
	J . v	2 2220						
CHECKLI	ST OF SU	JBMITTED	REQUIREMENTS					
Original Report Card/ECCD Checklist Photocopy of Report Card/ECCD Checklist Nursery Completion Certificate Good Moral Certificate Recommendation Form Health Certificate Form 137 / Student Permanent Record Certification for Kindergarten Honors (Top	1 & 2)	 □ Photocopy of PSA or LCR Birth Certificate □ Photocopy of Baptismal Certificate □ 1 Recent 1.5 x 1.5 ID Picture □ Photocopy of Passport for Dual Citizenship □ Special Study Permit (SSP) □ Alien Certificate of Registration (ACR) (Certificate of Recognition as Filipino/Certificate of Re-Acquisition of Citizenship/Naturalization Certificate) 						
REMARKS:		Others _						
Processed/Evaluated by:	Dat	te:						

NOTE: PLEASE BRING THE ORIGINAL COPY OF THE BIRTH & BAPTISMAL CERTIFICATES FOR VERIFICATION PURPOSES.

NAME OF PUPIL:

IVAIVIE OF POPIL.							
PUT A CHECK (/) MARK IN THE BOX THAT ACCURATELY DE	SCRIBES YOUR CH	ILD					
	ALWAYS	SOMETIMES	NEVER				
Has focus in doing an activity							
Plays harmoniously with other children							
Can easily follow directions							
Has temper tantrums							
Calm, does not move a lot							
Separates easily from parents							
Long attention span							
Can do things independently							
Please answer the following:		-	<u> </u>				
1. What usually motivates your child?							
2. What usually upsets your child? What is the best w	ay to calm him/he	r down?					
3. How much time does your child spend interacting v	vith technology? W	Vhat is your gadget u	sage agreement?				
4. Is your child fit to attend a traditional school setting	g? ☐ Yes ☐ No	 o Why?					
FAMILY BACKGROUND							
Father's Full Name:	Mother's Com	Mother's Complete Maiden Name:					
☐ Living ☐ Deceased		☐ Living ☐ Deceased					
Mobile Number:	Mobile Numb	Mobile Number:					
Telephone Number:	Telephone Nu	ımber:					
Educational Attainment:	Educational A						
Occupation:	Occupation:						
	•	•					
Company/Business Name:		Company/Business Name:					
Company/Business Address:		Company/Business Address:					
Office Telephone Number:	Office Telepho	Office Telephone Number:					
NPS Alumnus? Yes No							
Grade VI Batch Year:							
Grade X Batch Year:							
Parents are Married Living Together	Senarated 🔲	Widowed Rem	narried Single Parent				
Catholic Church	jocparateu	widoweditteli	Jangle Farent				
<u></u>	Father/N/lether \\/	orking Abroad C)th are				
	rather/Mother w	orking Abroad C	others				
Others							
Living Arrangement With Parents With Moth	er With Fathe	er Grandparents	With Relatives				
	<u></u>	<u> </u>	_				
☐ In Boarding House / Dormitory	/ Apartment	Others					
	, , , p a						
LEGAL GUAPDIAN: (if applicable)							
LEGAL GUARDIAN <u>: (if applicable)</u>	Dalatia ali	and the child I No	San Albanda				
Name:		p to the Child:	ece/Nepnew				
Address:			randchild				
Contact Number:		<u>□</u> Br	other/Sister				
		□ o	thers				
How did you know about Naga Parochial School?							
■ Newspaper ■ Flyers/ Brochures ■ Streamer	s	MPS Website	☐ NPS FB Page				
Orientation/Visits/Open House			■ 14131 D Tage				
Referred to me by:							
☐ Friends ☐ Neighbor ☐ Relatives	Parents	☐ Siblings	Others				
NPS Teachers & Staff (please indicate the name)							
"							
I hereby attest to the completeness and accuracy of all informa	tion supplied in this	form. Lunderstand tha	t withholding of information				
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 concent to use process disclose transfer	or chara the informa-	ation authored and d-	cuments submitted to Nace				
I willingly give my consent to use, process, disclose, transfer of							
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.							
reportorial obligations under the law and regulations, as well a	s improve its educati	ional services to the co	mmunity.				
Parent/s or Authorized Guardian's Signature over pri	inted name	Date					