

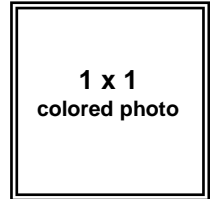


Stella *Maris* College

891 Cambridge St. Cubao, Quezon City

ELEMENTARY

APPLICATION FORM



APPLICANT NO. <input type="text"/>	LRN <input type="text"/>	Applying for: <input type="checkbox"/> KINDER <input type="checkbox"/> GRADE _____	Date of Examination:
Name (<i>Name in Birth Certificate</i>)		Nickname	
Last Name First Name Middle Name (<i>M.I. used</i>)		Age	Gender
Complete Home Address		Birth Date	
		Birth Place	
Telephone No.	Mobile No.	Religion	Nationality

	FATHER	MOTHER
Name		
Residence		
Tel./Mobile No.		
E-mail Address		
Educational Attainment		
Occupation/Position		
Business/Office Address		
Tel. No.		
Religion		
MARITAL STATUS:	<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Annulled <input type="checkbox"/> Widowed <input type="checkbox"/> Single Parent <input type="checkbox"/> LGBT Parent	

Name of Guardian (<i>other than parents</i>) :	Relationship with student :
Address :	Tel./Mobile No. :

SIBLING(S) INFORMATION

Name of Brother(s) and Sister(s)	Age	Present School	Grade/Year

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ACADEMIC BACKGROUND

LEVEL	SCHOOL YEAR	NAME AND ADDRESS OF SCHOOL	HONORS/RECOGNITION RECEIVED (IF ANY)
Nursery			
Kinder			
Preparatory			
Grade 1			
Grade 2			
Grade 3			
Grade 4			
Grade 5			

HEALTH:

Does your child have special needs or physical disabilities? If yes, what (specify)? _____

Does your child have health problems which could affect his/her present studies? If yes, what (specify)? _____

How would you rate his/her eyesight? GOOD FAIR POOR

How would you rate his/her hearing? GOOD FAIR POOR

How would you rate his/her general health? GOOD FAIR POOR

Name of his/her Pediatrician: _____ Hospital or Clinic Affiliation: _____

INTERESTS:

What are his/her hobbies? _____

What are his/her special talents? _____

What subject does he/she like best? _____

What subject does he/she like least? _____

What type of school activity does he/she like best? _____

What type of school activity does he/she like the least? _____

How does he/she spend his/her week-end? _____

What are his/her activities during week-end? _____

<p>DO NOT WRITE ON THIS SPACE</p> <p>DOCUMENTS/REQUIREMENTS SUBMITTED:</p> <p><input type="checkbox"/> Report Card (Form 138) (<i>photocopy</i>)</p> <p><input type="checkbox"/> 1x1 ID Photo</p> <p>Received by: _____</p> <p><input type="checkbox"/> PSA/NSO Birth Certificate (<i>photocopy</i>)</p> <p><input type="checkbox"/> Baptismal Certificate (<i>photocopy</i>)</p> <p><input type="checkbox"/> Good Moral Certificate</p> <p>Received by: _____</p>
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This form was filled up by: _____ **Relationship with applicant:** _____

C E R T I F I C A T I O N

I certify that my answers are true and correct to the best of my knowledge.

I certify further that the requirements I have submitted for admission are true, correct and authentic. I am fully aware that my submission of falsified, tampered or spurious documents shall be grounds for the immediate nullification of my application/admission/enrolment to Stella Maris College, Basic Education Department of Quezon City.

I am aware that the information supplied in this form will be retained by STELLA MARIS COLLEGE on a database and will be processed in compliance with the Data Protection Act of 2012.

I consent that the information herein may be used for reports both internally and to the Department of Education.

Pupils' Signature over Printed Name

Parent/Guardian Signature over Printed Name

Date of Application