

OFFICE OF THE UNIVERSITY REGISTRAR..
STUDENT DIRECTORY

1X1 PHOTO

PLEASE WRITE IN BLOCK LETTERS. USE A V MARK IN ANSWERING INFORMATION PRECEDED BY A BOX.

STUDENT NUMBER	NAME: LAST, GIVEN, MIDDLE. IF MARRIED, WRITE THE MAIDEN NAME	COLLEGE	DEGREE	MAJOR
SEX: ☐ MALE ☐ GAY ☐ FEMALE ☐ LESBIAN ☐ TRANSGENDER	CIVIL STATUS: ☐ SINGLE ☐ ANNULLED ☐ SOLO PARENT ☐ SEPARATED ☐ No. of Children ☐ MARRIED ☐ WIDOW/WIDOWER	AGE: _____ NATIONALITY: _____		RELIGION: _____ DATE OF BIRTH: _____ PHYSICAL CONDITION: ☐ PWD ☐ PREGNANT WOMAN PLACE OF BIRTH: _____
LANGUAGE SPOKEN: ☐ TAGALOG ☐ ENGLISH ☐ OTHERS PLS. SPECIFY: _____	CULTURAL GROUP: ☐ INDIGENOUS PEOPLE PLS. SPECIFY: _____	LIVELIHOOD/EMPLOYMENT: (IF WORKING STUDENT)		PRESENT ADDRESS: _____ MOBILE NO. _____ PERMANENT HOME ADDRESS: _____ MOBILE NO. _____
SCHOOLS ATTENDED STARTING FROM HIGH SCHOOL: _____ _____ _____		DIPLOMA/TITLE/DEGREE: _____ _____ _____		DATE OF GRADUATION: _____ _____ _____
ENROLMENT IN PALAWAN STATE UNIVERSITY: First Enrolment: PSU _____ Last Enrolment: PSU _____ Degree Obtained, if any: _____				
Do you have a disability? Yes No If yes, pls. specify: _____ (Pursuant to RA 7277 & RA 9442)				
PARENTS/GUARDIAN/SPOUSE Living / Deceased Address Tel. No. Occupation				
1. Father's Name: _____ ☐ ☐ 1. _____ 1. _____ 2. Mother's Name: _____ ☐ ☐ 2. _____ 2. _____ 3. Guardian's/Spouse's Name: _____ ☐ ☐ 3. _____ 3. _____				
PERSON TO BE NOTIFIED IN CASE OF EMERGENCY:		ADDRESS: _____ MOBILE NO. _____		
DATE: _____ SIGNATURE OF STUDENT: _____				
PLEASE INFORM THE OFFICE OF THE UNIVERSITY REGISTRAR ABOUT ANY CHANGE IN THE ABOVE DATA.				

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