Republic of the Philippines

Department of Education

NATIONAL CAPITAL REGION

ENCLOSURE 4: APPLICATION FORM FOR INCOMING GRADE 11

PUT PICTURE HERE

Instructions:

Accomplish this application form and submit to the Registrar's Office together with the following documents:

For Student:

1. Certified true photocopy of the Report Card (SF 9) for Grade 10, reflecting the grades for the first two quarters.
2. One (1) copy of 2" x 2" picture with white background with name tag in this order: Family Name, First Name, M.I.
3. PSA Birth Certificate (Photocopy)

SCHOOL APPLIED FOR:

Learner's Reference Number (LRN):			
FULL NAME OF THE STUDENT: LAST NAME FIRST NAME MIDDLE NAME			
BIRTHDATE	**AGE**	**SEX**	**RELIGION**
HOME ADDRESS			
MOBILE NO.	**PHONE NO.**	**EMAIL ADDRESS**	
CURRENT SCHOOL		**SCHOOL TYPE**	
SCHOOL ADDRESS		**PHONE NO.**	
FATHER'S NAME			
HIGHEST EDUCATIONAL ATTAINMENT			
MOBILE NO.	**PHONE NO.**	**EMAIL ADDRESS**	
OCCUPATION		**COMPANY/ BUSINESS NAME**	
MOTHER'S NAME			
HIGHEST EDUCATIONAL ATTAINMENT			
MOBILE NO.	**PHONE NO.**	**EMAIL ADDRESS**	
OCCUPATION		**COMPANY/ BUSINESS NAME**	
GUARDIAN'S NAME			

TUV NORD ISO 9001
Certificate No. PHP QMS

Republic of the Philippines

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NATIONAL CAPITAL REGION

HIGHEST EDUCATIONAL ATTAINMENT		
MOBILE NO.	**PHONE NO.**	**EMAIL ADDRESS**
OCCUPATION	**COMPANY/ BUSINESS NAME**	
VOTER REGISTRATION RECORD NO.	**BARANGAY**	**PRECINT NO.**

ATTESTATION

I hereby certify that all information provided in this application is true, correct, and complete to the best of my knowledge. I understand that any false statement, misrepresentation, or omission may be grounds for disqualification from the admission process or cancellation of admission, without prejudice to applicable rules and regulations. This application is submitted with the full knowledge and consent of my parent/guardian.

DATA PRIVACY CONSENT

I hereby authorize the Department of Education and its authorized representatives to collect, process, store, and use the personal data provided in this application solely for purposes related to the science high school admissions process, including assessment, evaluation, validation, and enrollment. I further consent to the publication or posting of my name and application status in official school or Regional Office channels as part of the admissions procedures. I understand that all personal information shall be handled in accordance with the Data Privacy Act of 2012 (Republic Act No. 10173) and applicable DepEd policies.

_____ _____

Name and Signature of Student – Applicant Name and Signature of Parent/Guardian

CERTIFICATION BY THE PRINCIPAL

To School Admission Committee Date: _____

This is to certify that _____ is a member of the graduating class of _____ for School Year _____.

In addition, his/her scholastic and guidance records show that he/she:

□ has obtained grades of at least 85% in Grade 10 across all learning areas in the First and Second Grading Periods.

□ is of good moral character and has **no** behavioral case during their stay in the school. *If ever there is, please attach relevant anecdoctal records.*

_____

Name and Signature of School Head/Guidance Counselor

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