**Application Form**

**GS/HS Form**

**Lourdes School Quezon City**

**REGISTRAR’S OFFICE**

**APPLICATION FORM**

**For SY \_\_\_\_\_\_ - \_\_\_\_\_\_**

|  |  |  |
| --- | --- | --- |
| **LEARNER’S REFERENCE NUMBER** | **GRADE/ YEAR LEVEL APPLYING FOR** | **STATUS** (Pls. check applicable one)  NEW ( ) TRANSFEREE ( ) RETURNEE ( ) |

**NAME in Birth Certificate**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| SURNAME | | FIRST NAME | | | MIDDLE NAME | |
| DATE OF BIRTH (month/day/year) | | PLACE OF BIRTH | | | AGE BY JUNE | |
| RELIGION | | NATIONALITY | | | GENDER (pls. check)  Male ( ) Female ( ) | |
| COMPLETE HOME ADDRESS *(Pls. include your barangay)* | | | | | TELEPHONE/CONTACT NO/S. | |
| **FAMILY BACKGROUND** | | | | | | |
| FATHER’S NAME | OCCUPATION | | | COMPANY OR BUSINESS ADDRESS | | TEL./CONTACT NO. |
| MOTHER’S NAME | OCCUPATION | | | COMPANY OR BUSINESS ADDRESS | | TEL./CONTACT NO. |
| GUARDIAN***(IF NOT LIVING WITH PARENTS)*** | RELATIONSHIP | | | COMPLETE HOME ADDRESS | | TEL./CONTACT NO. |
| NAME OF BROTHERS/SISTERS **(FROM ELDEST TO YOUNGEST)**  1.  2.  3.  4.  5. | | | AGE  1.  2.  3.  4.  5. | SCHOOL / PROFESSION / OCCUPATION  1.  2.  3.  4.  5. | | |  |
| NAME OF SCHOOL LAST ATTENDED | | | | | PREVIOUS GRADE OR YEAR LEVEL | |
| COMPLETE SCHOOL ADDRESS | | | | | PRIVATE PUBLIC | |

---------------------------------------------------------------**DO NOT LEAVE THIS PORTION UNANSWERED**---------------------------------------------------------

1. *Is father an alumnus of Lourdes School QC? 3. How did you know about Lourdes School QC?*

( ) NO \_\_ newspaper \_\_flyers \_\_posters

( ) YES ( ) Grade School, Year Graduated \_\_\_\_\_\_\_\_\_\_\_ \_\_website \_\_banners \_\_friends

( ) High School, Year Graduated \_\_\_\_\_\_\_\_\_\_\_ \_\_ neighbour \_\_relatives \_\_referred by:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_others \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. *Why would you like to enrol your child here in Lourdes School Quezon City?*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***I affirm that all information above is true and correct.***

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Over Printed Name Date

--------------------------------------------- **DO NOT WRITE BELOW THIS LINE (For Registrar’s Staff only)** ---------------------------------------------------------

**DOCUMENTS SUBMITTED**

( ) Certified True Copy of the Report Card ( ) 2 Recent Identical 1 x 1 pictures

( ) Photocopy of NSO Birth Certificate ( ) Recommendation Forms (LSQC form)

( ) Photocopy of Baptismal Certificate \_\_GS/HS Principal or Class Adviser

( ) Certificate of Attendance in Kinder/Nursery \_\_GS/HS Guidance Counselor

**REMARKS:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Approved by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_