



APPLICATION FORM FOR SENIOR HIGH SCHOOL
(NEW STUDENTS)
For SY _____ - _____

Learner's Reference Number (LRN) _____	Grade Level Applying For: _____	Status: (Pls. check applicable one) NEW () TRANSFEREE () RETURNEE ()
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NAME in Birth Certificate

SURNAME	FIRST NAME	MIDDLE NAME
DATE OF BIRTH (month/day/year)	PLACE OF BIRTH	E-MAIL ADDRESS
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)	AGE	SCHOOL / PROFESSION / OCCUPATION	
1.	1.	1.	
2.	2.	2.	
3.	3.	3.	
4.	4.	4.	
5.	5.	5.	
NAME OF SCHOOL LAST ATTENDED			PREVIOUS GRADE OR YEAR LEVEL
COMPLETE SCHOOL ADDRESS			PRIVATE <input type="checkbox"/> PUBLIC <input type="checkbox"/>

SHS STRAND APPLYING FOR IN LOURDES SCHOOL QUEZON CITY:

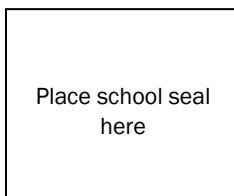
STEM (Science, Technology, Engineering and Mathematics) G.A (General Academics)

GRADE 9 LEVEL ACADEMIC & CONDUCT GRADES

N. B. Only the School Registrar or Principal may fill up and sign this portion. Write the FINAL grades in numeric form.

ENGLISH	<input type="text"/>	Final Academic General Average	<input type="text"/>
MATH	<input type="text"/>	Final Conduct Grade	<input type="text"/>
SCIENCE	<input type="text"/>		

NAME OF SCHOOL:



Principal/Registrar
(Signature Over Printed Name)

INFORMATION SURVEY

1. Is father an alumnus of Lourdes School Quezon City?

- () NO () YES
() Grade School, Year Graduated
() High School, Year Graduated

2. Why would you like to enrol here in Lourdes School Quezon City?

3. How did you know about Lourdes School Quezon City?

(Select a maximum of two only)

- website flyers friends neighbour
newspaper posters relatives others:

4. Have you applied or do you have plans of applying in other school/s? YES NO

If yes, what school/s and what track or strand?

Table with 2 columns: School/s, Track / Strand. Rows a and b.

5. Do you have plans of pursuing a college degree after Senior High School? YES NO

If yes, what program or college degree are you planning to pursue?

If not, what is your alternative plan?

6. If you passed the qualifying examination, will you enrol in LSQC? YES NO

If yes, what percent is the chance of you enrolling in LSQC?

- (50%) because
(75%) because
(100%) because

If you will not enrol, please state the possible reason:

7. Are you an ESC Grantee? YES NO

If yes, write your ESC ID NO.

8. In what aspect do you think LSQC may assist you regarding your studying in the SHS here? Why?

I certify that all information above is true and correct and that I have not withheld any information deterrent to my admission in this school.

Signature Over Printed Name

Date

DO NOT WRITE BELOW THIS LINE (For Registrar's Staff only)

DOCUMENTS SUBMITTED

- Certified True Copy of Completed Grade 9 Report Card
Certified True Copy of Grade 10 Report Card
Photocopy of NSO Birth Certificate
Photocopy of Baptismal Certificate
2 recent 1 x 1 ID pictures
Recommendations using LSQC Form
GS/HS Guidance Counselor
GS/HS Principal or Class Adviser

REMARKS:

Approved by:
Date: