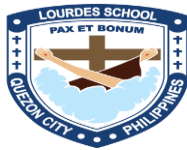


For Registrar's use only	
Application No:	
Testing Date:	



LOURDES SCHOOL QUEZON CITY

PAASCU ACCREDITED LEVEL III

Mission: A Catholic, Marian, Capuchin Franciscan School | Vision: Development of the Whole Person in Christ
 School Thrust: Educating the next generation of Christian Leaders imbued with the spirit of Gospel Brotherhood

Attached recent 1x1 ID picture white background (required)

**APPLICATION FOR ADMISSION
 (Pre – K to Grade 10)
 AY 2024-2025**

LEARNER'S REFERENCE NUMBER (LRN)										STATUS <input type="checkbox"/> NEW <input type="checkbox"/> TRANSFEREE <input type="checkbox"/> RETURNEE transferee applying for Grade 8 to 10 and an ESC grantee are required to submit ESC Certificate from their previous school upon enrollment. No certificate, no ESC grant																		
<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>																				ESC no: <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Grade Level Applying For:																												

NAME in Birth Certificate

SURNAME			FIRST NAME			MIDDLE NAME (full)		
DATE OF BIRTH (month/day/year)			PLACE OF BIRTH			AGE BY AUGUST		
RELIGION			NATIONALITY			GENDER <input type="checkbox"/> Male <input type="checkbox"/> Female		
COMPLETE HOME ADDRESS:						BARANGGAY:		

NAME OF ALL SCHOOLS PREVIOUSLY ATTENDED BY THE APPLICANT

School	Complete School Address	Grade/Year Level	School Year

FAMILY BACKGROUND

FATHER's Name		Nationality		Date of Birth (month/day/year)		<input type="checkbox"/> Living <input type="checkbox"/> Deceased	
OCCUPATION		Company Name		Company Address			
E-Mail Address		Landline.		Mobile Phone No			

EDUCATIONAL BACKGROUND OF THE FATHER

Educational level	School	Year Graduated
Grade School		
High School		
Senior High School		
College		
Post Graduate		

MOTHER's Name

MOTHER's Name		Nationality		Date of Birth (month/day/year)		<input type="checkbox"/> Living <input type="checkbox"/> Deceased	
OCCUPATION		Company Name		Company Address			
E-Mail Address		Landline.		Mobile Phone No			

EDUCATIONAL BACKGROUND OF THE MOTHER

Educational level	School	Year Graduated
Grade School		
High School		
Senior High School		
College		
Post Graduate		

GUARDIAN's Name	Nationality	Date of Birth (month/day/year)	Relationship
OCCUPATION	Company Name	Company Address	
E-Mail Address	Landline.	Mobile Phone No	

NAME OF BROTHERS/SISTERS (FROM ELDEST TO YOUNGEST)	AGE	SCHOOL / PROFESSION / OCCUPATION
1.		
2.		
3.		

Brothers studying in Lourdes School of Quezon City at present:

Name	Grade level	Name	Grade level
1.		3.	
2.		4	

DO NOT LEAVE THIS PORTION UNANSWERED

1. Is father or mother an alumnus/alumna of LSQC? <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Grade School, year graduated _____ <input type="checkbox"/> High School, year graduated _____	2. How did you know about LSQC? <table border="1"> <tr> <td>website</td> <td>relatives</td> <td>open house</td> <td>NSOLL church announcement</td> </tr> <tr> <td>friends</td> <td>facebook</td> <td>neighbor</td> <td>STP church announcement</td> </tr> <tr> <td colspan="3">referred or recommended by:</td> <td>Others:</td> </tr> </table>	website	relatives	open house	NSOLL church announcement	friends	facebook	neighbor	STP church announcement	referred or recommended by:			Others:
website	relatives	open house	NSOLL church announcement										
friends	facebook	neighbor	STP church announcement										
referred or recommended by:			Others:										
3. Why would you like to enroll your child here in Lourdes School Quezon City?													
4. Does your child have any observed special needs such as behavioral, learning, emotional, etc. that the school should address? If yes, kindly provide the latest assessment and recommendation from the therapist, psychologist, developmental pediatrician, etc. <input type="checkbox"/> Yes <input type="checkbox"/> None													

I hereby certify that all the information given is true and correct to the best of my knowledge and I allow Lourdes School Quezon City to use these details for the purpose of evaluating my child's application for admission. Likewise, I consent to sharing this information with authorized personnel of the school with legitimate educational interest.

I understand that the information herein given shall be treated confidentially in compliance with the Data Privacy Act of 2012.

Signature over Printed Name

Date

(FOR REGISTRAR'S STAFF ONLY)

DOCUMENTS PRESENTED AND SUBMITTED

- | | |
|---|--|
| <input type="checkbox"/> Original and Certified True Copy of Report Card
<input type="checkbox"/> Original and Photocopy of PSA Birth Certificate
<input type="checkbox"/> Original and Photocopy of Baptismal Certificate
<input type="checkbox"/> Application Form with attached 1 Recent 1 x 1 ID picture
<input type="checkbox"/> Recommendation Forms (LSQC Form)
<input type="checkbox"/> GS / HS Principal or Class Adviser
<input type="checkbox"/> GS / HS Guidance Counselor
<input type="checkbox"/> ESC Certificate (for ESC grantee - transferee) | <input type="checkbox"/> For Grade 1 applicants only - Kinder Completion
<input type="checkbox"/> For Grade 8-10 applicants only - (ESC) Certificate
<input type="checkbox"/> For Foreign Applicants - Original & Photocopy of the ff:
<input type="checkbox"/> Alien Certificate of Registration (ACR)
<input type="checkbox"/> Personal Data Page of Passport |
|---|--|

APPROVED BY: _____ **DATE:** _____

REMARKS: _____

The applicant may enroll on or before: _____

