

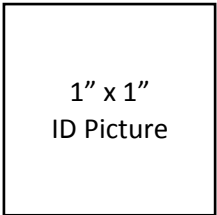
Please Check:

- NKK
- Grade School
- High School



ST. PAUL COLLEGE OF MAKATI

D. M. Rivera St., Poblacion, City of Makati



- Male
- Female

APPLICATION FOR ADMISSION

For School Year 20____ - 20____

Name of Applicant: _____
Surname *Given Name* *Middle Initial*

Mailing Address: _____

Contact Number: _____

Date of Birth: _____ Place of Birth: _____

Citizenship: _____ Religion: _____

Mother's Name: _____ Occupation: _____

Contact Number: _____ E-mail: _____

Father's Name: _____ Occupation: _____

Contact Number: _____ E-mail: _____

Guardian's Name: _____ Occupation: _____

Relationship with Applicant: _____ Contact Number: _____

Address of Guardian: _____

Relative(s) studying in St. Paul College of Makati (Give the name and relationship with applicant):

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Name of School Last Attended: _____

Address of School Last Attended: _____

Principal of School Last Attended: _____

Activities in which you have participated in your previous school: _____

Have you ever stopped schooling because of poor health? Yes No

If yes, please give details: _____

I/We hereby apply for admission to St. Paul College of Makati. If admitted, I/we agree to abide by its regulations. I/We certify that the foregoing information is true and complete to the best of my knowledge and I/we fully realize that falsification of information will be considered sufficient reason for rejection of this application.

Signature of Parent/Guardian over Printed Name

Date

----- DO NOT WRITE ANYTHING BELOW THIS LINE -----

Level Applied For: _____
 Date (mm/dd/yy): _____ Age by June: _____

Basic Requirements:

- Report Card (at least 2nd Quarter)
- NSO Birth Certificate (2 photocopies)
- Baptismal Certificate (2 photocopies)
- Parents' Marriage Certificate / Affidavit of Marital Status
- 1" x 1" ID Picture (2 pieces)
- Certificate of Good Moral Character (original)
- SPCM Recommendation Form
- SPCM Health Certificate

Form/Requirements Received by: _____
 Testing OR: _____ Date: _____
 Reservation OR: _____ Date: _____
 Enrollment OR: _____ Date: _____

Additional Requirements for Foreign Students:

- Passport (photocopy)
- Alien Certificate of Registration ID (ACR) (photocopy)
- Scholastic Record (English translation; authenticated by the Philippine Consular Office)