



UNIVERSITY OF RIZAL SYSTEM

Province of Rizal

Website: http://www.urs.edu.ph



URS APPLICATION FORM FOR SENIOR HIGH SCHOOL

Semester, SY

TO THE STUDENT AND PARENTS:

Carefully read the Instruction before filling out the application form. Print neatly all information required. Only accomplished application forms, will be processed.

TO BE FILLED OUT ONLY BY THE ADMISSION OFFICER AND/OR AUTHORIZED PERSONNEL TO RECEIVE AND/OR PROCESS APPLICATION

APPLICATION NUMBER

Testing Center:

- 1 URS Angono 2 URS Antipolo 3 URS Binangonan 4 URS Cainta 5 URS Cardona 6 URS Morong 7 URS Piilla 8 URS Rodriguez 9 URS Tanay 10 URS Taytay

Documents/ Requirements Submitted:

- 3 Photos (2X2) PEPT TOR Birth Cert Form 137 Good Moral Testing Fee Passport (alien) CEDP Certificate Honorable Dismissal (for transfers)

LEARNER'S REFERENCE NUMBER

1. NAME OF STUDENT -APPLICANT. Print of type your full name in the following sequence. LAST NAME, FIRST NAME, MIDDLE NAME. Place one letter in each box. Leave one box between names.

Grid for student name: Last, First, Middle

Paste a recent 2"X2" photograph (taken within the last three months) in this box

Please print your full name at the back of the photo

2. GENDER Male Female 3. RELIGION DATE OF BIRTH (Month/ Day/ Year) AGE CIVIL STATUS PLACE OF BIRTH (City/ Town, Province) CITIZENSHIP a. Filipino (If born abroad please submit a photocopy of a valid Philippine Passport or a BOI Identification Certificate) b. Natural Born Filipino c. Foreign (Specify) d. Dual (Specify)

7. HIGH SCHOOL (Where you completed/ are completing secondary level education): High School Name Expected Month/ Year of Completion Academic Strand/ Track Applying for: General Average Address (City/ Town, Province)

8. ARE YOU A CHILD OF A URS FACULTY OR EMPLOYEE? Place an X in the appropriate box. No Yes Name of Parent Employed by URS Official Designation College/ Office where employed Telephone No.

9. PERMANENT ADDRESS Number & Street Subd/ Village/ Brgy City/ Town & Province Postal Code Telephone Email Address Facebook Account

10. ARE YOU SELF-SUPPORTING? No Yes If Yes, nature of work (put an X to appropriate work) Food Chain Crew Gasoline Boy/ Girl Vendor Messenger Household Construction Others (please specify)

11. SOCIO ECONOMIC Furnish all the required information on each family listed. Write DECEASED after name of deceased family members. Under the Column "Highest Educational Attainment", indicate the educational level which the household member actually completed. (i.e. Grade II, Third Year High School, High School Graduate, Second Year College, BSE or Ph. D., Ed. D.)

Table with 7 columns: NAME, CITIZENSHIP, MARITAL STATUS, HIGHEST EDUCATIONAL ATTAINMENT, PRESENT OCCUPATION, MONTHLY INCOME (In Phil. Pesos). Rows for Father, Mother, Legal Guardian.

This is to certify that all information given above is true and correct.

Signature over Printed Name of Applicant

THIS FORM IS FREE OF CHARGE AND MAY BE PHOTOCOPIED