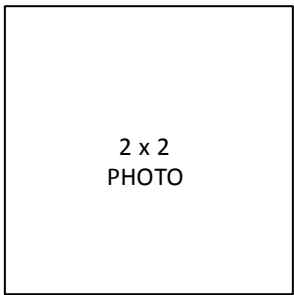




# CENTRO FIDEI SCHOOL

2 x 2  
PHOTO



## APPLICATION FOR PRE-SCHOOL – GRADE 6 ADMISSION

**INSTRUCTIONS:** All sections must be completed. Kindly fill out this form in **PRINT**. Do not leave any item unanswered and write **NA** on the space when an item is not applicable.

The status of application of your child cannot be determined without the **TWO (2)** accomplished **RECOMMENDATION FORMS** from the Principal/Class Adviser and Guidance Counselor and **OTHER REQUIRED DOCUMENTS:** (a) original PSA Birth Certificate, (b) baptismal certificate, (c) photocopy of latest report card, and (d) health record (CFS Student Health Record).

**ENTRY LEVEL**    **PRESCHOOL:**  **NURSERY**  **JUNIOR KINDER**  **SENIOR KINDER**  
**GRADE SCHOOL:** GRADE \_\_\_\_\_

### PERSONAL INFORMATION

**NAME:**                                      *Last Name*                                      *First Name*                                      *Middle Name*

**HOME ADDRESS:**

**E-MAIL ADDRESS:**                                      **MOBILE NUMBER:**                                      **TELEPHONE NUMBER:**

**BIRTHDAY:**                                      **PLACE OF BIRTH:**                                      **RELIGION:**

**CITIZENSHIP:**  
 FILIPINO                                       FOREIGN, specify: \_\_\_\_\_  
 DUAL CITIZEN, (specify, FILIPINO \_\_\_\_\_ )  
**Attach the following if with dual citizenship:** Clear photocopy of Philippine Passport and Certificate of Recognition as a Filipino/Certificate of Re-acquisition of Citizenship / Naturalization Certificate.  
**For Foreign Applicants, submit clear photocopy of the following:** (a) passport (bio-page and stamps of latest departure and arrival in the Philippines), (b) Special Study Permit (SSP) or Student Visa or other latest Visa, (c) Alien Certificate of Registration or ACR I-Card, (d) transcript of records (authenticated by the Philippine Foreign Service Post from the country of origin), (e) report card (with English Translation) and (f) Certificate from Department of Education for an applicant to qualify for applied level.

### FOR FOREIGN, DUAL CITIZENS AND FILIPINOS BORN ABROAD

(1) Passport Number:                                      Date Issued:                                      Date of expiration:                                      Place Issued:  
(2) Passport Number:                                      Date Issued:                                      Date of expiration:                                      Place Issued:  
Immigration Status/Visa Classification:  SSP  Student  Missionary  Pre-arranged  other VISA: \_\_\_\_\_  
VISA/Permit Number:                                      Date Issued:                                      Date of Expiration:                                      Place Issued:

### ACADEMIC INFORMATION

**PRESENT / LAST SCHOOL ATTENDED:**

**SCHOOL ADDRESS:**

**TELEPHONE NUMBER:**                                      **E-MAIL ADDRESS:**

### ACADEMIC BACKGROUND

SCHOOLS ATTENDED (WITH ADDRESS)	GRADE LEVEL	SCHOOL YEAR
<b>PRESCHOOL</b>		
<b>GRADE SCHOOL</b>		

### ACADEMIC HONORS AND DISTINCTIONS

HONOR/AWARD	GRADE LEVEL

### ACADEMIC CONCERNS

**Did your child fail in any subject (s)?**  
 YES  
Grade Level: \_\_\_\_\_ Subject(s): \_\_\_\_\_ Reason for Failure: \_\_\_\_\_  
 NO

**Did your child ever have to repeat a year in Grade School?**  
 YES, Grade Level: \_\_\_\_\_ Reason: \_\_\_\_\_  
 NO

Did your child ever have to stop studying?

YES, School Year: \_\_\_\_\_ Reason: \_\_\_\_\_

NO

Any health-related condition that had or could affect academic performance and relationship in school? Kindly specify:

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

### FAMILY DATA

	FATHER	MOTHER
FULL NAME		(Mother's maiden name):
ADDRESS		
BIRTHDAY		
MOBILE NO		
EMAIL		
OCCUPATION		

### SIBLINGS

NAME	GRADE LEVEL/COURSE/OCCUPATION	SCHOOL/BUSINESS ADDRESS	AGE

### GUARDIAN (if not living with parents):

Last Name	First Name	Middle Name	Relationship:
Address	Email Address:		Telephone Number:

### NAMES OF FAMILY MEMBERS/RELATIVES WHO STUDIED IN CFS

NAME	GRADE LEVEL	YEAR ATTENDED	RELATIONSHIP

REASON FOR BEING INTERESTED IN / OR HAVING CHOSEN CFS?

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

HOW DID YOU LEARN ABOUT CFS?

BROCHURES / FLYERS / POSTERS

SCHOOL CAREER FAIR / TALKS / ORIENTATIONS / VISITS

SOCIAL MEDIA

REFERRED TO ME BY:

PARENTS  SIBLINGS  RELATIVES  FRIENDS  ALUMNAE  PRINCIPAL  TEACHERS  CLASSMATES

GUIDANCE COUNSELORS

Please specify name: \_\_\_\_\_

### AGREEMENT

THE FOLLOWING MUST BE READ AND SIGNED BY THE PARENT(S) OR GUARDIAN:

We understand that this application and admission into Centro Fidei School are subject to the following conditions:

1. That it is our responsibility to provide accurate information in this application and authorize the verification of the given credentials as well as to provide all necessary documentary evidence of qualification and experience.
2. That any misrepresentation or omission of facts in the application will justify the denial or cancellation of admission;
3. That we will notify the Admissions Office of any change in status stated in this application and supporting documents from date of application to date of formal admission in the unit;
4. That credentials filed in support of this application which are received by the Admissions Office become the Property of Centro Fidei School and will not be returned to the applicant;
5. That we agree to comply with the rules, policies and regulations of Centro Fidei School when the applicant is accepted.

### DECLARATION

We have read and understood all sections of this admissions package. We declare that to the best of our knowledge, the information supplied in this application and documentation supporting it is correct and complete.

\_\_\_\_\_  
SIGNATURE OF FATHER

\_\_\_\_\_  
SIGNATURE OF MOTHER

\_\_\_\_\_  
SIGNATURE OF GUARDIAN

\_\_\_\_\_  
DATE

