



# ENROLLMENT FORM

## (OLD STUDENT)

PHOTO  
1X1

School Year : Date : Department : Grade Level : Enrolled by: Contact No.: 

### STUDENT INFORMATION

**INSTRUCTIONS:** Print legibly all information required in CAPITAL letters. Submit accomplished form to the Person-in-Charge/Registrar/Class Adviser. Use black or blue pen only.

LRN :  - Last Name : First Name : Middle Name : Extension Name e.g. Jr., III : Birthday :  Gender :  Male  Female Age :  Religion : Address : 

House Number and Street

Barangay

City/Municipality/Province/Country

Zip Code

### ACADEMIC HONORS AWARDS

Please indicate recent academic honors, distinctions, personal accomplishments and awards earned. Include positions held (elected /appointed officer) and other special responsibilities/ extra-curricular activities in and out of the school. Pls include the school year.

## ACADEMIC AWARDS LAST SCHOOL YEAR

## EXTRA-/CO-CURRICULAR ACTIVITIES

<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

### PARENT'S/GUARDIAN'S INFORMATION

Father's Name (Last Name, First Name, Middle Name)

<input type="text"/>	Occupation : <input type="text"/>	Contact No. : <input type="text"/>
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Mother's Name (Last Name, First Name, Middle Name)

<input type="text"/>	Occupation : <input type="text"/>	Contact No. : <input type="text"/>
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Guardian's Name (Last Name, First Name, Middle Name)

<input type="text"/>	Occupation : <input type="text"/>	Contact No. : <input type="text"/>
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Contact Person in case of emergency

Father  Mother  Guardian

Guardian's Relationship : 

Address : <input type="text"/>	Tel. No. : <input type="text"/>	Email Add. : <input type="text"/>
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#### Residence

Kindly indicate where the child is living. Please check.

<input type="checkbox"/> Family Home	<input type="checkbox"/> Guardian's Home	<input type="checkbox"/> Others (pls. specify) <input type="text"/>
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How does your child get to school? Please check.

<input type="checkbox"/> School Service	<input type="checkbox"/> Family-owned vehicle	<input type="checkbox"/> Public Transport/commuter	<input type="checkbox"/> Others (pls. specify) <input type="text"/>
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We understand that this enrollment and admission to Mercedarian School, Inc. are subject to the following conditions:

That credentials and documents submitted to the Registrar's Office become the property of Mercedarian School and will not be returned to the student;

That we agree to comply with the rules, policies and regulations of Mercedarian School as prescribed in its Student Manual and any other further issuances, memos and circulars.

We have fully read and understood all sections of this enrollment form and its process. We declare to the best of our knowledge, that the information supplied herein, and the documents supporting it, is correct, valid and complete.

(Signature over printed name)  
PARENT/ GUARDIAN

(MM/DD/YYYY)  
DATE SUBMITTED

Conformed by:

Approved by:

MRS. AMOR N. SEMILLANO  
SCHOOL REGISTRAR

SR. NORLYN A. ARNAD, MMB  
SCHOOL PRINCIPAL