Form 5 (Revised 2017)

Republic of the Philippines MARIANO MARCOS STATE UNIVERSITY **Ilocos Norte**



CERTIFICATE OF REGISTRATION

2021-07-02

Student : 18-020196 Semester : Mid-year Number : MIGUEL, MICHAEL EDREI CASIL Academic Year: 2020-2021 Name : BS in Computer Science Degree Year / Section : 3 - A

209.00	Сорас					
Course Code	Units	Time	Day	Room/College	ASSESSMEN	NT
CMPSC 199	3.00	TBA			Description	Amount
					OJT Fee	500.00
						TOTAL: Php 500.00
Total Units	:		Mode of Payme	nt		
	3.0	'	widde of Fayine		Library Fee	50.00
Comp Lab Units	:	Full Doymont	Php 500.00		Medical/Dental Fee	20.00
		Full Payment	Prip 500.00		Guidance Fee	15.00
Non-Comp Lab Uni			DI		Registration Fee	100.00
	0.0	1st Installment	Php 500.00		Tuition Fee	300.00
Status: Regular					†ТО	TAL(Free): Php 485.00
		2nd Installment	Php 0.00			
		3rd Installment	Php 0.00		Scholarship: NONE	

RA 10931, Universal Access to Quality Tertiary Education Act of 2017 Php 485.00

For Students with Fees to be paid

- · Option 1: Online Payment
 - Pay your fees online thru https://epaymentportal.landbank.com
 Use the following details:
 Merchant's Name: Mariano Marcos State University
 - - Type of Fee: Tuition Fee
 Mode: Full Payment
- Note: Please pay the exact amount indicated in this form.

 Option 2: Offline Payment
- - Print 3 copies of this form.
 - 2. Pay your fees at the Cashier's Office FEM Hall (Admin. Bldg) Batac, CTE-Laoag, or CIT-Laoag.

Date & time of enlistment: Thu, Jul 1, 2021 2:56 PM Date & time approved: Fri, Jul 2, 2021 8:57 AM

NOTE: Submit Form 5 and TERTIARY EDUCATION SUBSIDY Form (signed by Parents only) to your Department on the first day of classess.

DATA PRIVACY CONSENT

I explicitly and unambiguously consent to the collection, processing and storage of my personal data by MMSU for the purpose(s) described in the MMSU Data Privacy Notice (http://www.mmsu.edu.ph/about/mmsu-dataprivacy-notice).

Signature of Student

Republic of the Philippines MARIANO MARCOS STATE UNIVERSITY City of Batac, Ilocos Norte

APPLICATION TO AVAIL TERTIARY EDUCATION SUBSIDY (RA 10931, Universal Access to Quality Tertiary Education Act of 2017)

knowledge and consent of my pa	arents (or guardian), as indicated by their respectived under RA 10931, the Universal Access to 0		ly for TERTIARY
TES 3a: Additional allo am qualified to by reason of	wance for special services, personal assistance my standing as a PWD student. time benefit to cover cost of obtaining professi	e, transportation, equipment and	supplies, which I
notarial fees, review classes	fees, insurance premium and documentary fees e, promise and guaranty that all required suppo	3.	
	y reason hereof, shall be solely and exclusively		
or the Academic Year 2020-2	021_, <u>Mid-year</u> semester.		
FULL NAME OF STUDENT:	MICHAEL EDREI CASIL MIGUEL	STUDENT NO.:	18-020196
PERMAMENT ADDRESS: DEGREE PROGRAM:	VILLANUEVA STREET, Bgy. No. 16, San Jacinto (PBS in Computer Science	YEAR LEVEL:	3
	Signature of Student		
EDWARD MIC	GUEL	REMY MIGUEL	
EDWARD MIC		REMY MIGUEL Printed Name and Signature of	of Mother
Printed Name and Sign 1. Certificate of resider Captain with dry seal.	nature of Father	Printed Name and Signature of date of issuance. Duly signed	
Printed Name and Sign 1. Certificate of resider Captain with dry seal. 2. Certificate of Non-Filin	ature of Father	Printed Name and Signature of Adate of issuance. Duly signed pplicable.	by the Barangay
Printed Name and Sign 1. Certificate of resider Captain with dry seal. 2. Certificate of Non-Filin 3. PWD ID /Certification	nature of Father ncy with name of student applicant, address & and of Income Tax Return/BIR Form 2316/ITR if a	Printed Name and Signature of Adate of issuance. Duly signed pplicable.	by the Barangay
Printed Name and Sign 1. Certificate of resider Captain with dry seal. 2. Certificate of Non-Filin 3. PWD ID /Certification applicants only. This will serve to certify the 2017, were explained to above-	nature of Father ncy with name of student applicant, address and of Income Tax Return/BIR Form 2316/ITR if a from the National Council for Disabilities Affa	Printed Name and Signature of Adate of issuance. Duly signed applicable. Airs (NCDA) specifying the disability of the Universal Access to Quality Tertiplained this document, the benefit	by the Barangay lity(s) for TES 3a tiary Education of ts he/she applied
Printed Name and Sign 1. Certificate of resider Captain with dry seal. 2. Certificate of Non-Filin 3. PWD ID /Certification applicants only. This will serve to certify the 2017, were explained to above-to, and the corresponding duties	nature of Father and with name of student applicant, address and of Income Tax Return/BIR Form 2316/ITR if and from the National Council for Disabilities Affar CERTIFICATION and the provisions of Republic Act No 10931, the named student, and that the student in turn ex	Printed Name and Signature of Adate of issuance. Duly signed applicable. Airs (NCDA) specifying the disability of the Universal Access to Quality Tent plained this document, the benefit the latter gave consent to this application.	by the Barangay lity(s) for TES 3a tiary Education of ts he/she applied
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Printed Name and Sign 1. Certificate of resider Captain with dry seal. 2. Certificate of Non-Filin 3. PWD ID /Certification applicants only. This will serve to certify the 2017, were explained to above-to, and the corresponding duties. This day of	cature of Father and with name of student applicant, address & and of a parent/s, please provide additional information in from the National Council for Disabilities Affair CERTIFICATION that the provisions of Republic Act No 10931, the named student, and that the student in turn exists obligations thereunder, to his/her parents, and the parents, and the parents and the parents and the parents and the parents are addeduced by the parents a	Printed Name and Signature of Adate of issuance. Duly signed applicable. Pairs (NCDA) specifying the disability of the Universal Access to Quality Tertiplained this document, the benefit the latter gave consent to this application. Registra	by the Barangay lity(s) for TES 3a tiary Education of ts he/she applied ication.



Republic of the Philippines Mariano Marcos State University City of Batac, Ilocos Norte

FREE HIGHER EDUCATION APPLICATION FORM Mid-year Semester, AY 2020-2021

I. PERSONAL INFOR			e needed information. Please v	_ ·			
	MATION						
Name:	MICHAEL EDI	REI CASIL MIGUEL	Sex:	✓ Male ☐ Female			
Contact No.:	09484253417 E	-mail address: MECM06.MN	M@GMAIL.COM Civil St	atus: Single Married			
Home Address:	VILLANUEVA	STREET, Bgy. No. 16, San Jac	cinto (Pob.), LAOAG CITY	(Capital), ILOCOS NORTE			
Religious Affiliation:	-	Tribal Affiliation: Citizenship: FILIPINO					
				·			
II. FAMILY INFORM	ATION						
Name of Father:		EDWARD MIGUEL					
Name of Mother:		REMY MIGUEL					
Who is Supporting yo	our studies?			Does your family belong to any of the f	following?		
Self-Supporting			4Ps beneficiaries				
Spouse (if married)				Listahanan Not applicable			
	e specify:			Not applicable			
		lings below 18 years old:e, number of children below 18	— vears old:				
Monthly Family Inco		, number of children below 10	years old.				
<i>J - 1111111</i>	-	Occupation		Estimated Monthly I	Income		
If supported by the p	navonts	Father					
in supported by the j	parents	Mother					
		Total Monthly Family Incom	me				
If supported by spou	use						
If self-supporting							
New Continuing			stipend per semest	er.			
Old Returning If new, when was the And in which institut	e last school year a tion (name and ad	dress of school):	Yes No	me of the scholarship program:			
If new, when was the	e last school year a tion (name and ad	on provided.	Yes No				
If new, when was the And in which institut by certify as to the correctness To be	e last school year ation (name and address of the information of the i	on provided. Si NDER! and submitted with the uirement/s to the	gnature of Applicant Documentary Requestion Application	me of the scholarship program: irement/s: : : : : : : : : : : : : : : : : : :	ng the student's		
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