



SCHOLARSHIP RENEWAL FORM

Instruction: As an existing scholar you must fill in all the required information about your academic year status. And please CHECK EACH BLANK in the attestation.					
Scholarship Category: SCHOLARSHIP FOR TERTIARY STUDENTS			Sub-Category: ECONOMIC SCHOLARSHIP		
QC I.D. NUMBER: 04400000325999			SCHOLARS ID NUMBER: 2019-300-4311		
I.PERSONAL INFORMATION					
Last Name: Villamor		First Name: John Lester		Middle Name: Versoza	Extension Name:
Complete Address: #187 Saint Peter Street Barangay Holy Spirit Quezon City				Barangay: HOLY SPIRIT	
				District: II	ZIP Code: 1127
Date Of Birth: (MM/DD/YEAR) July 25, 2000		Place Of Birth:(CITY) Quezon City		Civil Status: SINGLE	Citizenship : Filipino
Religion Catholic		Age: 21		Sex: MALE	Height:(ft) 165.09
Weight:(kg) 50		Mobile Number: 09469515599		Telephone Number:	
Email Address: lestervillamor025@gmail.com				Registered QC ID Email Address: lestervillamor025@gmail.com	
II. SCHOLARSHIP & ENROLLMENT INFORMATION					
EDUCATIONAL YEAR/GRADE LEVEL: COLLEGE					
School Name:(CURRENT) Bestlink College of the Philippines		School Address:(CURRENT) #1071 Barangay Kaligayahan Quirino Highway Novaliches Quezon City		School Contact No.: (CURRENT) 284638787	
Current Course/Program/Strand: (WRITE IN FULL) Bachelor of Science in Information Technology			No. of School Terms/ Semester Completed:		Number of Units Currently Enrolled: 15
TRANSFEREE	School Name:(PREVIOUS)	School Address: (PREVIOUS)		School Contact No.: (PREVIOUS)	
COURSE/PROGRAM SHIFTER	Previous Course/Program/Strand: (WRITE IN FULL)				
Number of Units in previous semester/term:				18	GWA: 1.96
I, VILLAMOR, JOHN LESTER VERSOZA , a resident of #187 Saint Peter Street Barangay Holy Spirit Quezon City attest that					
<ul style="list-style-type: none">I am an existing scholar applying for scholarship renewalI understand the procedures, terms, and conditions of the Quezon City Scholarship Program as discussed by the QCYDOI participated in an interview conducted by the QCYDO for scholarship renewal purposesAll information provided are true and complete to the best of my knowledge			<ul style="list-style-type: none">I will immediately inform QCYDO of any updates/ changes from the information/documents submittedAll documents submitted are original/authenticated copies, and information stated therein are true and correctIn compliance with the Data Privacy Act of 2012, I give consent to QCYDO to collect, process, and evaluate information needed for the Quezon City Scholarship Program		
AFFIANT			For Scholars below 18 years old ASSISTED BY:		
Scholar's Signature over Printed Name DATE & TIME OF ACCOMPLISHED FORM:			Parent/Guardian's Signature over Printed Name		