

DEPARTMENT OF SCIENCE AND TECHNOLOGY
SCIENCE EDUCATION INSTITUTE
Bicutan, Taguig City

INFORMATION SHEET
for the



ACCELERATED SCIENCE & TECHNOLOGY HUMAN RESOURCE DEVELOPMENT PROGRAM
2010-2011 GRADUATE SCIENCE AND TECHNOLOGY SCHOLARSHIPS

TYPE OF SCHOLARSHIP APPLIED FOR:

☐ MS ☒ PhD ☐ Thesis Grant ☐ Dissertation Grant

FORM A

I. PERSONAL INFORMATION

a. CAMPANO WENDELL QUISQUIN
Last Name First Name Middle Name

b. 05 LIWANAG STREET PUERTO PRINCESA CITY PALANAN
Permanent Address No. Street District City/Municipality Province

c. 5300 Wendy@ymail.com
Zip Code Passport No. E-mail Address

d. V.P. School of Statistics, PILIMAN QUEZON CITY
Current Mailing Address

e. 928-0881/09178599876 928-0881
Telephone Nos. (Landline/Mobile) Fax No.

f. SINGLE MARCH 3, 1982 28 MALE
Civil Status Date of Birth Age Sex

g. ALEXANDRO CAMPANO GRACE CAMPANO
Name of Parents (Father) (Mother)

05 LIWANAG ST. PUERTO PRINCESA CITY, PALANAN
Address

II. INFORMATION ON DOST SCHOLARSHIP PREVIOUSLY/CURRENTLY AVAILED OF

	YEAR OF AWARD	FIELD	UNIVERSITY/SCHOOL	SCHOLARSHIP	REMARKS
HS				<input type="checkbox"/> PSHS OTHERS:	
BS				<input type="checkbox"/> NSTA/NSDB <input type="checkbox"/> RA 7687 <input type="checkbox"/> MERIT <input type="checkbox"/> JLAP OTHERS:	
MS				<input type="checkbox"/> NSTA/NSDB <input type="checkbox"/> ASTHRD <input type="checkbox"/> ERDT <input type="checkbox"/> COUNCIL/SEI OTHERS:	
PhD				<input type="checkbox"/> NSTA/NSDB <input type="checkbox"/> ASTHRD <input type="checkbox"/> ERDT <input type="checkbox"/> COUNCIL/SEI OTHERS:	

III. GRADUATE SCHOLARSHIP INTENTIONS DATA

Applicants for graduate program should elect to go to another university if his/her 1st (BS) and 2nd (MS) degrees were taken from the same university to avoid inbreeding.

New Applicant

- a. University where you applied/intend to enroll for graduate studies 1ST CHOICE: UNIVERSITY OF THE PHILIPPINES - DILIMAN (ACCEPTED)
2ND CHOICE: _____
3RD CHOICE: _____
- b. Course/Degree PHD in STATISTICS

Lateral Applicant

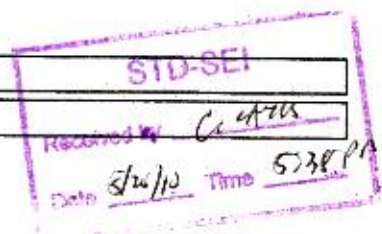
- a. University enrolled in _____
- b. Course Degree _____
- c. Number of units earned _____ d. No. of remaining units/semesters _____

Thesis/Dissertation Applicant (Please fill-up also information on Lateral Applicant)

Has your research topic been approved by the panel? ☐ Yes ☐ No

Title _____

Date of last enrollment in thesis/dissertation _____



IV. CAREER/EMPLOYMENT INFORMATION

- a. Present Employment Status: (☒) Permanent (☐) Contractual (☐) Probationary
(☐) Self-employed (☐) Unemployed

a.1 For those who are presently employed

Position	<u>ASSISTANT PROFESSOR 2</u>		Length of Service	<u>5 yrs</u>
Name of Company/Office	<u>UNIVERSITY OF THE PHILIPPINES</u>			
Address of Company/Office	<u>DIAMAN, QUEZON CITY (SCHOOL OF STATISTICS)</u>			
E-mail		Website	<u>www.stat.upd.edu.ph</u>	
Telephone No.	<u>928-0881</u>	Fax No.	<u>928-0881</u>	

a.2 For those who are self-employed

Business Name				
Address				
Email/Website		Telephone No.		Fax No.
Type of Business		Years of Operation		

b. CAREER PLANS (Write in the attached sheet)

- b1. Briefly discuss your proposed research areas
b2. Future Plans (After Graduation)

V. RESEARCH AND DEVELOPMENT INVOLVEMENT (last five years)

Use additional sheet if necessary.

FIELD AND TITLE OF RESEARCH	LOCATION/DURATION	FUND SOURCE	NATURE OF INVOLVEMENT

VI. PUBLICATIONS (last five years)

Use additional sheet if necessary.

TITLE OF ARTICLE/PUBLICATION	PLACE/YEAR OF PUBLICATION	NATURE OF INVOLVEMENT
<u>ROBUST ESTIMATION OF T-TESTS W/ STRUCTURAL CHANGE</u>	<u>(INTERNATIONAL) JOURNAL OF STATISTICAL COMPUTING 2010</u>	<u>MAIN AUTHOR</u>

VII. AWARDS RECEIVED

TITLE OF AWARD	AWARD GIVING BODY	YEAR OF AWARD

I hereby certify that all information given above are true and correct to the best of my knowledge.



Signature of Applicant

Date 2011/4/20/10

CHECKLIST OF REQUIRED DOCUMENTS SUBMITTED (for staff use only)

- ☐ Birth Certificate
- ☐ Certified True Copy of Grades/Transcript of Records.
- ☐ Recommendation from two former professors in college
- ☐ If employed, must be recommended by the head of agency
- ☐ Certification from a licensed physician indicating his PRC No., as to health status.
- ☐ Valid NBI Clearance
- ☐ One passport size picture
- ☐ Certification of Admission in the University where you intend to enroll.*
- ☐ Result of University Evaluation Sheet for Admission in the graduate program signed by the Dean of Graduate Studies/School
- ☐ Program of study approved by the graduate school*

*must be submitted as a requirement for the awarding of scholarships

Deadline for Submission of Application : April 30, 2010

HUMAN RESOURCES DEVELOPMENT PROGRAM
Philippine Council for Advanced Science and Technology Research and Development
Department of Science and Technology
Rm. 100 DOST Main Bldg., General Santos Avenue, Bicutan, Taguig, Metro Manila
Tel. Nos. 837-20-71 to 82 Locals 2100-2109; Direct Lines 837-75-16/22; Fax No. 837-75-16/22
Email: pcastrd@dost.gov.ph Website: <http://www.pcastrd.dost.gov.ph>

APPLICATION FORM

(Print or type in block letters)

Name : CAMPANO WENDELL QC
(Family) (First) (Middle)

Program Applied For:

☐ MS ☐ Thesis ☐ Research
☒ PhD ☐ Dissertation ☐ Visiting Professor

Type of Scholarship:

☒ Full-time ☐ Part-time

Proposed Field of Study:

☐ Biology ☐ Computer Science ☐ Chemistry
☐ Physics ☐ Information Technology ☐ Microelectronics
☐ Mathematics ☐ Materials Science ☒ Statistics
☐ Earth Science/Remote Sensing

Proposed Research Area: COMPUTATIONAL STATISTICS

PCASTRD accredited school where admitted: SCHOOL OF STATISTICS, UNIVERSITY OF THE PHILIPPINES-DILMAN

Type of Entry to the Scholarship:

☒ Regular ☐ Lateral If lateral, no. of graduate units passed _____

Duration: 4 years

(for lateral entrants, to be supported by a certification from the graduate school on the minimum number of units required and the minimum number of semesters needed to finish the degree)

Please submit this duly accomplished application form with the following requirements;

- _____ 1. Certificate of acceptance/admission from any PCASTRD accredited school
- _____ 2. Certified true copy of Transcript of Records (BS for MS applicant/BS and MS for PhD applicant)
- _____ 3. Certified true copy of diploma/certificate of graduation
- _____ 4. Recommendation letters from two former professors (BS or MS, as the case may be)
- _____ 5. Endorsement letter from the head of sending institution (where applicable)
 - a. potential contribution
 - b. length of service
 - c. absence of criminal/administrative charges
 - d. willingness to release the nominee from the duties and responsibilities for the duration of the scholarship program/approved study leave with pay/ no existing scholarship grant
- _____ 6. Certified true copy of birth certificate
- _____ 7. Doctor's certification of good health with x-ray results
- _____ 8. NBI Clearance
- _____ 9. Two (2) copies of 2"x2" latest picture
- _____ 10. Others



Brief Description of Career Plans:

Right now, I am convinced that my calling is to serve my country through teaching in the government academe and through research. I do not have plans of leaving the country for the sake of my own career. Instead, I would like to offer my skills to God and the Filipino people. After all, the latter subsidized most of my financial needs for my education. When I get a PhD degree, my immediate concern is to create user-friendly programs that would incorporate computer-intensive statistical procedures that we have developed at the school. Usually, these methods are difficult for statisticians to implement particularly to those who are not computer programmers. Thus my goal is to combine our research and easy implementation of new methods developed in it. I strongly believe that these will contribute much in uplifting our country (use additional sheet if necessary) in the field of statistics.

PERSONAL INFORMATION

Home Address : 05 LINANAG STREET, PUERTO PRINCESSA CITY, PALAWAN

Home Tel. No. : _____

City/Contact Address : 2315 U.P. BLISS, DILIMAN, QUEZON CITY

City/Contact Nos.: (02) 435-1754

E-mail: wendagc@gmail.com Mobile Phone No. 09178599876

Sex : MALE Age : 28 Civil Status : SINGLE

Date of Birth : MARCH 03, 1982 Place of Birth : BATAC CITY, ILOCOS NORTH Citizenship : FILIPINO

If Married, Spouse Name : _____

Occupation: _____

Employer : _____

Office Address : _____

Tel. Nos: _____

Children:

Name	Age	Address	Occupation
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Father's Name : ALEJANDRO CAMPANO Occupation : CHURCH PASTOR / MINISTER

Employer : BGY. MANGINGISDA ALLIANCE CHURCH

Office Address : PUERTO PRINCESSA CITY, PALAWAN

Tel. No. : NONE / MOBILE: 09063239712

Mother's Name : GRACE Q. CAMPANO Occupation : CHURCH MINISTER

Employer : BGY. MANGINGISDA ALLIANCE CHURCH

Office Address : PUERTO PRINCESSA CITY, PALAWAN

Tel. No. : NONE / MOBILE: 09056721869

Brothers/Sisters :

Name	Age	Address	Occupation
ALLEN CAMPANO	26	U.P. LOS BAÑOS, LAGUNA	U.P.L.B. INSTRUCTOR
GAZELLE CAMPANO	23	PUERTO PRINCESSA CITY, PANGLOSS	NONE
AVERELL CAMPANO	20	PUERTO PRINCESSA CITY, PANGLOSS	NONE
STEPHANIE CAMPANO	16	U.P. LOS BAÑOS, LAGUNA	NONE

(use additional sheets if necessary)

EDUCATIONAL BACKGROUND

Degree Received	Name of Institution	Year	Title of Thesis
BS STATISTICS	UNIVERSITY OF THE PHILIPPINES	2005	N/A
MS STATISTICS	UNIVERSITY OF THE PHILIPPINES	2008	AN ESTIMATION PROCEDURE OF AN ARIMA MODEL IN THE PRESENCE OF STRUCTURAL CHANGE

Special Trainings Undertaken:

Training Courses	Training Institution	Period

(use additional sheet if necessary)

Scholarship/Fellowship Availed of:

Program	Field of Study	School	Sponsoring Inst.	Period

(use additional sheet if necessary)

EMPLOYMENT RECORD

Present Employer : UNIVERSITY OF THE PHILIPPINES - DILIMAN
 Office Address: MAP SCHOOL OF STATISTICS, MAGSAYSAY AVE., DILIMAN, QUEZON CITY
 Office Tel. No.: (02) 928-0881

Brief Description of Present Duties:

I serve as a statistics professor at the school of statistics.

(use additional sheet if necessary)

Will your present employer pay your salary throughout the duration of your scholarship?



Yes



No

Research Projects Involved In:

Title	Name of Co-Researchers	Period

(use additional sheet if necessary)

Please list positions held from previous employment:

Period	Position	Salary	Employer
JUNE 2005-JUNE 2006	STATISTICAL SERVICES ASSOCIATE	₱12,000	PHILIPPINE SURVEY AND RESEARCH CENTER - RESEARCH INTERNATIONAL

(use additional sheet if necessary)

Will you relocate your family within the proximity of the school you are enrolled?



Yes



No

Character References : (preferably from your present office)

Name	Position	Address	Contact Nos.
1. ERNEL B. BARRIOS	DEAN	U.P. SCHOOL OF STATISTICS, UP DILIMAN	(02) 928-0881
2. JOSEFINA V. ALMEDA	COLLEGE SECRETARY	U.P. SCHOOL OF STATISTICS, UP DILIMAN	(02) 728-0881
3. JOSEBITO MAGADIA	GRADUATE DIRECTOR	U.P. SCHOOL OF STATISTICS, UP DILIMAN	(02) 928-0881

I certify that the statements made herein are true and correct and I promise to abide by the decision of the PCASTRD administration on this application.

MAY 20, 2010

Date



Signature of Applicant

LANDBANK OF THE PHILIPPINES
Bicutan DOST Branch

Department of Science & Technology (DOST) E-Card Data Capture Form

DATE ACCOMPLISHED:

FIRST NAME:

MARK LOULE

M.I.:

F.

LAST NAME:

RAMOS

SPAS ID NO.:

COURSE/ SCHOOL:

M.S. Statistics / University of the Philippines

CONTACT NO.:

09178065536

SCHOLAR TYPE (PLEASE CHECK)

☐

UNDERGRADUATE

☒

ASTHRD

☐

ERDT



RIGHT THUMBMARK

ENDORSED BY ORGANIZATION:

Regional Office:

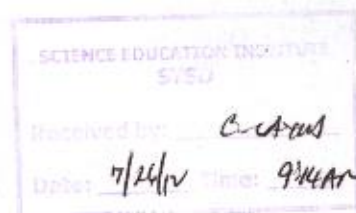
Science Education Institute:

ALICIA L. ASUNCION

Chief, STSD

AUTHORIZED SIGNATORY

AUTHORIZED SIGNATORY



PORTION FOR BANK USE ONLY:

CLIENT ACCOUNT NO:

SIGNATURE VERIFIED AND CHECKED BY:

APPROVED BY:

Note:

1. This form must be returned and safe kept by the Branch
2. Replacement of E-Card is subject to payment of corresponding fees.

SIGNATURE: (PLEASE DO NOT UNDERLINE)

1.

2.

The Hon. Secretary
Department of Foreign Affairs

The Director : National Bureau of Investigation
The Commissioner : Bureau of Immigration and Deportation



Gentlemen:

Please include MARK LOUIE F. RAMOS in the list of DOST-ASTHRDP scholars needing
(Name of Scholar)

clearance for securing a departure order, whose picture, CONFORME, details of scholarship, service obligations, etc., appear in the appropriate boxes below.

DR. ROWENA CRISTINA L. GUEVARA
(Requesting Official)

Executive Director
(Designation)

Date of Request: 7/25/2012

Name of Scholar	Date of Birth	Place of Birth	Civil Status
MARK LOUIE F. RAMOS	11/17/1982	Manila	<input checked="" type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Separated
Mailing Address: Unit 9 C Futuroport II Mother Ignacia Quezon City		Person to be Contacted in case of Emergency: MARGARET RAMOS +639278064406	
Email Address: mframos@mn.vst.edu.ph		Name of Granting Institution DOST thru PCIEERD	
Name of Sending Institution University of Santo Tomas		Name of Granting Institution	
Field of Study Statistics	School/University University of the Philippines	<input type="checkbox"/> Undergraduate <input checked="" type="checkbox"/> Masters <input type="checkbox"/> Doctorate	Scholarship Period From : To :
Service Obligation: <input checked="" type="checkbox"/> 2 Years <input type="checkbox"/> Months	Scholarship Contract Signed: Date: 7/25/2012	Parties to Scholarship Contract: <input type="checkbox"/> Scholar <input type="checkbox"/> Granting Institution <input type="checkbox"/> Sending Institution <input type="checkbox"/> Others	

CONFORME

I hereby signify my CONFORME to the foregoing, including the submission of my name in the list of DOST-ASTHRDP scholars needing clearance for securing NBI clearance, passport application from the Department of Foreign Affairs (DFA) and departure order from the Bureau of Immigration (BI). Furthermore, I will comply with the requirements in securing clearance/s from my sending and granting institutions prior to any travel abroad.

Signature of Scholar: _____
Date : 7/25/2012

The Hon. Secretary
Department of Foreign Affairs

The Director : National Bureau of Investigation
The Commissioner : Bureau of Immigration and Deportation



Gentlemen:

Please include MARK LOUIE F. RAMOS in the list of DOST-ASTHRDP scholars needing
(Name of Scholar)

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Mailing Address: Unit 9C Futurepoint II, Mother Ignacio Quezon City		Person to be Contacted in case of Emergency: MARGARET RAMOS +639278064406	
Email Address: mframes@mn.vt.edu.ph			
Name of Sending Institution University of Santo Tomas		Name of Granting Institution DOST thru PCIEERD	
Field of Study Statistics	School/University University of the Philippines	<input type="checkbox"/> Undergraduate <input checked="" type="checkbox"/> Masters <input type="checkbox"/> Doctorate	Scholarship Period From : To :
Service Obligation: <input checked="" type="checkbox"/> 2 Years <input type="checkbox"/> Months	Scholarship Contract Signed: Date: <u>7/25/2012</u>	Parties to Scholarship Contract: <input type="checkbox"/> Scholar <input type="checkbox"/> Granting Institution <input type="checkbox"/> Sending Institution <input type="checkbox"/> Others	

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Signature of Scholar: _____
Date : 7/25/2012

The Hon. Secretary
Department of Foreign Affairs

The Director : National Bureau of Investigation
The Commissioner : Bureau of Immigration and Deportation



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Mailing Address: Unit 9C Futurepoint II. Mother Ignacia Quinsan City		Person to be Contacted in case of Emergency: MARGARET RAMOS +639278064406	
Email Address: mframes@nnl.vst.edu.ph			
Name of Sending Institution University of Santo Tomas		Name of Granting Institution DOST thru PCIEERD	
Field of Study Statistics	School/University University of the Philippines	<input type="checkbox"/> Undergraduate <input checked="" type="checkbox"/> Masters <input type="checkbox"/> Doctorate	Scholarship Period From : To :
Service Obligation: <input checked="" type="checkbox"/> 2 Years <input type="checkbox"/> Months	Scholarship Contract Signed: Date: <u>7/25/2012</u>	Parties to Scholarship Contract: <input type="checkbox"/> Scholar <input type="checkbox"/> Granting Institution <input type="checkbox"/> Sending Institution <input type="checkbox"/> Others	

CONFORME

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Signature of Scholar: [Signature]
Date: 7/25/2012

DEPARTMENT OF SCIENCE AND TECHNOLOGY
SCIENCE EDUCATION INSTITUTE
Bicutan, Taguig City

INFORMATION SHEET
for the



ACCELERATED SCIENCE & TECHNOLOGY HUMAN RESOURCE DEVELOPMENT
NATIONAL SCIENCE CONSORTIUM
2012-2013 GRADUATE SCIENCE AND TECHNOLOGY SCHOLARSHIP

RAMOS, MARK LOUIE F.

TYPE OF SCHOLARSHIP APPLIED FOR:

☒ MS ☐ PhD ☐ Thesis Grant ☐ Dissertation Grant

I. PERSONAL INFORMATION

a. Last Name: RAMOS First Name: MARK LOUIE Middle Name: FRAC

b. Permanent Address: Unit 9C Futurepoint II, 115 Mother Ignacia St., Quezon City, NCR

c. Zip Code: 1103 Region: NCR District: 2 Passport No.: EB4478115 E-mail Address: M+ramos@mn1.vst.edu.ph

d. Current Mailing Address: Unit 9C Futurepoint II, 115 Mother Ignacia St., Quezon City

e. Telephone Nos. (Landline/Mobile): 3321385 / 09178065536 Fax No.: _____

f. Civil Status: Married Date of Birth: 11/17/1982 Age: 29 Sex: Male

g. Name of Parents (Father): Mariano Ramos (Mother): Rosa Ramos

Address: 105-B Irija Street, Quezon City

II. INFORMATION ON DOST SCHOLARSHIP AND OTHER PREVIOUSLY/CURRENTLY AVAILED OF

	YEAR OF AWARD	FIELD	UNIVERSITY/SCHOOL	SCHOLARSHIP	REMARKS
HS				<input type="checkbox"/> PSHS OTHERS:	
BS				<input type="checkbox"/> RA 7687 <input type="checkbox"/> MERIT <input type="checkbox"/> JLAP OTHERS:	
MS				<input type="checkbox"/> NSTA/NSDB <input type="checkbox"/> ASTHRD <input type="checkbox"/> ERDT <input type="checkbox"/> COUNCIL/SEI OTHERS:	
PhD				<input type="checkbox"/> NSTA/NSDB <input type="checkbox"/> ASTHRD <input type="checkbox"/> ERDT <input type="checkbox"/> COUNCIL/SEI OTHERS:	

III. GRADUATE SCHOLARSHIP INTENTIONS DATA

Applicants for graduate program should elect to go to another university if his/her 1st (BS) and 2nd (MS) degrees were taken from the same university to avoid inbreeding.

New Applicant

a. University where you applied/intend to enroll for graduate studies: University of the Philippines

b. Course/Degree: Master of Science in Statistics

Lateral Applicant

a. University enrolled in: _____

b. Course Degree: _____

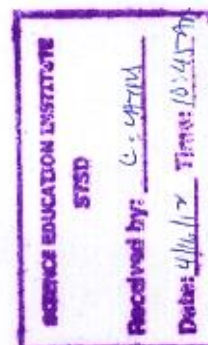
c. Number of units earned: _____ d. No. of remaining units/sems: _____

Thesis/Dissertation Applicant (Please fill-up also information on Lateral Applicant)

Has your research topic been approved by the panel? ☐ Yes ☐ No

Title: _____

Date of last enrollment in thesis/dissertation: _____



IV. CAREER/EMPLOYMENT INFORMATION

- a. Present Employment Status ☒ Permanent ☐ Contractual ☐ Probationary
☐ Self-employed ☐ Unemployed

a.1 For those who are presently employed

Position Instructor III Length of Service 5
 Name of Company/Office University of Santo Tomas
 Address of Company/Office Espana, Manila
 E-mail Website ust.edu.ph
 Telephone No. 7315728 Fax No.

a.2 For those who are self-employed

Business Name
 Address
 Email/Website Telephone No. Fax No.
 Type of Business Years of Operation

*Once accepted into the scholarship program, the scholar must obtain permission to take a leave of absence from his/her employer and become a full-time student. The scholar must submit a letter from his/her employer agreeing to the leave.

b. CAREER PLANS (Write in the attached sheet)

- b1. Briefly discuss your proposed research areas
 b2. Future Plans (After Graduation)

V. RESEARCH AND DEVELOPMENT INVOLVEMENT (last five years)

Use additional sheet if necessary.

FIELD AND TITLE OF RESEARCH	LOCATION/DURATION	FUND SOURCE	NATURE OF INVOLVEMENT
See attached sheet			

VI. PUBLICATIONS (last five years)

Use additional sheet if necessary.

TITLE OF ARTICLE/PUBLICATION	PLACE/YEAR OF PUBLICATION	NATURE OF INVOLVEMENT
See attached sheet		

VII. AWARDS RECEIVED

TITLE OF AWARD	AWARD GIVING BODY	YEAR OF AWARD
See attached sheet		

I hereby certify that all information given above are true and correct to the best of my knowledge.



Signature of Applicant

Date 4-16-2012

CHECKLIST OF REQUIRED DOCUMENTS SUBMITTED (for staff use only)

- ☒ Birth Certificate (Photocopy)
☒ Certified True Copy of Grades/Transcript of Records
☒ Recommendation from two former professors in college 2
☐ If employed, must be recommended by the head of agency and secure permission to take a leave of absence while on scholarship
☒ Medical Certificate as to health status from a licensed physician indicating PRC License No.
☒ Valid NBI Clearance WIC
☒ One passport size picture
☐ Letter of Admission which should include the evaluation sheet and program of study

Deadline for Submission of Application : First Semester - April 16, 2012
 Second Semester - September 3, 2012