**APPLICATION NO.** VALIDATION STATUS

INSTRUCTIONS: READ APPLICATION REQUIREMENTS. DO NOT APPLY IF NOT QUALIFIED. Fill in all the required information. DO NOT leave an item blank. If an item is not applicable, indicate "N/A". Only fully accomplished form will be accepted. Credentials filed in support of this application will become the property of this institution and will not be returned to the applicant.

A. NAME OF APPLICANT (AS IT APPEARS ON THE BIRTH CERTIFICATE)							
1. LAST NAME	PRENSICA						
FIRST NAME	NIMROD			N	IAME E	KTENSION	
MIDDLE NAME	N/A						
B. FACTS OF BIRTH							
2. DATE OF BIRTH (MM/DD/YYYY	3. GENDER	4. BLOOD TYPE	5. RELIGIO	N	6. CI	TIZENSHIP	7. CIVIL STATUS
11/22/2002	MALE		BORN AGAIN CH	IRISTIAN	F	ILIPINO	SINGLE
8. PLACE OF BIRTH 9. AGE 10. BIRTH ORDER (4.34) 11. NO. OF SIBLING/S (3.44) 11. NO. OF SIBLING/S							
PASO DE BLAS LYING	INN CLINIC VALEZUI	19	SECC	ND		3	
C ADDRESS & CONTACT DETAILS							



12. CURR	ENT	HOUSE / ROOM / F	LOOR / BLOCK / LOT / P	HASE	NO. / STRE	ET NAME	/ SUBDIVISI	ON		BARANGAY		CITY/MI	UNICIPAL	ITY	DISTRICT	ZIP CODE
			810 PINAGBAYAN							LINGUNAN	1		NZUELA		1	1446
13. PERM/	ANENT H	OUSE / ROOM / FLO	OOR / BLOCK / LOT / PHA	SE NO	D. / STREET	NAME / SU	IBDIVISION			BARANGAY		CITY/MI	UNICIPAL	ITY	DISTRICT	ZIP CODE
			810 PINAGBAYA	NAN S	TREET					LINGUNAN	1	VALE	ENZUELA		1	1446
14. ACTIV	E PERSO	NAL E-MAIL ADDR	ESS		15.	SOCIAL MI	EDIA URL/ID	(FACEBO	оок)		16. AC	TIVE MOBIL	E NUMBEI	R 1	7. TELEPHON	NE NUMBER
		nimrodprensica@gr	mail.com	www	v.facebook.co	om/nimrod.p	orensica					095021	40742			
D. FA	MILY	DATA														
18. FATHE	R'S	F	FIRST NAME			M. I.				LAST N	AME		EXT. N	AME (e.g. Sr.	PHYSICAL	EXISTENCE
INFOR	MATION		ALBERTO	DELARMINO			10		IGNACIO					L	IVING	
AGE	GE HIGHEST EDUCATIONAL ATTAINMENT			OCCUPAT	ION	AVERAGE INCOME PER MONTH MC			OBILE NUMBER TELEPHO		TELEPHO	NE NUMBER				
49	49 ELEMENTARY CONSTRUCTION WOR			N WORKER		ı	PHP 15,600		09	109902269	)					
19. MOTH	ER'S	F	FIRST NAME			M. I.				LAST N			EXT. N	AME (e.g. Sr.		EXISTENCE
MAIDE	N NAME		LILIA			PRENSI	ICA			IGN	ACIO				L	IVING
AGE		HIGHEST EDUCATI	ONAL ATTAINMENT			OCCUPAT	ION	А	VERAGE	INCOME P	ER MONT	гн мо	BILE NUN	IBER	TELEPHO	NE NUMBER
53		HIGH	H SCHOOL		FA	ACTORY W	ORKER			PHP 6,50	0	0	93226192	78		
20. MARIT	TAL STAT	US OF PARENTS	21. LIVING STATUS	22. O	WNERSHIP	OF HOME	23. HOUSE	HOLD N	IEMBER	24. GROS	S MONTH	ILY FAMILY	INCOME	25. <b>TO</b>	TAL MONTHI	Y EXPENSES
	MA	ARRIED			RENT	ΓAL		5			Р	HP 22,100			PHP 21,	000
		IFORMATION	FIRST NAME		M. I.		LAST NAI	ME	E	XT. NAME	e.g. Sr.)	RELAT	IONSHIP		MOBILE	NUMBER
(FILL OUT ONLY IF YOU ARE NOT LIVING WITH YOUR PARENTS)																
E. ED	E. EDUCATIONAL BACKGROUND															
	27. WHAT IS THE LATEST ACADEMIC PROGRAM YOU HAVE TAKEN? 28. HAVE YOU STUDIED OUTSIDE OF VALENZUELA CITY? IF "YES" GIVE DETAILS:															
	SENIOR HIGH SCHOOL NO															

SENIOR HIGH SCHOOL								NO	
29. FOR SHS STUDENTS	NAME OF SCHOOL LAST ATTENDED (DO NOT ABBREVIATI DATAMEX COLLEGE OF SAINT ADELINE				SCHOOL'S POSTAL ADDRESS GOTACO BLDG. 32 MACARTHUR HIGHWAY, VALENZUELA, 1440 METRO MANILA				
(GRADE 12 LEVEL)		=	GOTA	ACO BLDG,	32 MACARTHUR HIGHWA	AY, VALE	:NZUELA, 1440 METRO MANILA		
TRACK/STRAND ENROLLED			Т	TENTATIVE DATE OF	GRADUAT	ION	LEARNER REFERENCE N	Ю.	ESC NO. (IF APPLICABLE)
HUMSS			July 5, 20	21	136805080181 N/A			N/A	
30. FOR APPLICANT'S WH	~	NAME OF SCHOOL LAST	ATTENDED (DC	NOT ABBREVIATE)			SCHOOL'S PO	STAL AD	DDRESS
HAVE EARNED UNITS IN COLLEGE / VOCATIONAL / TRADE									
DEGREE/COURSE LAST TAKEN (DO NOT ABBREVIATE)  YEAR LI			YEAR LEVEL	LAST ENROLLED	YEAR GR	ADUATED	FIRST ENROLLMENT (S	SEM/S.Y.	LAST ENROLLMENT (SEM/S.Y.)
31 FNROLLMENT HISTORY NAME OF SCHOOL (DO NOT ABBREVIATE)				9	CHOOL'S	POSTAL A	DDRESS	PERIO	D OF ATTENDANCE (FROM - TO

DEGREE/COURSE LAST TAKEN (DO NOT ABBREVIATE) YEAR		YEAR LEVEL L	AST ENROLLED	YEAR GRADUATED	FIRST ENROLLMENT (	SEM/S.Y.	LAST ENROLLMENT (SEM/S.Y.)
31. ENROLLMEN	NT HISTORY NAME OF SCHOOL (DO NOT ABBRE		SCHOOL'S POSTAL A	DDRESS	PERIO	D OF ATTENDANCE (FROM - TO)	
GRADE 11	GRADE 11 DATAMEX COLLEGE OF SAINT ADELINE			MacArthur Highway, Va	2019-2020		
GRADE 10	RADE 10 DALANDANAN NATIONAL HIGH SCHOOL			G. Lazaro St. Dalandana		2018-2019	
GRADE 9	PRADE 9 DALANDANAN NATIONAL HIGH SCHOOL			G. Lazaro St. Dalandana	n, Valenzuela City		2017-2018
GRADE 8	GRADE 8 DALANDANAN NATIONAL HIGH SCHOOL			G. Lazaro St. Dalandana	2016-2017		
GRADE 7	ADE 7 DALANDANAN NATIONAL HIGH SCHOOL			G. Lazaro St. Dalandana	n, Valenzuela City		2015-2016

# F. GENERAL WEIGHTED AVERAGE & RANKING

32. GRADE 11 (2ND SEM)	87	33. RANK OF THE APPLICANT IN HIS/HER STRAND	N/A	
GRADE 11 (1ST SEM)	89	34. TOTAL NUMBER OF ENROLLED STUDENTS IN THE APPLICANT'S STRAND	39	
GRADE 10 (OVERALL)	82	35. RANK OF THE APPLICANT IN HIS/HER BATCH	N/A	NOS. 32 - 36 ARE APPLICABLE
GRADE 9 (OVERALL)	80	36. TOTAL NUMBER OF ENROLLED STUDENTS IN THE APPLICANT'S BATCH	N/A	ONLY FOR SHS STUDENTS

# G. INTENDED COURSE OF STUDY (UNDERGRADUATE PROGRAM)

BS Business Administration Major in Financial Management 38. FIRST CHOICE (COURSE/MAJOR) BS Accountancy 39. SECOND CHOICE (COURSE/MAJOR)

### WHY DO YOU CHOOSE THE FOLLOWING COURSES?

40. Finances is one of the main reason that stop or drop out of college. I chose Financial Managements because I want to learn on how to practice proper money management. Learning financial management will help me to keep better track of my finances, greater self- assurance about my financial management and diverse career opportunities. It can also beneficial for me because

I'm interested in starting my own business. I chose financial management because I want to be accountant and PLV, is the school

That will help me to reach my dreams to be an Accountant.

H. ORGANIZATIONAL AFF	ILIATION						
41. a. NAME OF ORGANIZATION		N/A					
ORGANIZATION CLASSIFICATIO	N	N/A					
MEMBERSHIP CLASSIFICATION		N/A					
b. NAME OF ORGANIZATION		N/A					
ORGANIZATION CLASSIFICATIO	iki	N/A					
		N/A					
MEMBERSHIP CLASSIFICATION		N/A					
c. NAME OF ORGANIZATION		N/A					
ORGANIZATION CLASSIFICATIO	N .	N/A					
MEMBERSHIP CLASSIFICATION		N/A					
I. OTHER INFORMATION							
42. ARE YOU A PERSON WITH DISABIL	ITY?	NO					
IF YES, PLEASE SPECIFY THE TYPE	OF DISABILITY						
PLEASE SPECIFY PWD ID NO.							
43. DO YOU HAVE ILLNESS / MEDICAL	CONDITION?	NO					
IF YES, PLEASE SPECIFY THE DETA	AILS						
44. ARE YOU A MEMBER OF ANY INDIC	SENOUS GROUP?	NO					
IF YES, PLEASE SPECIFY THE DETA							
45. IS YOUR FAMILY A HOUSEHOLD BI		YES					
		SDECIEV THE DETAILS NO					
	INITY/AFFINITY TO ANY PLV EMPLOYEE? IF YES, PLEASE  N/A		N/A				
a. NAME OF THE PLV EMPLOYEE	IVA	b. NAME OF THE PLV EMPLOYEE	IVA				
RELATIONSHIP TO THE PLV EMPLOYEE	N/A	DEPARTMENT  RELATIONSHIP TO THE PLV EMPLOYEE	N/A				
c. NAME OF THE PLV EMPLOYEE	N/A	d. NAME OF THE PLV EMPLOYEE	N/A				
DEPARTMENT		DEPARTMENT					
RELATIONSHIP TO THE PLV EMPLOYEE	N/A	RELATIONSHIP TO THE PLV EMPLOYEE	N/A				
47. ARE YOU RELATED BY CONSANGU	I JINITY/AFFINITY TO ANY VALENZUELA CITY GOVERNMEN	I T EMPLOYEE? IF YES, PLEASE SPECIFY	THE DETAILS NO				
a. NAME OF THE VCG EMPLOYEE	N/A	b. NAME OF THE VCG EMPLOYEE	N/A				
DEPARTMENT		DEPARTMENT					
RELATIONSHIP TO THE VCG EMPLOYEE		RELATIONSHIP TO THE VCG EMPLOYEE	N/A				
c. NAME OF THE VCG EMPLOYEE	N/A	d. NAME OF THE VCG EMPLOYEE	N/A				
DEPARTMENT		DEPARTMENT					
RELATIONSHIP TO THE VCG EMPLOYEE	N/A	RELATIONSHIP TO THE VCG EMPLOYEE N/A					
48. DO YOU HAVE ANY FAMILY MEMB IF YES, PLEASE SPECIFY THE DE	ER/S WITHIN THE THIRD DEGREE OF CONSANGUINITY V Tails	VHO GRADUATED / STUDIED / CURRENT	TLY ENROLLED AT PLV?				
a. NAME OF THE STUDENT	Joshua Prensica	b. NAME OF THE STUDENT					
COURSE	BSIT	COURSE					
YEAR GRADUATED/ATTENDANCE	2019-2022	YEAR GRADUATED/ATTENDACE					
c. NAME OF THE STUDENT		d. NAME OF THE STUDENT					
COURSE		COURSE					
YEAR GRADUATED/ATTENDANCE		YEAR GRADUATED/ATTENDACE					
e. NAME OF THE STUDENT		f. NAME OF THE STUDENT					
COURSE		COURSE					
YEAR GRADUATED/ATTENDANCE		YEAR GRADUATED/ATTENDACE					

#### J. DECLARATION

I declare under oath that I personally accomplished this application form, and I hereby certify that all the information given are true, correct, and complete statements. Further, I understand that the acceptance and approval of my application for admission are based on the aforestated information.

I therefore agree that, in case of post-verification yields information contrary to what is declared, my application shall be disapproved and I will be disqualified to apply.

Further, I hereby give my consent to the Pamantasan ng Lungsod ng Valenzuela that the abovementioned data may form part of its database that can be used for relevant purposes but may not be limited to profiling and research, and especially as a basis of data-driven decisions of the University.

NIMROD PRENSICA	Snimprod	4/30/2022
APPLICANT'S PRINTED NAME	SIGNATURE	DATE ACCOMPLISHED

PAGE 2 OF 2