

UNIVERSITY OF CALOOCAN CITY FRESHMEN ADMISSION FORM



| APPOINTMENT DETAILS: |
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| FRESHMEN APPOINTMENT CODE : 2003-1-000001 | | | | |
|--|----------------------------|-----------------------|-------------|--|
| CAMPUS : SOUTH | | | | |
| DATE | : Wednesday, March 1, 2023 | | | |
| TIME | : 09:00 - 12:00 | | | |
| THAL | . 03.00 12.00 | | | |
| PERSONAL INFORMATION: | | | | |
| NAME: | | AGE: | SEX: | |
| LAST NAME FIRST NA | AME MIDDLE NAME | | | |
| ADDRESS: | | | | |
| BARANGAY NUMBER: | ZONE: | DIS | STRICT: | |
| DATE OF BIRTH: | PLACE OF B | | | |
| CIVIL STATUS: | CITIZENSHIP: | RELIGIO | ON: | |
| MOTHER'S NAME: | | JPATION: | | |
| FATHER'S NAME: | | JPATION: | | |
| RESIDENCE TELEPHONE NO.: | | PHONE NO.: | | |
| GUARDIAN: | RELATION: | | | |
| ADDRESS: | | | | |
| EDUCATIONAL BACKGROUND: | \dagger_1 | - 4 5 6 5 4 5 4 4 7 5 | -n | |
| ELEMENTARY: | | EAR GRADUATE | | |
| HIGH SCHOOL: | | EAR GRADUATE | | |
| SENIOR HIGH SCHOOL: | | AR GRADUATE | =D: | |
| (PLEASE SPECIFY THE STRAN | | | | |
| COLLEGE (IF TRANSFEREE): COURSE FROM PREVIOUS SC | HOOL | | | |
| COUNSET NOW THE VIOUS SC | | | | |
| authentic, and that making false statements, furnishing falsified or forged documents in support thereof are punishable by law. SIGNATURE OVER PRINTED NAME | | | | |
| | | | | |
| Documents Submitted: ☐ Form 138 ☐ Good Moral ☐ ☐ Birth Certificate ☐ 2x2 Picture ☐ | Voter ID | Average: | Registrar: | |
| | oom No.: | Seat: | MIS: | |
| | | | | |
| | | | | |
| UNIVERSITY OF CALOOCAN CITY Accounting Office ORDER OF PAYMENT DATE: THE CITY TREASURER: Please accept the payment of | | | | |
| For payment of ENTRANCE EXAM of F | P100.00 | | | |
| GCASH Number | Transaction Number: | Ol | R Number: | |

RYAN N. ALEJO, CPA, DPA University Accountant