



PROVINCE OF ALBAY
Office of the Vice Governor
Legazpi City



THE G.R.E.X. EDUCATIONAL ASSISTANCE GRANT
Geared towards Excellence
APPLICATION FORM - SY 202__ - 202__

Instructions: Please Read General and Documentary Requirements and fill-in required information legibly. Do not leave an item blank. If item is not applicable, indicate with "N/A".

APPLICATION PERIOD:

PERSONAL INFORMATION																
1	Name	BEGINO	NESLINE MAE			LOGICA										
		(Last Name) <small>put extension, if any:i.e. Jr., II,III</small>	(First Name)			(Middle Name)										
2	Date of Birth	MAY 17, 2003	9a	Present Address	P-5 PINAGBOBONG TABACO CITY											
		(mm/dd/yyyy)														
3	Place of Birth	PINAGBOBONG TABACO CITY	9b	Zip Code	4511											
4	Sex	<input type="radio"/> Male <input type="radio"/> Female	10a	Permanent Address	P-5 PINAGBOBONG TABACO CITY											
5	Civil Status	<input type="radio"/> Single <input type="radio"/> Married								10b	Zip Code	4511				
		<input type="radio"/> Widowed <input type="radio"/> Separated														
		<input type="radio"/> Annuled <input type="radio"/> Others														
6	Citizenship	FILIPINO	11	Year Level:	FIRST YEAR COLLEGE											
7	Mobile Number	09773223742	11	School Last Attended	TABACO NATIONAL HIGH SCHOOL											
8	E-mail Address	nesbegino@gmail.com	12	School Address	PANAL TABACO CITY											
8	School Sector	<input type="radio"/> Private <input type="radio"/> Public	13	Is Applicant a Working Student?	<input type="radio"/> Yes <input type="radio"/> No											
FAMILY BACKGROUND																
		FATHER <input type="radio"/> Living <input type="radio"/> Deceased		MOTHER <input type="radio"/> Living <input type="radio"/> Deceased		LEGAL GUARDIAN										
14	Name	DENNIS BEGINO		MAGDALENA BEGINO												
15	Address	P-5 PINAGBOBONG TABACO CITY		P-5 PINAGBOBONG TABACO CITY												
16	Contact Number	09773074851		09164587415												
17	Occupation	PLUMBER		N/A												
18	Name of Employer	N/A		N/A												
19	Employer Address	N/A		N/A												
20	Highest Educational Attainment	HIGHSCHOOL GRADUATE		HIGHSCHOOL GRADUATE												
21	Monthly Income	P 10, 000		N/A												
III. EDUCATION																
22	School intended to or currently enrolled in:	BICOL UNIVERSITY TABACO CAMPUS														
23	School Address	TAYHI TABACO CITY														
24	Type of School	<input type="radio"/> Private <input type="radio"/> Public														
25	Degree Program	BACHELOR OF SCIENCE IN ENTREPRENEURSHIP														
26	Are you listed among any other sources of educational/financial assistance? <input type="radio"/> Yes <input type="radio"/> No If yes, Please Specify:			TYPE		GRANTEE/INSTITUTION/AGENCY										
<p>I hereby certify that the foregoing statements are true and correct. Any misinformation or withholding of information will automatically disqualify me from the OVG Educational Assistance Grant. I am willing to refund the financial benefits received if such information is discovered after acceptance of award.</p> <p>I hereby express my concnet for the Office of the Vice Governor - Province of Albay to collect, record, organize, update or modify, retrieve, consult, use, consolidate, block, erase or destruct my personal data as part of my information. I hereby affirm my right to be informed, object to processing, access and rectify, suspend or withdraw my personal data and be indemnified in case of damages pursuant to the provisions of the Republic Act No. 10173 of the Philippines, Data Privacy Act of 2012 and its corresponding Implemented Rules and Regulations.</p>																
Signature over Printed Name					Date Accomplished											
CHECKLIST OF REQUIREMENTS																
FRESHMEN					OLD STUDENT											
1		Fully Accomplished OVG-GREX EA Grant Application Form				Fully Accomplished OVG-GREX EA Grant Application Form										
2		Photocopy of Certificate of Good Moral Character				Certified Copy of Certificate of Grades (COG) from previous semester										
3		Certificate of Grades or Duly Certified Copy of SHS Report Card														
4		ALS Passer: Accredited and Equivalency Test Passer Certificate				Certified Copy of Certificate of Registration/Enrollment (COR) for incoming/present semester										
5		Certificate of Proof of Graduation (Diploma, Cert. of Grad., etc.)														
6		Affidavit of NON-GRANTEE of any other scholarship grants				Photocopy of School ID										
7		Certificate of Indigency from Barangay				Affidavit of NON-GRANTEE of any other scholarship grants										
8		Any Valid ID of Parent and/or Student				Certificate of Indigency from Barangay										
9																