



Republic of the Philippines
QUEZON CITY
YOUTH DEVELOPMENT OFFICE
SCHOLARSHIP RENEWAL FORM



Please mark your answers with an (X).

SCHOLARSHIP INFORMATION:

- ☐ SCHOLARSHIP FOR SENIOR HIGH SCHOOL STUDENTS
- ☒ SCHOLARSHIP FOR TERTIARY STUDENTS

Academic Scholarship ___ Rank 1-2 ___ Rank 3-10

☒ Economic Scholarship ☐ Youth Leaders Scholarship☐ Athletic and Arts Scholarship ☐ Specialized Courses Scholarship
- ☐ SCHOLARSHIP FOR MASTERS AND DOCTORATE STUDENTS
- ☐ SCHOLARSHIP FOR VOCATIONAL COURSES STUDENTS



Instruction: Fill in all required application. DO NOT leave an item blank. If item is not applicable, indicate "N/A".

I. PERSONAL INFORMATION					
Last name: CABAÑERO			Extension Name :		
First name: HAZEL			Sex: <input checked="" type="checkbox"/> Female <input type="checkbox"/> Male		
Middle name: AGUHAYON			Civil Status: Single		
Date Of Birth: (MM/DD/YEAR)	Place Of Birth:	Citizenship:	Religion:	Height: (m)	Weight: (kg)
11/5/2001	QUEZON CITY	FILIPINO	CATHOLIC	142	35
Present Address: #10 ARIES ST.		Barangay: San Bartolome	District: 5	City: QUEZON CITY	Zip Code: 1116
Permanent Address: #10 ARIES ST.		Barangay: San Bartolome	District: 5	City: QUEZON CITY	Zip Code: 1116
Active Email Address: hazel.cabanero2001@gmail.com		Active Mobile Number: 0910 621 8506			
Are you a member of indigenous community? No (If YES, please specify):		Are you a Person with Disability? No (If YES, please specify):		Are you a solo parent? No	
II. SCHOLARSHIP AND ENROLLMENT INFORMATION					
Scholars ID Number: 2020-901-0170			Students ID Number: 20-0525		
QC I.D. Number: 10100000448430			Registered QC ID Email Address: hazel.cabanero2001@gmail.com		
Current Educational Level: Tertiary/College				Number of units completed : 98	
Current School Name: QUEZON CITY UNIVERSITY - SAN BARTOLOME			Current School Contact No.: 28 8063 470	Current School Classification: LOCAL UNIVERSITY/COLLEGE (LUC)	
Grade/Year Level: 3RD YEAR	Current Course/Program or Track/Strand: BACHELOR OF SCIENCE IN ENTREPRENEURSHIP			Number of Units currently enrolled: 21	
<input type="checkbox"/> TRANSFEREE:		Previous School Name:		School Contact No.:	
<input type="checkbox"/> SHIFT COURSE/PROGRAM: Previous Course/Program:					
III. LIST OF SUBJECTS (Previous School Term/School Year)					
SUBJECT	REMARKS	NO. OF UNITS	GRADE		
Financial Management	PASSED	3.00	1.75		
Team Sports	PASSED	2.00	1.25		
Human Resources Management	PASSED	3.00	1.50		
Innovation Management	PASSED	3.00	1.75		
Managing of a Service Enterprise	PASSED	3.00	1.75		
Market Research and Consumer Behavior	PASSED	3.00	1.50		
Financial Reporting for SMEs	PASSED	3.00	3.00		
The Life and Works of Rizal	PASSED	3.00	2.00		
TOTAL NO. OF UNITS: 23		GWA: 1.81			





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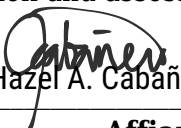


REPUBLIC OF THE PHILIPPINES)
QUEZON CITY)

SWORN ATTESTATION AND UNDERTAKING

I, HAZEL AGUHAYON CABAÑERO, Filipino citizen, and a resident of #10 ARIES ST., SAN BARTOLOME, QUEZON CITY after having been duly sworn to in accordance with law hereby attest that:

1. I am an applicant for the Quezon City Scholarship Program;
2. I understand the procedures, terms, and conditions of the Quezon City Scholarship Program as discussed by the QCYDO and underwent all procedural requirements necessary for the evaluation of my application;
3. All information provided are true and complete to the best of my knowledge and that I will immediately inform QCYDO of any updates/changes in information/documents submitted;
4. All documents submitted are original/authenticated copies, and information stated therein are true and correct and that in the event that any information or document provided/submitted is found out to be false/fraudulent, I will be fully responsible for its consequences, such as removal from the scholarship program without prejudice to the filing of any case in court/appropriate body;
5. In compliance with the Data Privacy Act of 2012, I hereby consent QCYDO to access, use, and process information submitted for the validation and assessment of my application for scholarship.


Hazel A. Cabañero

Affiant

Assisted by (if below 18 years old):

Father/Mother/Guardian

SUBSCRIBED AND SWORN to before this ____ day of _____ 202__ at Quezon City. Affiant exhibited to me his/her _____ ID with No. _____, that he/she is the same person who personally signed before me the foregoing attestation and acknowledged that he/she voluntarily executed the same.

Doc No: _____
Page No: _____
Book No: _____
Series of _____

THIS FORM IS NOT FOR SALE



QCG-YDO-SOI-F06-1.V03