

Category	Input Field Name	Type of Input
Personal Background	Course/Track	Text Input
Personal Background	Major/Strand	Text Input
Personal Background	Grade/Year Level	Text Input
Personal Background	First Name	Text Input
Personal Background	Middle Name	Text Input
Personal Background	Last Name	Text Input
Personal Background	Gender	Text Input
Personal Background	Date of Birth (mm/dd/yyyy)	Text Input
Personal Background	Age	Text Input
Personal Background	Place of Birth	Text Input
Personal Background	Civil Status: Single	Checkbox
Personal Background	Civil Status: Married	Checkbox
Personal Background	Civil Status: Widowed	Checkbox
Personal Background	Civil Status: Divorced	Checkbox
Personal Background	Civil Status: Separated	Checkbox
Personal Background	Religion	Text Input
Personal Background	Contact Number	Text Input
Personal Background	E-mail Address	Text Input
Personal Background	Permanent Address (Street/Barangay/City/Province)	Text Input
Personal Background	Present Address (Street/Barangay/City/Province)	Text Input
Personal Background	School Last Attended	Text Input
Personal Background	Location of School	Text Input
Personal Background	Previous Course/Grade	Text Input
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Family Background	Father's Name	Text Input
Family Background	Father's Occupation	Text Input
Family Background	Father's Educational Attainment	Text Input
Family Background	Father's Age	Text Input
Family Background	Father's Contact No.	Text Input
Family Background	Mother's Name	Text Input
Family Background	Mother's Occupation	Text Input
Family Background	Mother's Educational Attainment	Text Input
Family Background	Mother's Age	Text Input
Family Background	Mother's Contact No.	Text Input
Family Background	Parents' Permanent Address	Text Input
Family Background	Parents' Contact No.	Text Input
Family Background	Husband/Wife (If Married)	Text Input
Family Background	Spouse's Occupation	Text Input
Family Background	Spouse's Educational Attainment	Text Input
Family Background	Name of Guardian (if applicable)	Text Input
Family Background	Guardian's Age	Text Input
Family Background	Guardian's Contact No.	Text Input
Family Background	Guardian's Occupation	Text Input
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Other Information	Q1: Why did you choose this course/program?	Long Text Input
Other Information	Q2: Family Description: Harmonious	Checkbox

<b>Other Information</b>	Q2: Family Description: Conflict	Checkbox
<b>Other Information</b>	Q2: Family Description: Separated Parents	Checkbox
<b>Other Information</b>	Q2: Family Description: Parents Working Abroad	Checkbox
<b>Other Information</b>	Q2: Family Description: Others (Specify)	Checkbox + Text Input
<b>Other Information</b>	Q3: Living Arrangement: At home	Checkbox
<b>Other Information</b>	Q3: Living Arrangement: Boarding house	Checkbox
<b>Other Information</b>	Q3: Living Arrangement: Relatives	Checkbox
<b>Other Information</b>	Q3: Living Arrangement: Friends	Checkbox
<b>Other Information</b>	Q3: Living Arrangement: Others (Specify)	Checkbox + Text Input
<b>Other Information</b>	Q4: Living Condition: Good environment for learning	Checkbox
<b>Other Information</b>	Q4: Living Condition: Not-so-good environment for learning	Checkbox
<b>Other Information</b>	Q5: Physical/Health Condition: No	Checkbox
<b>Other Information</b>	Q5: Physical/Health Condition: Yes (Specify)	Checkbox + Text Input
<b>Other Information</b>	Q6: Psych. Treatment: No	Checkbox
<b>Other Information</b>	Q6: Psych. Treatment: Yes	Checkbox
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<b>GCS Seminars/Activities</b>	Avail: Adjustment	Checkbox
<b>GCS Seminars/Activities</b>	Avail: Building Self-Confidence	Checkbox
<b>GCS Seminars/Activities</b>	Avail: Developing Communication Skills	Checkbox
<b>GCS Seminars/Activities</b>	Avail: Study Habits	Checkbox
<b>GCS Seminars/Activities</b>	Avail: Time Management	Checkbox
<b>GCS Seminars/Activities</b>	Avail: Tutorial with Peers (Specify Subject/s)	Checkbox + Text Input
<b>GCS Seminars/Activities</b>	Avail: Others (Specify)	Checkbox + Text Input
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<b>Awards and Recognition</b>	Award 1: Name of Award	Text Input
<b>Awards and Recognition</b>	Award 1: School/Organization	Text Input
<b>Awards and Recognition</b>	Award 1: Year	Text Input
<b>Awards and Recognition</b>	Award 2: Name of Award	Text Input
<b>Awards and Recognition</b>	Award 2: School/Organization	Text Input
<b>Awards and Recognition</b>	Award 2: Year	Text Input
<b>Awards and Recognition</b>	Award 3: Name of Award	Text Input
<b>Awards and Recognition</b>	Award 3: School/Organization	Text Input
<b>Awards and Recognition</b>	Award 3: Year	Text Input
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<b>Declaration/Signature</b>	Signature over Printed Name	Text Input/Signature Field
<b>Declaration/Signature</b>	Date	Text Input