

REPUBLIC OF THE PHILIPPINES  
DEPARTMENT OF EDUCATION  
Region III – Schools Division of Bulacan

**TAAL HIGH SCHOOL**

Macam St., Taal, Bocaue, Bulacan

**CERTIFICATE / REGISTRATION OF ENROLLMENT**

**I. STUDENT INFORMATION**

PSA Birth Certificate No.: \_\_\_\_\_

Learner Reference Number (LRN): \_\_\_\_\_

Full Name (Last, First, Middle, Extension): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_

Place of Birth: \_\_\_\_\_

Mother Tongue: \_\_\_\_\_

Complete Address: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Mother's Contact Number: \_\_\_\_\_

Guardian's Name (if applicable): \_\_\_\_\_

Guardian's Contact Number: \_\_\_\_\_

**II. OPTIONAL INFORMATION**

Indigenous People (IP):  Yes  No

Disability (Specify if any): \_\_\_\_\_

4Ps Beneficiary (Household ID No.): \_\_\_\_\_

**III. AGREEMENT ON SCHOOL RULES AND REGULATIONS**

I hereby agree to follow all school rules and regulations of Taal High School.  
I understand that violation of the following may result in disciplinary action:

- Disrespecting teachers and school personnel
- Failure to wear the prescribed school uniform
- Smoking or vaping inside school premises
- Vandalism or destruction of school property
- Gambling inside school premises
- Drinking alcoholic beverages
- Bringing sharp objects or weapons
- Extortion or unauthorized collection of money
- Fighting or bullying
- Possession, use, or sale of illegal drugs
- Joining fraternities/sororities and participating in any form of hazing

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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