

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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