



APPLICATION FORM FOR OUTBOUND STUDENTS

I. PERSONAL INFORMATION

FAMILY NAME	Milabo				
GIVEN NAME	Aimee Maricris				
MIDDLE NAME	Avendano				
GENDER	Female	NATIONALITY	Filipino		
BIRTHDATE	11/23/1997	AGE	20		
BIRTHPLACE	Manila	NATIONALITY	Filipino		
PASSPORT NO.	789456	VALIDITY DATE	2030-02-23	DATE OF ISSUANCE	2013-03-31
MAILING ADDRESS	1130-C Don Quijote St. Sampaloc Manila				

EMAIL ADDRESS	aimee@gmail.com		
TELEPHONE NUMBER	+63 2-406-1611	MOBILE NUMBER	+63 974-887-6512

II. EDUCATIONAL BACKGROUND

COLLEGE/FACULTY/INSTITUTE	IICS
DEGREE PROGRAM	BS. IT
YEAR LEVEL	4

III. GUARDIAN'S INFORMATION

FATHER'S NAME	albert milabo		
OCCUPATION/POSITION	Support staff	COMPANY	UST
ADDRESS	11ldjhfkjhb		
CONTACT NUMBER	+63 2-406-1611	EMAIL ADDRESS	albert@gmail.com
ANNUAL INCOME	PHP 250,001 - PHP 500,000		

MOTHER'S NAME	tess milabo		
OCCUPATION/POSITION	Support Staff	COMPANY	UST
ADDRESS	1fsdgwsergvawq		
CONTACT NUMBER	+63 2-406-1611	EMAIL ADDRESS	tes@gmail.com
ANNUAL INCOME	PHP 135,001 - PHP 250,000		



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IV. COUNTRY & UNIVERSITY

COUNTRY	Australia
UNIVERSITY	Australian Catholic University

PROPOSED PROGRAM	Information Technology
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COURSES	1. CS 123
	2. IT 205
	3. IS 205
	4. math103
	5. IT 204

Applicant's Signature Over Printed Name

Date

Assessed by:

Program Chair

Signature and Date

Certified by:

International Relations Coordinator

Signature and Date

Endorsed by:

Dean

Signature and Date