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**SAINT JOHN BOSCO COLLEGE OF NORTHERN LUZON, INC.**

National Highway Lingsat, San Fernando City, La Union

**FINANCIAL ASSISTANCE SCHOLARSHIP**

**DEGREE**

Period Applying for SY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1st Semester

2nd Semester

Summer

New Applicant

Renewal

I. PERSONAL INFORMATION

Name of Recipient:

Student No. : Contact Number :

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

E-mail Address : FB Account:

Date of Birth : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birth place :

Gender : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Religion :

EDUCATION BACKGROUND

|  |  |  |  |
| --- | --- | --- | --- |
| LEVEL | NAME OF SCHOOL | YEAR GRADUATE | HONORS RECEIVED |
| Pre- school |  |  |  |
| Elementary |  |  |  |
| Junior High School |  |  |  |
| Senior High School |  |  |  |
| College |  |  |  |
| Tvet |  |  |  |

II. FAMILY BACKGROUND

Father : Mother :

Address : Address :

Contact Details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact Details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupation: Occupation:

Employment:­­­­­­­­­­­­­­­­­ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Employment:­­­­­­­­­­­­­­­­­ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Highest Educational Attainment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Highest Educational Attainment:

Siblings

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| No. | Name | Age | Course/Year level | School Enrolled |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| 5 |  |  |  |  |

Please write in the box below the reason/s why you should be given a scholarship.

|  |
| --- |
|  |

NOTE: Any false statements made here will be a ground for revocation of whatever scholarship is given by virtue of this application.

Applicant’s Signature over Printed Name Parent/Guardian Signature over Printed Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Date

Procedures:

Submit fully accomplished form together with all the requirements

Attend the scholarship interview with your child

Once the list of approved scholars is released, all recipients are required to process their claims within three (3) weeks, otherwise it will be forfeited

Submit properly accomplished scholarship recipient profile to Ms. J. Dangalan at the Registrar’s Office.

Attend the scheduled meeting of scholars