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

National Highway Lingsat, San Fernando City, La Union

**HON. RODOLFO M. ABAT – COLLEGE PRESIDENT’S SCHOLARSHIP PROGRAM   
FOR SENIOR HIGH SCHOOL**

Academic Year of Entry : 2024-2025

**PERSONAL INFORMATION**

Name of Recipient :

Student No : Contact Number :

Address :

E-mail Address : FB Account:

Birth date : Birth Place:

Gender : Religion:

**EDUCATION BACKGROUND**

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

**FAMILY BACKGROUND**

Father : Mother :

Address : Address :

Occupation: Occupation:

Highest Educational Attainment: Highest Educational Attainment:

Siblings:

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **Age** | **Course/Year Level** | **School Enrolled** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

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

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|  |

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

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

Date

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

Parent/Guardian Signature over Printed Name

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

Date

*Revised 06/2019*