



ALLIANCE OF  
COMPUTER SCIENCE STUDENTS  
UNIVERSITY OF THE PHILIPPINES LOS BAÑOS

**Instructions:** Fill-up the form as accurately as you can. Avoid erasures and write legibly. Please use the space provided for each item. Encircle the item that corresponds to your answer. Write n/a if the field is not applicable. Remember, this is an official document of this organization.

**Name:** \_\_\_\_\_  
(Surname) (Given Name) (Middle Name) (Suffix) (Nickname)

**Date of Birth:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Place of Birth:** \_\_\_\_\_ **Age:** \_\_\_\_\_ **Sex:** M / F  
(MM) (DD) (YYYY)

**Citizenship:** \_\_\_\_\_ **Blood Type:** A / B / O / AB \_\_\_\_\_ **Height (ft.):** \_\_\_\_\_ **Weight (kg):** \_\_\_\_\_

**Contact Numbers:** \_\_\_\_\_ **Email Address (GMAIL):** \_\_\_\_\_

**Home Address:** \_\_\_\_\_

**College Address:** \_\_\_\_\_

**Elementary ->Name of School:** \_\_\_\_\_ **Year graduated:** \_\_\_\_\_

**Highschool ->Name of School:** \_\_\_\_\_ **Year graduated:** \_\_\_\_\_

**College -> Student Number:** \_\_\_\_\_ **Year in curriculum:** Sophomore / Junior / Senior

**-> Adviser:** \_\_\_\_\_

**Mother ->Full Name:** \_\_\_\_\_ **Occupation:** \_\_\_\_\_

**Father ->Full Name:** \_\_\_\_\_ **Occupation:** \_\_\_\_\_

**Number of brothers:** \_\_\_\_\_ **Number of sisters:** \_\_\_\_\_

**Allergies:** \_\_\_\_\_

**Medications:** \_\_\_\_\_

**Are there any health or medical problems that we should be concerned with?**

\_\_\_\_\_

**Who can we contact in case of emergency? Please indicate his or her name, contact number and relationship to you.**

\_\_\_\_\_

I certify that the above information are true and correct as to the best of my knowledge.

\_\_\_\_\_  
Signature over Printed Name Date signed



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**Instruction:** Answer the following questions as specific and accurate as possible. Please use the space provided for. Remember, this is an official document of this organization.

**What are your strengths?**

1. **In academics:**

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2. **As a student:**

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3. **As a person:**

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**What are your weaknesses?**

1. **In academics:**

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2. **As a student:**

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3. **As a person:**

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I certify that the above information are true and correct as to the best of my knowledge.

\_\_\_\_\_  
Signature over Printed Name Date signed