

CENTRO ESCOLAR UNIVERSITY

Manila * Makati * Malolos

ENTRANCE SCHOLARSHIP APPLICATION FORM

Attach photocopies of scholastic record and Principal's certification, with school seal, on honors obtained upon graduation and the total number of the members of the graduating class.

Name of Former School**Address**

NAME _____
(Surname) (First) (Middle) Date

Date of Birth : _____ **Place of Birth :** _____

Home Address: _____

City Address (if any): _____

Telephone No./Fax No./E-Mail: _____

Parents:

Father _____ **Mother** _____

Occupation: _____ **Occupation:** _____

Where Employed: _____ **Where Employed:** _____

Annual Income: _____ **Annual Income:** _____

Course you plan to pursue at CEU: _____ **Rank in Relation to the Total No. of Graduating Students:** _____

Honors Received: _____ **Gen. Weighted Ave.** _____

AWARDS AND SCHOLARSHIPS RECEIVED:

SCHOOL/ORGANIZATION

AWARDS AND SCHOLARSHIPS RECEIVED:	SCHOOL/ORGANIZATION

Name of school and other organizations (Social, Civic, Religious) of which you were or are a member and the positions you occupied or are now occupying:

ORGANIZATION**POSITION**

ORGANIZATION	POSITION

Signature of Applicant

Date

Copies to: Dean/Program Head, OUR/RegistrarROF 014
09/01/2016