



Foundation of
Balay Pasilungan

Foundation of Balay Pasilungan, Inc.

817 Datu Bago Street

(P.O. Box 80718

Bankerohan, Davao City - Philippines

Tel. 221-2922 Email: balaypasilungan@yahoo.com

ADMISSION SLIP

Name: Sam sads

Age: 0 Sex: Male

Address: asdasdadad

Date/Place of Birth: August 20, 2017/

Date Admitted: August 20, 2017

Distinguishing Marks: a. Tattoo / Scars _____

b. Height: AB+ c. Weight: AB+

Put (/) on documents submitted:

- | | | | |
|------------------------|-----|-------------------|-----|
| 1. SCSR | () | 3. School Records | () |
| 2. Medical Certificate | () | 4. Others | () |

General Impression upon admission:

Action/s Taken:

Name and Signature of Referring Party

Admitting Staff Party

Designation/ID No./Contact No.

Designation

Complete Address

Date/Time

Noted By:

DIRECTOR NAME Executive Director