



Siena College Quezon City, Inc.

INTEGRATED BASIC EDUCATION

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SENIOR HIGH SCHOOL PRE-ENROLLMENT FORM

Academic Year 20__ - 20__

Please accomplish and submit this form together with the other required documents at the Registrar's Office.

Please check your program preference: (see choices)

ACADEMIC TRACK :

- Science, Technology, Engineering and Mathematics (STEM)
- Accountancy, Business and Management (ABM)
- Humanities and Social Sciences (HUMSS)

TECHNICAL-VOCATIONAL TRACK :

- Housekeeping
- Bread and Pastry Production
- Food & Beverage Services

PERSONAL INFORMATION

Last Name: _____ First Name: _____ Middle Name: _____
 City Address: _____
 Provincial Address: _____
 Date of Birth: _____ Place of Birth: _____ Nationality: _____
 Religion: _____ Civil Status: _____ Gender: Male Female Age: _____
 Email Address: _____ Telephone Number: _____ Mobile Number: _____

SCHOLASTIC BACKGROUND

Junior High School:

Name of School	Address	From Grade	To Grade	School Year

Grade School:

Name of School	Address	From Grade	To Grade	School Year

FAMILY DATA

Father	Mother
Father's Full Name(Given, Middle, Surname & Extension Name): _____	Mother's Full Name(Given, Middle, Surname & Extension Name): _____
Tel. & Mobile Number: _____	Tel. & Mobile Number: _____
Educational Attainment: _____	Educational Attainment: _____
Occupation: _____	Occupation: _____

Name of Guardian: _____ Tel. & Mobile Number: _____
 City Address: _____

I hereby attest to the completeness and accuracy of all the information supplied in this form. I understand that withholding of information or giving false information will make me ineligible for admission, or may jeopardize my continued stay after admission has been granted.

 APPLICANT'S SIGNATURE ABOVE PRINTED NAME

DATE: _____

Application Requirements and Procedure:

1. Completely fill-out the Application Form.
2. Submit the following credentials together with the Application Form at the Registrar’s Office.
 - a. Clear photocopy of the following:
 - _____ -NSO Birth Certificate
 - _____ -Baptismal Certificate (If Roman Catholic)
 - _____ -Alien Certificate of Registration (ACR) for foreign applicants.
 - b. Proof of Candidacy for Completion.
 - _____ -Current report card which includes, at least the grades in the 2nd and 3rd grading period with an average of 80% or higher, a department grade not lower than 80% or its equivalent. If grades are not yet available, applicants may submit Certificate of Enrollment.
 - c. Certificate of Good Moral Character
 - d. Three (3) pcs. Latest Pictures, 1”x 1” (colored-white background)

Assessed & Received by:

Checked & Received by:

Registrar’s Office
Signature over Printed Name

Guidance & Testing Center
Signature over Printed Name

3. Pay the non-refundable admission fee of Three Hundred and Fifty Pesos (Php350.00) at the Accounting Office.

_____ Date

_____ Receipt No.

_____ Teller

4. Proceed to the Guidance & Testing Center for the schedule of examination & interview.
Entrance Test Results will be released at the Guidance and Testing Center considering all the requirements submitted.
4. a No examination and interview for Grade 10 completers of Siena College Quezon City, Inc. , proceed to Step Number 6.

_____ Test Schedule

_____ Guidance Staff

5. Proceed to the Integrated Basic Education Department – Area Team Leaders Office for the interview with parent/ guardian on _____.

_____ Date of Enrollment

_____ Admission Committee
Signature over Printed Name

6. Proceed to the Registrar’s Office and accomplish the registration form legibly.
(Bring all the documents at the Registrar’s Office for Enrollment.)

Scholarships Offered:

- ESC Grantee from Private School may avail Gov’t Assistance to Students and Teachers in Private Education (GASTPE) of Php 18,000.00.
- For Senior High School Applicants from public school, initial down payment starts at Php 5,000.00 and applicants may avail Gov’t Assistance to Students and Teachers in Private Education (GASTPE) of Php 22,500.00.

Admissions:

Truck line: 415-12-80/ 414-1155 to 59
www.scqc.edu.ph

Loc. Number: 103 Registrar * 207 Principal’s Office
112 Guidance

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Placement Card
Academic Year 20__-20__

Grade & Section _____

Name _____
(Surname) (First Name) (M.I.)

Address _____ Brgy _____

Tel/CP # _____ Date of Birth _____ Place of birth _____

Father’s Name _____ Mother’s Name _____

Occupation _____ Occupation _____

Guardian’s Name _____ Relationship _____

*Note: Please bring and submit this card to your Teacher- Adviser
as admission pass on the first day of school .*

Date of Registration _____