

## **Basic Education Department**

P. Prieto St., Batangas City, Batangas Tel. No. (043) 723-2663 loc. \_\_\_ Website: www.goldengatecolleges.net Email: \_\_\_

Attached 2 X 2 Picture here

STUDENT'S DATA QUESTIONNAIRE/APPLICATION FORM																								
Applying for Grade Level :						Application Date:																		
SHS Program Preference: For grade 11 and 12 only.  ABM (Accountancy and Business Manager																								
☐ HUMSS (Humanities and Social Sciences)						_	· · · · · · · · · · · · · · · · · · ·																	
GAS (General Academic Strand)					003)	CARE (Caregiving)																		
<u> </u>							and Mathematics) HOUSE (Housekeeping) COMP (Computer Programming)																	
PERSONAL INFO	RMAT	ION:	Prir	nt legi	bly. N	lark ap	prop	riate	boxe	s with	า "X".													
LAST NAME:																								
FIRST NAME:																								
MIDDLE NAME:															NΑ	ME E	XTE	NSION	۷ (E.	.G. Jr.,	Sr.):	:		
SEX: Male Female CITIZENS						ZENSI	-IIP:		l		L		RE	ELIGION:							] ,	ـــا :AGE		
DATE OF BIRTH (mm/dd/yyyy):							PLACE OF BIRTH:						CIVIL STATUS:				ΓUS:							
PRESENT ADDRESS:														ZIP CODE				DE:	:					
PERMANENT ADDRESS:													POSTAL CODE:											
TELEPHONE NO.:						MOBILE NO.:						EMAIL (if any):												
FAMILY BACKGROUND (Use separate sheet if necessary)																								
		NAME A				AG	AGE CITIZENSHIP CIVIL						HIGHEST EDUCATIONAL O				OC	CCUPATION		N	MONTHLY			
		TV WILL				1.0					S	STATUS			ATTAINMENT							INCOME		
FATHER:																								
MOTHER:																								
SIBLINGS:																								
PARENTS' ADDRI	ESS: [				/F:II				· · · · · · · · · · · · · · · · · · ·	<i>r</i> -		r		0		,								
					(1-111 -	- out o	nıy tnı	s por	tion if a	аррис	ant is	IIVIN	g with	Gua T	raian	)								
GUARDIAN'S NAME:					RE						RELATIONSHIP:													
OCCUPATION:															CON	TACT	ΓNC	).:						
ADDRESS:																								
PERSON TO BE N	NOTIFI	ED II	N C/	ASE C	OF EM	1ERGI	ENCY	/:																
CONTACT NO.: _																								

EDUCATIONAL BACKGROUND											
	NAME OF SCH	OOL	SCHO	OL ADDRESS	INCLUSIVE DATES	GEN. AVE.					
PRESCHOOL:											
ELEMENTARY:	<u></u>										
JUNIOR H.S.:											
SENIOR H.S.:											
HONORS/AWARDS	RECEIVED:										
HOBBIES/TALENTS	S:										
SOCIAL ACTIVITY/	AFFILIATION										
NAME OF (	ORGANIZATION		POSITIO	N	INCLUSIVE YEARS						
Any health problem that may affect the performance in school:  Are you under a medication maintenance program? Yes No If yes, please specify:  Physical Deformities Vision Hearing Others (please specify):											
Why I chose to enro	ll at Golden Gate College	es 									
this application may	be checked against origi	nal documents	and that giv	ing or withholding or o	any on all of the informati giving false information wil es and regulations of the 0	I make me Golden Gate					
To be filled out by GG	C Staff.										
SUBMITTED CREDENTIALS  [ ] Form 138 (Report Card)  [ ] Certificate of Good Moral Character  [ ] Honorable Dismissal  [ ] Photocopy of Marriage Contract (if married)  [ ] Photocopy of NSO Authenticated Birth Certificate  [ ] Pictures  [ ] NCAE Results											
Interviewed by: Sign	ature over Printed Name	/Date		Admission Status: [ ] Accepted							
Designation: Received by:											