

EMILIO AGUINALDO COLLEGE

1113-1117 San Marcelino St, Paco, Manila 1007, Philippines www.eac.edu.ph (02) 8521-2710

Virtue 🔶 Excellence • SERVICE

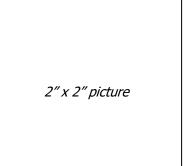


High School Application Form

Please fill out/tick appropriate boxes for information required. Indicate "N.A." if information is not applicable.

Application for:

JHS Level:	Grade 7 Grade 8 Grade 9 Grade 10	
SHS Level:	Grade 11 Grade 12	
	[] Academic Track:	
	[] ABM (Accounting, Business and Management)	
	[] HumSS (Humanities and Social Sciences)	
	[] STEM (Science, Tech., Engineering and Math)	
	 Technical-Vocational-Livelihood (TVL) Track: 	
	[] Programming	
	[] Food and Beverage Services NC II/ Housekeeping NC II	
	[] Housekeeping NC II	
	[] Sports Track	
C - I - - I - V		



School Year: ___

I. PERSONAL INFORMATION

I. PERSONAL INFORMATION		LRN:			
Last Name:	First Name:	Middle Name:			
Gender:	Religion:	Nationality:			
Date of Birth:	Place of Birth:	Age:	Civil Status:		
House/Unit No., Street, Barangay:					
City/Municipality:	Province:	Zip code:			
Landline No:	Mobile No:	Email:			

II. EDUCATIONAL BACKGROUND

School Name and Address	Year graduated/last attended
Elementary:	
Junior High School:	
Senior High School:	

III. PARENTS' INFORMATION

	Father	Mother
Parent's Name:		
Home Address:		
Occupation:		
Company Name		
and Address		
Contact No.		

Fill this out if you are staying only with your guardian and not with your parents.					
Guardian's Name:		Age:	Occupation:		
Home Address:					
Tel. No:	Mobile No:		Email:		

IV. Privacy Policy and Declarations (for parent/guardian of the applicant)

By ticking/checking the box below for "I agree" and submitting this form to the EAC Admissions Office, I voluntarily agree to the Emilio Aguinaldo College (EAC) Privacy Policy (https://eac.edu.ph/privacy-policy/) and declare that:

- 1. I am of legal age;
- 2. I am the parent/ guardian of the applicant;
- 3. All the information I have provided in this form are true and correct;
- 4. I understand that withholding of information or giving of false information may nullify the application for admission of my child or may jeopardize his/her continued stay after admission has been granted to him/her;
- 5. I am giving my consent to the collection, use, processing, recording, storage, blocking, destruction, and disclosure of the information I have provided for legitimate purposes in order to administer and evaluate the eligibility of my child's application for admission at EAC.



Name of Student:	
Name of Parent/Guardian:	
Date Accomplished	



