



STUDENT'S REGISTRATION FORM

INSTRUCTIONS:

1. Fill out in PRINT all the needed information in this form using only BLUE ink.
2. Write the name of the student as it appears in the Birth Certificate.
3. The student applicant and parent or guardian should not forget to sign this over their printed name as indicated at the bottom part.
4. For assistance, feel free to ask the Registrar's Office personnel. Thank you.

**PASTE HERE
1 X 1 COLRED
ID picture**

DATE: _____ SCHOOL YEAR : _____

GRADE /YEAR LEVEL : _____ () NEW STUDENT () OLD STUDENT

FAMILY NAME _____ FIRST NAME _____ MIDDLE NAME _____

PRESENT ADDRESS : _____

PERMANENT ADDRESS: _____

TELEPHONE NO. _____ EMAIL ADDRESS: _____

DATE OF BIRTH : _____ PLACE OF BIRTH : _____

SEX: _____ AGE: _____ RELIGION: _____ CITIZENSHIP: _____ IF ALIEN, ACR NO : _____

SCHOOL LAST ATTENDED: _____ TEL NO. _____

PREVIOUS SCHOOL'S ADDRESS _____

FATHER'S NAME : _____ OCCUPATION: _____

EDUCATIONAL ATTAINMENT: _____ SCHOOL/UNIVERSITY: _____

BUSINESS ADDRESS: _____

TELEPHONE/MOBILE NO. _____ EMAIL ADDRESS: _____

MOTHER'S NAME : _____ OCCUPATION: _____

EDUCATIONAL ATTAINMENT: _____ SCHOOL/UNIVERSITY: _____

BUSINESS ADDRESS: _____

TELEPHONE/MOBILE NO. _____ EMAIL ADDRESS: _____

GUARDIAN'S NAME : _____ OCCUPATION: _____

EDUCATIONAL ATTAINMENT: _____ SCHOOL/UNIVERSITY: _____

BUSINESS ADDRESS: _____

TELEPHONE/MOBILE NO. _____ EMAIL ADDRESS: _____

We certify that the above information is true and correct and hereby authorize St. Mary of the Woods School to verify such information from whatever sources it may consider appropriate. We understand that we may be requested to submit requirements to facilitate the enrollment policy to this institution and agree with the rules and regulations forth in the student Handbook.

SIGNATURE OF PARENT OR GUARDIAN OVER PRINTED NAME

SIGNATURE OF THE STUDENT APPLICANT OVER PRINTED NAME

Noted by:

Approved by:

RENANTE L. TEJANO
Registrar

PRINCIPAL