Scholarship and Financial Assistance Qualifications

APPLICANT MUST:

- Possess a GWA of 80% with no grades in any subjects below 75%
- Conduct grade of A to B- for both Chinese and English Instructions

菲律濱中正學院

Chiang Kai Shek College

1274 Padre Algue St., Tondo, Manila Scholarships and Grants Office

ALL ENTRIES/SIGNATURE	IN
THIS FORM MUST BE	
ORIGINAL	

Recent 1 x 1 Photo

OFFICE OF THE PRESIDENT FINANCIAL ASSISTANCE PROGRAM School Year _____

Instruction: Write clearly in the box provided or check the box for the appropriate answer. Avoid erasures.

PLEASE ANSWER ALL ITEMS IN PRINT.

NEW	
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RENEWAL (Answer Part I & Part II ONLY)

PART I: APPLICANT'S INFORMATION

姓名	Name:						
	(Surname)		(First N	ame)	(Middle Name)	(Gender)	(Incoming Gr. & Sec.)
					La	itest Report Ca	rd
Adress					- SY	英文	中文
Address					51	- (Englis	h) (Chinese)
住址				(Contact No/s.)	Grade & Section	n:	
Name of F	[] Rent, monthly rental Php	[] Own	[] living wit	h relatives/guardian	General. Averag	je :	
	/Awards Received:				Conduct Grade):	
Has the a	pplicant received failing grade/s in any subject/s	[]YES	[] NO	If yes, specify wha Subject:	t Grade Level:	Grade Receiv	/ed

PART II: FAMILY BACKGROUND

Status of Parents: [] Living Togethe	r []Separated []Sing	gle Parent	Deceased F	Parents	[]Father [] Mother	
Father's Name:			Mother's Name:			
		(Age)				(Age)
Occupation:	Annual Income (Gross	6)	Occupation:		Annual Income (Gross)	
Name of the Company or Business/Emplo	ver:		Name of the Company or Business/	'Employ	ver:	
Company /Business Address:			Company /Business Address:			

Name of Sister or Brother	Gender	Age	Occupation / If Student indicate the grade level	Name of Company / Name of School

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PART III: FINANCIAL STATUS (Please answer thoroughly) OTHER DATA Indicate Does your family have any of Type/ Date Combined Annual Pay (father, mother) Php how the following appliances? Model acquired many Income from Business Laptop/Computer **Retirement Benefits/Pension** Gadget (Cellphones/tablet) Commissions Airconditioner TV set /DVD player/Home Theater Support from Relative/s Total Monthly Income: Php Camera/Video camera Php Washing Machine **Estimated Family Expenses: monthly**

Cars and other motor vehicles owned and regularly used by the family

Make / Yr / Model	Date Purchased	Amount of Purchase	Balance to be paid

I hereby certify that the above information is true and correct. Any misinterpretation of facts will render this form invalid and will immediately disqualify my application to this Scholarship and Financial Assistance Program.

Deadline for Submission: _____

	TO BE FILLED-OUT BY THE SCHOLARSHIP OFFICE HEAD	
APPLN. NO.		Father's / Mother's Signature over Printed Name
Photo	осору of Report Card F138 (<u>Previous Year Level)</u>	Date Submitted:
Photo	pcopy of NSO Birth Certificate	
Certif	icate of Indigency from their Barangay (original and photocopy)	
	t Income Tax Retum or BIR Cerificate of Tax nption of BOTH parents (original and photocopy)	
Overs	seas Employment Certificate (if OFW/OCW) (original and photocopy)	
	t 3 months Meralco (electric) Bill AND Water Bill (original and photocopy) dorsement letter from CKS College Board of Trustees or Alumni President/Alumni Vice-President	
Assessed by : $_$	Printed Name/Signature	
	office may also require submission of additional documents other than those	
	ed above should there be a need for it.	
* 0	riginal copies will be returned once the documents have been verified \cdot	
SKETC	CH OF ADDRESS	-