



COLLEGE OF SAN BENILDO-RIZAL

College Campus: Sumulong Highway, Antipolo City, Rizal 1870
Tel. Nos. +632-660-8107/584-6382 www.sanbenildo.edu.ph

2 x 2
Picture
White background

APPLICATION FORM COLLEGE DEPARTMENT SY: 2014-2015

Application is made as a

Freshman Student Transfer Student Others: _____

For the 1st Semester 2nd Semester 3rd Semester

PERSONAL DATA

PLEASE WRITE LEGIBLY.

Gender: M F

NAME:

(Last) (First) (Middle) (Nickname)

Age _____ Date of Birth ____ / ____ / ____ Place of Birth _____ Birth Order: _____
month day year

Height _____ Weight _____ Citizenship _____ Religion _____ Civil Status _____

Email address _____ Tel.No. _____ Mobile No. _____

Mailing Address: _____ Postal Code _____

Permanent Address: _____ Postal Code _____

PROGRAM PREFERENCES

Bachelor of Science in **ENTREPRENEURSHIP** (BS-ENT)

Bachelor of Science in **INFORMATION TECHNOLOGY** (BS-IT)

Bachelor of Science in Business Administration: Major in **FINANCIAL MANAGEMENT** (BSBA-FM)

Bachelor of Science in Business Administration: Major in **MARKETING MANAGEMENT** (BSBA-MM)

***NEW** -Bachelor of Science in **TOURISM MANAGEMENT** (BS-TM)

***NEW** -Bachelor of Science in **TRAVEL MANAGEMENT** (BS-TrM)

Bachelor of **ELEMENTARY EDUCATION** (BEED)

Bachelor of Secondary Education: Major in **BIOLOGICAL SCIENCE** (BSE-BIO)

Bachelor of Secondary Education: Major in **ENGLISH** (BSE-ENG)

Bachelor of Secondary Education: Major in **MATHEMATICS** (BSE-MAT)

Bachelor of Secondary Education: Major in **PHYSICAL SCIENCE** (BSE-PHY)

Degree Program

Degree Code

1st Choice

2nd Choice

3rd Choice

Are you applying for a scholarship? No Yes

FOR OFFICIAL USE. DO NOT WRITE BELOW THIS LINE.

Course _____ Student No. _____

Testing Date _____ OR No. _____ OR Date _____

Action Taken AA AR For Reconsideration

Have you, at any time, applied at any College/University, Tertiary School(s)?

No Yes (Kindly answer the questions below)

| School Name | Degree Program Applied to |
|-------------|---------------------------|
| 1 | |
| 2 | |
| 3 | |

EDUCATIONAL BACKGROUND

| Grade Level | Year Attended | Name & Address of School |
|-------------|---------------|--------------------------|
| Nursery | | |
| Kinder | | |
| Gr.1 | | |
| Gr.2 | | |
| Gr.3 | | |
| Gr.4 | | |
| Gr.5 | | |
| Gr.6 | | |

Honors Received: _____

| | | |
|---------------|--|--|
| High School 1 | | |
| HS 2 | | |
| HS 3 | | |
| HS 4 | | |

Honors Received: _____

| | | |
|-----------------|--|--|
| Collegiate yr.1 | | |
| Yr. 2 | | |
| Yr. 3 | | |
| Yr. 4 | | |

Honors Received: _____

Skills, Talents & Hobbies: _____

FAMILY BACKGROUND

Marital Status of Parents:

Married & Living Together
 Married but Separated
 Annulled
 Step-Father/Mother
 Spouse Abroad
 Single Parent
 Widowed
 Others, pls. specify _____

While in school, you'll be staying with:

Whole Family
 Father
 Mother
 Grandparents
 Boarding House
 Others, pls. specify _____

SIBLING/S INFORMATION (List from eldest to youngest)

| Name | Birthdate | Age |
|------|-----------|-----|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

| FATHER | NAME | MOTHER |
|--------|------------------------|--------|
| | NAME | |
| | DATE OF BIRTH | |
| | CITIZENSHIP | |
| | HOME TEL. NO. | |
| | MOBILE PHONE NO. | |
| | HOME ADDRESS | |
| | EMAIL ADDRESS | |
| | OCCUPATION | |
| | EMPLOYER/COMPANY | |
| | BUSINESS TEL. NO | |
| | BUSINESS ADDRESS | |
| | EDUCATIONAL ATTAINMENT | |
| | LAST SCHOOL ATTENDED | |

Name of Guardian: _____

Address: _____

Tel. No.: _____ Mobile No.: _____ Email add: _____

For Married Applicants, Name of Spouse: _____

Address: _____

Tel. No.: _____ Mobile No.: _____ Email add: _____

ADDITIONAL BACKGROUND INFO

Do you have any disability or medical or psychological condition (e.g. asthma, dyslexia, ADD, ADHD, etc.) which may have important bearing on your schooling at CoSB-R?

NO YES, please specify _____

(Attach medical records/history/clearance dated within the last six months)

Do you have any relative/s studying at CoSB-R? NO YES

Do you have any relative/s working at CoSB-R? NO YES

CERTIFICATION

I certify that the information herein is correct and complete. Falsification, misrepresentation or withholding of information in this form will automatically nullify my application and will result to dismissal from the CoSB-R.

Printed Name & Signature of Applicant

Date

Printed Name & Signature of Parent/Guardian/Spouse

Date



Admission Requirements and Guidelines for COLLEGE:

LIST OF DOCUMENTS TO BE SUBMITTED: (Note: All documents submitted become the property of CoSB-R and will NOT be returned to the applicant)

A. For NEW STUDENTS:

1. Photocopy of NSO Certificate of Live Birth
2. Photocopy of Baptismal Certificate
3. Original Transcript of Records or Certified True Copy of Grades
4. Original High School Report Card
5. Recommendation Letter from the Class Adviser or Guidance Counselor
6. Three (3) -2x2 colored picture, white background
7. One (1) Long brown envelop

B. Additional requirements for TRANSFEREES:

1. Transfer Credentials
2. Recommendation Letter from the School Principal ([Downloadable Form A-2](#))
3. Non-fraternity contract ([Downloadable Form A-3](#))

C. Additional requirements for FOREIGN STUDENTS:

1. Two (2) photocopy of Passport (*original must be presented*)
2. Original Special Study Permit (SSP) from the Bureau of Immigration (BOI)
3. One (1) photocopy of Alien Certification of Registration (*original must be presented*)

PROCEDURE:

STEP 1: Fill up the application form and submit all requirements to the Records Office (Monday - Friday, 8:00am - 3:00pm).

STEP 2: Pay the testing fee of Php 350.00 at the Business Office.

STEP 3: Proceed to the Guidance Office for entrance exam permit and schedule.

STEP 4: After passing the entrance exam, interview with the Discipline Officer, Guidance Counselor and Dean.

STEP 5: Secure Acceptance Letter from the Guidance Counselor.

STEP 6: After acceptance in the college, pay Reservation fee of Php 3,000.00 at the Business Office. The fee is not refundable, but deductible from the tuition fee upon enrolment.