

2. College Education

Were you enrolled in any college curriculum? () Yes () No

If Yes, please supply the information.

For Transferee from Other Schools:

Curriculum and Year	Name and Address of School	Reason for the Transfer	Semester Started with USC	Course Enrolled at USC

For Shiftee within the University of San Carlos:

Curriculum and Year	Reason for the Shift	Inclusive Period of Enrolment	(Grades of the former course) Average Grade	
			First Semester	Second Semester

3. Organizational Affiliations:

Name of Organization	Position/Designation	Activities Involved

(Use separate sheet if necessary.)

C.

1. FAMILY REFERENCE

a. Parents

	NAME	Age	Citizenship	RELIGION	HIGHEST DEGREE ATTAINED	PLACE of RESIDENCE	OCCUPATION	PRESENT EMPLOYMENT		Present Monthly Salary
								Name of Employer	Address	
Father										
Mother										
Guardian										

b. Brothers/Sisters Studying

FULL NAME of BROTHER/SISTER	NAME and ADDRESS of SCHOOL	CURRICULUM and YEAR	SCHOLARSHIP		
			PRIVILEGE	NAME and SPONSOR	AMOUNT

c. Brothers/Sisters Not Studying

FULL NAME of BROTHER/SISTER	CIVIL STATUS	CITIZENSHIP	HIGHEST DEGREE ATTAINED	PLACE of RESIDENCE	OCCUPATION	PRESENT EMPLOYMENT		
						EMPLOYER	DESIGNATION	INCOME

d. Are there other persons living in the same house with you including your house helpers?

FULL NAME	RELATIONSHIP TO YOU	OCCUPATION

e. Check the source/s of income of your family. Indicate the approximate amount.

- | | |
|---|---|
| <input type="checkbox"/> Practice of Profession _____ | <input type="checkbox"/> Commissions _____ |
| <input type="checkbox"/> Salary _____ | <input type="checkbox"/> Dividends/Interests _____ |
| <input type="checkbox"/> Real Estate Rental _____ | <input type="checkbox"/> Retirement Pension _____ |
| <input type="checkbox"/> Boarding House _____ | <input type="checkbox"/> Remittance from Abroad _____ |

f. Do any of your brothers/sisters contribute to your school expense?

- Yes No If yes, how much is the average monthly contribution? P_____

g. Do you have any relatives here or abroad, other than your brothers/sisters, giving financial support to your family?

- Yes No If yes, how much is the average monthly contribution? P_____

h. Do your parents support other persons outside your family? Yes _____ No _____

If yes, please answer below.

FULL NAME	RELATIONSHIP	AGE	OCCUPATION	APPROXIMATE MONTHLY SUPPORT

i. How many house helpers do your family have?

Housemaid : _____ Houseboy : _____ Others: _____
 Babysitter : _____ Driver : _____

j. What property does your family have?

- | | |
|--|--|
| <input type="checkbox"/> Real Estate | <input type="checkbox"/> Kerosene Stove |
| <input type="checkbox"/> House | <input type="checkbox"/> Laser Disk Player |
| <input type="checkbox"/> Car | <input type="checkbox"/> DVD/VCD/VCR/VHS |
| <input type="checkbox"/> Generator | <input type="checkbox"/> Colored TV |
| <input type="checkbox"/> Air Conditioner | <input type="checkbox"/> Black and White TV |
| <input type="checkbox"/> Electric Fan | <input type="checkbox"/> Radio/Stereo/Cassette |
| <input type="checkbox"/> Washing Machine | <input type="checkbox"/> Personal Computer |
| <input type="checkbox"/> Refrigerator | <input type="checkbox"/> Oven |

2. Do you have relatives/parents who graduated at USC? Yes No

If Yes, please supply the information.

Name	Relationship	Degree and Year Obtained	Contact Numbers			Employment	
			Tel.	Fax	Mobile	Name and Address of Company	Position

D. SCHOLARSHIP INTENTION

Write a three-paragraph essay on why you are applying for a scholarship. Cite the benefits that you expect to gain. Decide on the title of your essay.

Title

Applicant's Signature

Date

E. STATEMENT OF THE APPLICANT

I hereby certify upon my honor that all the information I have furnished in this application is accurate and complete. I understand that any willful misinformation and/or withholding of information will disqualify me from any scholarship; that furthermore, if such misinformation and/or withholding on my part is discovered after I have been awarded a scholarship, I will be required to reimburse all the financial benefits I have received.

Applicant's Signature

Date

F. STATEMENT OF THE APPLICANT'S PARENT/GUARDIAN

I hereby certify that the information, which my son/daughter/dependent has furnished in this application, is correct and complete. I further recognize that in signing this Application Form, I vouch for the accuracy of the information supplied therein.

Signature of Parent/Guardian
over Printed Name

Date

G. CHECKLIST OF DOCUMENTS ATTACHED

(For First Year Applicants Only)

Before submitting this Application Form, check that all required supporting papers listed below are attached:

- () Two 1x1 pictures attached to the first page (black and white/colored)
- () Photocopy of High School Report Card
- () Photocopy of the Latest Income Tax Return of Parents/Affidavit of Tax Exemption/Retirement Papers
- () Recommendation from the Guidance Counselor for the need of the Scholarship and Good Moral Character
- () Photocopy of the Entrance Examination Result from the USC Testing Center
- () Photocopy of NCAE Result
- () Photocopy of Birth Certificate
- () One Long Brown Envelope (with full name printed on the upper left side)

*Scholarship Qualifying Examination will be on _____.

Submit this completed Application Form together with all the supporting documents on or before May 10, 2010 to:

The Scholarships Office
University of San Carlos
Main Campus
P. del Rosario Street
Cebu City

(For Continuing Students Only)

Before submitting this Application Form, check that all required supporting papers listed below are attached:

- Two 1x1 pictures attached to the first page (black and white/colored)
- Photocopy of Transcript of Records
- Photocopy of Present Initial Student Load and Assessment
- Photocopy of the Latest Income Tax Return of Parents/Affidavit of Tax Exemption/Retirement Papers
- Recommendation from the Chairman of the Department regarding Scholarship
- Certificate of Good Moral Character from SAS Office
- Photocopy of Birth Certificate
- One Long Brown Envelope (with full name printed on the upper left side)

Submit this completed Application Form together with all the supporting documents on or before _____ to:

The Scholarships Office
University of San Carlos
Main Campus
P. del Rosario Street
Cebu City

Note: Incomplete Application Form and Supporting Documents will not be processed.