MALAYAN COLLEGES LAGUNA
Cabuyao, Laguna 4025

APPLICATION FORM FOR NON-FRESHMEN

1.5" x 1.5" Picture

ACADEMIC YEAR _____ - _____

COMPLETELY FILL OUT THE ITEMS BELOW AND SUBMIT THIS FORM TOGETHER WITH THE OTHER REQUIRED DOCUMENTS AT THE ADMISSIONS OFFICE.

THIS IS THE FIRST STEP TOWARDS ADMISSIONS TO THE MALAYAN COLLEGES LAGUNA. FILLING OUT THIS FORM DOES NOT GUARANTEE ENTRANCE TO ITS PROGRAMS. ADMISSION TO THE MALAYAN COLLEGES LAGUNA IS SUBJECT TO ITS ADMISSIONS AND RETENTION POLICIES.

APPLICANT CLASSIFICATION ☐ TRANSFEREE ☐ ANOTHER DEGREE

APPLICANT INFORMATION

NAME _____ (FAMILY NAME) _____ (GIVEN NAME) _____ (MIDDLE NAME)

PROGRAM APPLIED _____

DATE OF BIRTH _____ PLACE OF BIRTH _____ GENDER _____

RELIGION _____ NATIONALITY _____

MAILING ADDRESS _____ (BLK/LOT/HSE/UNIT NO.) _____ (BLDG./STREET NAME) _____ (BARANGAY) _____ (CITY/MUNICIPALITY/PROVINCE) _____ (ZIPCODE)

PERMANENT ADDRESS _____ (BLK/LOT/HSE/UNIT NO.) _____ (BLDG./STREET NAME) _____ (BARANGAY) _____ (CITY/MUNICIPALITY/PROVINCE) _____ (ZIPCODE)

EMAIL ADDRESS _____ LANDLINE NO. _____ MOBILE NO. _____

FATHER'S NAME _____ OCCUPATION _____

EMAIL ADDRESS _____ LANDLINE NO. _____ MOBILE NO. _____

MOTHER'S NAME _____ OCCUPATION _____

EMAIL ADDRESS _____ LANDLINE NO. _____ MOBILE NO. _____

GUARDIAN'S NAME _____ CONTACT NO. _____ RELATIONSHIP _____

GUARDIAN'S ADDRESS (IF DIFFERENT FROM ABOVE) _____ EMAIL ADDRESS _____

PREVIOUS SCHOOL NAME _____ PROGRAM FROM PREV. SCHOOL _____

PREVIOUS SCHOOL ADDRESS _____ DATE OF GRADUATION (IF APPLICABLE) _____

_____
DATE

FOR : THE MALAYAN COLLEGES LAGUNA

THRU : THE ADMISSIONS DIRECTOR

I wish to apply for admission to your institution for the ___ term of academic year _____- _____.

If admitted, I shall be guided by the policies of the MALAYAN COLLEGES LAGUNA and shall follow them strictly.

Finally, I hereby attest to the completeness and accuracy of all information supplied in this form. I understand that withholding of information or giving false information may nullify my application for admission or may jeopardize my continued stay after admission has been granted.

Respectfully yours,

_____
SIGNATURE OVER PRINTED NAME

THIS FORM MAY BE DOWNLOADED AND REPRODUCED.