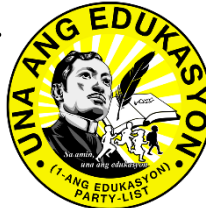




UNA ANG EDUKASYON

(1-Ang Edukasyon) Party-List



2x2 ID PICTURE

Instructions: Fill in all the required information. Do not leave an item blank. If item is not applicable, indicate N/A. Strictly NO erasures.

PERSONAL INFORMATION

Name		(Last Name)		(First Name)		(Middle Name)	
Date of Birth (mm/dd/yyyy)				Permanent Mailing Address			
Place of Birth				Address			
Sex	<input type="checkbox"/> Male <input type="checkbox"/> Female	Zip code					
Civil Status	<input type="checkbox"/> Single <input type="checkbox"/> Married	Voter's I.D. No.		<input type="checkbox"/> Registered Voter <input type="checkbox"/> Non-Voter			
Citizenship			Voter's Precinct and Location				
Mobile Number				School Name			
Telephone Number				School Address			
E-mail Address				School Type		()Public ()Private	
Type of Disability (if applicable)				Highest Grade/Year			

FAMILY BACKGROUND

	FATHER ()Living ()Deceased	MOTHER ()Living ()Deceased
Name		
Address		
Occupation		
Educational Attainment		
Total Parents Gross Income		
Mobile Number		
Telephone Number		

SIBLINGS

Name		Name	
Address		Address	
Mobile Number		Mobile Number	
Telephone Number		Telephone Number	
Name		Name	
Address		Address	
Mobile Number		Mobile Number	
Telephone Number		Telephone Number	

(Please Answer the following items)

(a) Are you a member of an indigenous group?

☐ YES ☐ NO

If YES, please specify: _____

(b) Are you differently abled?

☐ YES ☐ NO

If YES, please specify: _____

(c) Are you a solo parent?

☐ YES ☐ NO

If YES, please specify: _____

(d) Are you a member/supporter of any Party-List group?

☐ YES ☐ NO

If YES, please specify: _____

Signature over Printed Name of Applicant

Date Accomplished

General Requirements:

1. Must be a Filipino Citizen
2. Certificate of indigency
3. Personal letter request
4. Original/Certified True Copy of the updated clinical abstract signed by the doctor with the license number and PTR number.
5. Official Price Quotation
6. Valid I.D. (patient and representative)
PHOTOCOPIES of valid I.D. (voters ID, voters certification, postal ID, SSS, GSIS , BIR, Solo Parent ID if SOLO Parent, 4pcs ID)