

No.: _____



ST. PAUL UNIVERSITY ILOILO
 GUIDANCE CENTER
 General Luna St., Iloilo City
 Tel. No. (033) 338-10-97 Local 1303
 School Year 2014 - 2015

Name of Applicant: _____ Age: _____

Date of Entrance Test: _____ Sex: _____ Civil Status: _____

COURSES:

Direction: Please Rank 1, 2, 3 on the space provided the order of your preference of the courses listed below that you wish to take in this University.

COLLEGE OF ARTS AND SCIENCE

- _____ BS Biology
- _____ BS Environmental Science
- _____ AB/BS Psychology
- _____ AB Mass Communication
- _____ AB English and Theater Arts

COLLEGE OF ACCOUNTANCY AND BUSINESS

- _____ BS Accountancy
- _____ BSBA, major in Entrepreneurship
- _____ BSBA, major in Finance Management
- _____ BSBA, major in Human Resource Development Management
- _____ BSBA, major in Marketing Management
- _____ BSBA, major in Business Management

COLLEGE OF HRM AND TOURISM

- _____ BS Hotel and Restaurant Management
- _____ Ladderized BS Hotel and Restaurant Management
- _____ BS Tourism Management
- _____ BS Nutrition and Dietetics

COLLEGE OF PHYSICAL THERAPY

- _____ BS Physical Therapy

COLLEGE OF INFORMATION AND COMMUNICATION TECHNOLOGY

- _____ BS Computer Science
- _____ BS Information System
- _____ BS Information Technology
- _____ Ladderized BS Information Technology

COLLEGE OF NURSING

- _____ MA Nursing
- _____ BS Nursing

COLLEGE OF TEACHER EDUCATION

- _____ Bachelor of Elementary Education (BEEd)
major: Pre-school Education (PSED)
Special Education (SPED)
- _____ Bachelor of Secondary Education (BSEd)
major: Biological Science
English
- _____ Teaching Certificate Program
- _____ Bachelor of Library and Information Science (BLIS)
- _____ Basic Education
Pre-School
Kinder
Grade 1 to Grade VI

REQUIREMENTS:

1. Before the Entrance Examination - please submit:

1.1 For Regular Students

- () Certificate of Good Moral Character (*photocopy*)
Original copy upon enrolment .
- () NSO Authenticated Birth Certificate (*photocopy*)
- () Baptismal Certificate (*photocopy*)
- () 3 ID Pictures (*passport size*)
- () Letter of Recommendation
- () Copy of 4th Year High School Grades
Form 138 original copy upon enrolment
- () Receipt of Payment for the testing fee (Php 175.00)

1.2 For Transferees

- () Honorable Dismissal
- () Copy of Grades
- () Receipt of Payment for the testing fee

1.3 For Foreign Students

- () ACR (Alien Certificate of Registration)
- () Passport (*photocopy*)
- () Receipt of Payment for the testing fee

EDUCATIONAL BACKGROUND

SCHOOLS ATTENDED

Elementary	Address	Years Attended	Reason for Leaving
_____	_____	_____	_____
High School	Address	Years Attended	Reason for Leaving
_____	_____	_____	_____
College Education	Address	Years Attended	Reason for Leaving
_____	_____	_____	_____

Honors/Awards/Scholarship Received _____

Hobbies/Sports/Special Talents _____

MEMBERSHIP | CLUBS, ASSOCIATION, SOCIETIES AND OTHER ORGANIZATIONS

POSITION	YEAR
_____	_____
_____	_____
_____	_____

Did you fail in any subject (s)? Give subject (s) date and reasons _____

Where you ever placed Probation? _____ For what reason (s)? _____

ADDITIONAL INFORMATION

SALIENT DATA

What PERSONALITY TRAITS do you think you possesses? Put a (/) check on the blank provided.

Friendly _____	Happy-Go-Lucky _____	Worrier _____	Stubborn _____
Calm _____	Submissive _____	Trusting _____	Confident _____
Tense _____	Imaginative _____	Suspicious _____	Relaxed _____
Serious _____	Easily Troubled _____	Practical _____	Shy _____
Others _____	(Please specify) _____		

Is this your time to apply for admission to St. Paul University Iloilo?	YES ()	NO ()
If ACCEPTED, will you definitely enroll at St. Paul University?	YES ()	NO ()

I certify that all the information given herein are true, correct and complete. I fully realize and concur that any false statement, misrepresentation or material omission made herein shall be considered as gross dishonesty/fraud which shall be sufficient reason for the outright rejection of my application or in case of admission, for my suspension, dismissal, expulsion or dropping of my name in the rolls of the schools.

_____ Date

_____ Signature of the Applicant