



# MIRIAM COLLEGE LOWER SCHOOL

## Admissions Office

Attach  
2 x 2 picture  
here

### PERSONAL DATA FORM

Grade Level Applying For: \_\_\_\_\_ School Year: 20\_\_\_\_20\_\_\_\_\_

#### I. PERSONAL INFORMATION

NAME: \_\_\_\_\_  
(Name in Birth Certificate) SURNAME GIVEN NAME MIDDLE NAME/ M.I. NICKNAME

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_ Present Age: \_\_\_yrs. \_\_\_mos.

Citizenship: \_\_\_\_\_ Religion: \_\_\_\_\_ Telephone Nos.: \_\_\_\_\_

Present Address: \_\_\_\_\_  
( House No.) ( Street, Barangay/Village) (City/Municipality) (Province) Zip Code

Language spoken at home: Please check (✓)

- English  Tagalog  Others Pls. Specify \_\_\_\_\_

#### II. EDUCATIONAL BACKGROUND

Present School: \_\_\_\_\_ Tel. No.: \_\_\_\_\_

Address of the School: \_\_\_\_\_

Name of School/s Attended	Address
Grade 1 _____	_____
Grade 2 _____	_____
Grade 3 _____	_____
Grade 4 _____	_____
Grade 5 _____	_____
Grade 6 _____	_____

#### III. FAMILY DETAILS

Marital Status of Parents: Please check (✓)

- Single Parent  Separated  Annulled  Others, pls. specify \_\_\_\_\_  
 Married  Spouse Abroad  Widowed

While studying in Miriam, she will live with: Please check (✓)

- Father  Mother  Whole Family  Others, pls. specify \_\_\_\_\_  
 Grandparents  Other Relatives  Boarding House

**FATHER'S NAME:** \_\_\_\_\_ Citizenship: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
College/University Attended: \_\_\_\_\_ Degree: \_\_\_\_\_  
Occupation: \_\_\_\_\_ Position: \_\_\_\_\_ Office Tel. No.: \_\_\_\_\_  
Office Name: \_\_\_\_\_ Office Address: \_\_\_\_\_  
Email Address: \_\_\_\_\_ Mobile No.: \_\_\_\_\_

Miriam College Foundation, Inc. Alumnus? Please check (✓)

Child Study Center  Yes School Year \_\_\_\_\_  No

College  Yes School Year \_\_\_\_\_  No

**MOTHER'S FULL MAIDEN NAME:** \_\_\_\_\_

Citizenship: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

College/University Attended: \_\_\_\_\_ Degree: \_\_\_\_\_

Occupation: \_\_\_\_\_ Position: \_\_\_\_\_ Office Tel. No.: \_\_\_\_\_

Office Name: \_\_\_\_\_ Office Address: \_\_\_\_\_

Email Address: \_\_\_\_\_ Mobile No.: \_\_\_\_\_

Miriam College Foundation, Inc. Alumna? Please check (✓)

Child Study Center  Yes School Year \_\_\_\_\_  No

Grade School  Yes School Year \_\_\_\_\_  No

High School  Yes School Year \_\_\_\_\_  No

College  Yes School Year \_\_\_\_\_  No

Please identify a mobile no. for MC Corporate Messaging System advisories (CMS) \_\_\_\_\_

**GUARDIAN'S NAME:** \_\_\_\_\_ Citizenship: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

*(Legal Guardian in case parents are not available)*

Relationship to student: \_\_\_\_\_ Telephone Nos.: \_\_\_\_\_

College/University Attended: \_\_\_\_\_ Degree: \_\_\_\_\_

Occupation: \_\_\_\_\_ Position: \_\_\_\_\_ Office Tel. No.: \_\_\_\_\_

Office Name: \_\_\_\_\_ Office Address: \_\_\_\_\_

Email Address: \_\_\_\_\_ Mobile No.: \_\_\_\_\_

#### IV. SIBLING/S INFORMATION

Name/s of Brother/s & Sisters/s	Birthdate	Age	Present School	Grade / Year
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

#### Person to notify in case of emergency:

Name: \_\_\_\_\_ Citizenship: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Tel. No.: \_\_\_\_\_ Mobile No.: \_\_\_\_\_

***I hereby certify that all information supplied in this application is complete and accurate.***

**Application form filled out by:** \_\_\_\_\_ **Date:** \_\_\_\_\_

(Signature over Printed name)