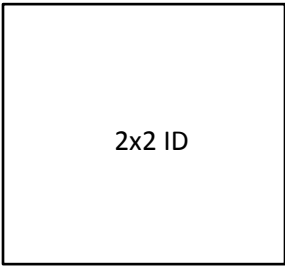




Diocese of Imus Catholic Educational System (DICES)
PARACLETE FOUNDATION COMMUNITY SCHOOL, INC.

Block 89, Lot 2, Zone 11, AFP Housing, Bulihan, Silang, Cavite
 Tel. No. (046) 410-5323



ENROLLMENT FORM

Kindergarten

Elementary

Junior High School

PERSONAL INFORMATION

LRN NO.: _____ LEVEL APPLIED FOR: _____

LEGAL NAME: _____
(Name on Birth Certificate) LAST NAME GIVEN NAME MIDDLE NAME

COMPLETE HOME ADDRESS:

HOUSE NO. / STREET / VILLAGE BARANGAY CITY/TOWN PROVINCE

BIRTHDAY: _____ Age: _____ GENDER: MALE FEMALE

BIRTHPLACE: _____ NATIONALITY: _____

EXISTING SCHOLARSHIP/S (if any): _____

FAMILY BACKGROUND

FATHER'S NAME: _____ LIVING DECEASED

CITIZENSHIP: _____ RELIGION: _____

OCCUPATION: _____ CONTACT NO./s: _____

MOTHER'S NAME: _____ LIVING DECEASED

CITIZENSHIP: _____ RELIGION: _____

OCCUPATION: _____ CONTACT NO./s: _____

SIBLINGS WHO ARE CURRENTLY ENROLLED IN PFCSI : *(start from eldest to youngest)*

Name: _____ Grade Level: _____ Existing Scholarship/s (if any): _____
 Name: _____ Grade Level: _____ Existing Scholarship/s (if any): _____
 Name: _____ Grade Level: _____ Existing Scholarship/s (if any): _____

PERSON TO BE NOTIFIED IN CASE OF EMERGENCY: _____

ADDRESS : _____

RELATIONSHIP TO STUDENT : _____ CONTACT NO/S: _____

(For Transferees/New Students) NAME OF PREVIOUS SCHOOL: _____

SCHOOL ADDRESS: _____

Referred by : _____

(For Grade 8-10 Transferees) Are you an ESC Voucher grantee? YES NO SID No. _____

Flexible Learning Program *(Kindly check your choice below)*

Online Learner Distant Learner

(FOR PFCSI PERSONNEL USE ONLY)

CREDENTIALS SUBMITTED:

_____ 2 pcs. 2x2 picture	_____ Photocopy of Parents' Marriage Contract (if any)
_____ PSA Birth Certificate	_____ Good Moral Certificate
_____ Photocopy of Baptismal Certificate	_____ Form 137
_____ Photocopy of Confirmation Certificate	_____ Form 138 (Report Card)

***Please submit this duly accomplished enrollment form to the Registrar's Office for Assessment.**