



# QUEZON CITY UNIVERSITY

673 Quirino Hi-way, San Bartolome, Novaliches Q.C.

## ADMISSIONS OFFICE

### STUDENT APPLICATION FORM

**1st SEM, AY: 2022-2023**

2x2 picture  
with white  
background

**GENERAL INSTRUCTION:** Kindly fill out all the information needed and do not leave any box unmarked. Write N/A in items not applicable to you. Please use all CAPITAL.

**(Print this form back to back on one single sheet of paper)**

Date of Application:	LRN:	Student No.: (to be filled out by the admission officer)
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Are you applying as **(Please check the appropriate answer)**

SHS Graduate	Track:	Strand:
High School Graduate (Year 2015 and below Graduated in HS)		
Transferee, Are you applying for Accreditation of Subjects?	Yes	No
2 <sup>nd</sup> Degree Course Taker (already a graduate of a Bachelor's Degree before)	Course:	

**Course applied for: Please choose 3 preferred courses. Rank (1) 1<sup>st</sup> Choice (2) 2<sup>nd</sup> Choice (3) 3<sup>rd</sup> Choice**

Bachelor of Science in Information Technology	Bachelor of Science in Accountancy
Bachelor of Science in Entrepreneurship	Bachelor of Science in Electronics Engineering
Bachelor of Science in Industrial Engineering	Bachelor of Early Childhood Education (BECEd)
<b>(For Survey Purposes Only)</b> Bachelor of Science in Management Accounting	

**Please Rank preferred Campus: Rank (1) 1<sup>st</sup> Choice (2) 2<sup>nd</sup> Choice (3) 3<sup>rd</sup> Choice**

Batasan Campus	San Francisco Campus	San Bartolome Campus
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Are you presently enrolled? If yes, Name of School

#### **PERSONAL INFORMATION** (As indicated in your PSA Birth Certificate. Do **not** use your **maiden name if married**)

Last Name:	First Name:	Middle Name:		
Gmail Address:	Date of Birth: (mm/dd/yyyy)	Gender:	Religion:	Citizenship:
Contact Number:	Place of Birth:	Civil Status:	If Married, Name of Spouse:	

Present Address:

Barangay:	City/ Municipality	District No.	Zip Code
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Do you have a **physical/behavioral condition/Disability?** Specify

#### **EDUCATIONAL ATTAINMENT**

College: (Leave it blank if you have **not** enrolled to college before)

Address:

Location:	QC	Non-QC	Public School	Private School
Course:	Date Graduated:	Honors Received with certification:		

Technical Vocational: (Leave it blank if you have **not** enrolled to vocational course before)

Address:

Location:	QC	Non-QC	Public School	Private School
Course/Year/s Taken:	Date Graduated:	Honors Received with certification:		

Senior High School Name or High School Name for HS Graduate:					
Address:					
Location:	QC	Non-QC	Public School	Private School	
Track/Strand or 4 <sup>th</sup> Yr. Section if HS Grad.:			Date Graduated:	Honors Received with certification:	

<b>FAMILY BACKGROUND</b>			
Father's Name:	Occupation:	Educ'l Attainment:	Contact No.:
Mother's Name:	Occupation:	Educ'l Attainment:	Contact No.:
Parent's Address:			
Guardian:	Relationship:	Contact No.:	

<b>PERSON TO BE NOTIFIED IN CASE OF EMERGENCY</b>		
Name:	Relationship:	Contact No.:

Address:		
<p><i>All information contained in this application is true and correct, I understand that any misrepresentation may cause for denial of admission from Quezon City University.</i></p> <p><i>I allow and give full consent to QCU to collect and evaluate the above-mentioned information that I declare for legitimate purposes.</i></p>		
<p><b>PLEASE NOTIFY THE OFFICE OF THE REGISTRAR ABOUT ANY CHANGES IN THE ABOVE INFORMATION</b></p>		
	Signature of Student over Printed Name	Date Signed

Documents / Requirements Verified by:

Approved by Department:

Admission Officer

Dean / Program Chair

Approved for Admission by:

ANNIE LOU M. GONZALES  
Chief, Admission Services

**SUBMITTED REQUIREMENTS FOR QCU ENROLLMENT (to be filled by Admission Officer)**

**SC HC FRESHMAN**

**SC HC TRANSFEREE**

1. Original SF9 (Certified True Copy of Grade 11 & Original Grade 12) or Form 138- High School Report Card or Alternative Learning System Certificate if ALS passer
2. Original Certificate of Good Moral Character
3. PSA Birth Certificate (Attach Official Receipt)
4. Original – Recent Brgy. Certificate of Residency
5. Two(2) 2x2 picture (White Background with Name Tag)
6. Senior High School / High School / ALS Diploma
7. Latest Certificate of Employment (if currently employed)
8. Marriage Certificate ( for Female Married Student)
9. Medical Clearance – Issued by the University Physician
- 10 . Long Brown Envelope with Plastic Envelope

1. Transcript of Records (For Evaluation Purposes)
2. Original Certificate of Transfer Credentials (CTC), Certificate of Good Moral Character and Honorable Dismissal
3. PSA Birth Certificate (Attach Official Receipt)
4. Original – Recent Brgy. Certificate of Residency
5. Two(2) 2x2 picture (White Background with Name Tag)
6. Latest Certificate of Employment (if currently employed)
7. Marriage Certificate ( for Female Married Student)
8. Medical Clearance – Issued by the University Physician
9. Long Brown Envelope with Plastic Envelope
10. **For Accreditation of Subjects:** Subject Course Description and NSTP 2 Serial Number

\*SC – Soft Copy \*\*HC – Hard Copy