

APPLICATION FOR ADMISSION
SILLIMAN UNIVERSITY
Dumaguete City, Philippines 6200

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Please fully accomplish this form and send to the ADMISSIONS OFFICER Silliman University, Dumaguete City 6200, Philippines.

P L E A S E P R I N T

Name _____
(Last) (First) (Middle Name)

High School General Average: _____ (general admission requirement is at least 80%)

Silliman University Admission and Placement Examination results:

Overall Rating _____; GA _____; ELPT _____; MPT _____

Year taken: _____

Nursing Admission Test rating (for nursing applicant): _____ Year taken: _____

Home Address: _____ Tel. No./Cell No. _____

Dumaguete Address: _____ Tel. No./Cell No. _____

Date and Place of Birth: _____ E-mail address: _____

Marital Status: _____ Citizenship: _____

Religious Affiliation: _____ Blood type: _____ Gender: _____

If foreigner, accomplish separate application for Study Permit at the Foreign Students Section, Admissions Office.

Family Background (must be completed):

No. of children in your family _____ No. of children in college _____

No. of children who have attended college _____

Children in the family including yourself (your brothers and sisters):

<i>Name</i>	<i>Highest Degree Attained</i>	<i>School Attended</i>	<i>Inclusive Years</i>	<i>Year Graduated</i>

List of schools you attended (from elementary school up to college, if applicable):

<i>School</i>	<i>Location</i>	<i>Dates of Attendance</i>	<i>Year Graduated</i>	<i>Certificate/ Degree Earned</i>

Degree you wish to earn in Silliman: _____

Earliest date you wish to enter Silliman: _____

Condition of health (check one): ()Excellent ()Good ()Fair

State nature of defects, if any: _____

Who/What influenced you to study in Silliman University?

Parents	Recruiter	Brochure	Please write on the space provided below the name and address: _____ _____ _____
Alumni	University Newspaper	Radio Program	
Letter	Poster	School of origin	
Faculty/Staff	Student	Friend	

Please describe below other factors. _____

Father

Mother

Name: _____ : _____
 Highest degree attended: _____ : _____
 School attended: _____ : _____
 Year graduated: _____ : _____
 Occupation: _____ : _____

Annual Income: (Please check appropriate box)

Below P50,000

- P 50,000 - 59,999
- P 60,000 - 69,999
- P 70,000 - 79,999
- P 80,000 - 89,999
- P 90,000 - 99,999
- P 100,000 - 109,999
- P 110,000 - 119,999
- P 120,000 - 129,999
- P 130,000 - 139,999
- P 140,000 - 149,999
- P 150,000 - 159,999
- P 160,000 - 169,999
- P 170,000 - 179,999
- P 180,000 - 189,999
- P 190,000 - 199,999
- P 200,000 - 209,999
- P 210,000 and above

Below P50,000

- P 50,000 - 59,999
- P 60,000 - 69,999
- P 70,000 - 79,999
- P 80,000 - 89,999
- P 90,000 - 99,999
- P 100,000 - 109,999
- P 110,000 - 119,999
- P 120,000 - 129,999
- P 130,000 - 139,999
- P 140,000 - 149,999
- P 150,000 - 159,999
- P 160,000 - 169,999
- P 170,000 - 179,999
- P 180,000 - 189,999
- P 190,000 - 199,999
- P 200,000 - 209,999
- P 210,000 and above

High School Graduated School Address Year Graduated
 Father: _____
 Mother: _____
 Address and Contact number of Parents: _____
 Name, Address and Contact number of Guardian: _____
 Occupation: _____

Will you live in the dormitory? If yes, what type of accommodation?
 Yes No Regular Cooperative
 If no, where will you stay? (Specify name and address)
 Relative or Friend Rooming – House

 The above information is true and correct. Once admitted in Silliman University, I hereby accept and abide by the rules and regulations of the University.

_____ _____
 Date Signature of Student

FOR THE PARENT OR GUARDIAN

I, _____ of _____
 (parent/guardian) (student)
 hereby approve the application of my son/daughter/ward, for admission to Silliman University and hereby accept and agree to abide by the rules and regulations of the University.

_____ _____
 Date Signature of Parent/Guardian