

OSA Form 1

Control No: _____

Receipt No: _____

Control No.: _____

Date of Exam: _____

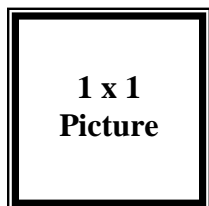
Time of Exam: _____



Republic of the Philippines
CAVITE STATE UNIVERSITY
(CvSU)

ROSARIO, CAVITE

Rosario, Cavite
(046) 437-9505 / (046) 437-7776
<http://www.cvsu.edu.ph>



**1 x 1
Picture**

OFFICE OF STUDENT AFFAIRS

APPLICATION FOR ADMISSION
(College Applicant)

_____ Date

Kindly indicate your course preference:

Degree Non – Degree

1st choice _____ 2nd choice _____ 3rd choice _____

I. Personal Information: (*Print all entries*)

Name: _____ Age: _____ Gender: _____
(Surname) (First Name) (M.I.)

Address: _____ Civil Status: _____

Date of Birth: _____ Place of Birth: _____

Nationality: _____ Religion: _____

Contacts: _____ _____

E-mail Address: _____

Father's Name: _____ Occupation: _____

Highest Educational Attainment: _____

Mother's Name: _____ Occupation: _____

Highest Educational Attainment: _____

No. of Sibling/s: _____ Birth Order: _____

Estimated Family Income (Monthly): P _____

II. Educational Background:

	<u>Name of School</u>	<u>Public</u>	<u>Private</u>	<u>Year Graduated</u>
Elementary:	_____	_____	_____	_____
High School:	_____	_____	_____	_____

Honor/s & Award/s Received: _____

Scholarship/s Received: _____

For Transferee:

School/s last attended: _____ Course & Year: _____

EVALUATION

	Points Earned
I. Personal Interview	
<input type="checkbox"/> Impressions _____	
<input type="checkbox"/> Communication Skills _____	
<input type="checkbox"/> Alertness, Courtesy _____	
<input type="checkbox"/> Ambition/ Determination _____	
<input type="checkbox"/> Willingness to study & work hard _____	
<input type="radio"/> Rating in / X	_____
II. Physical Examination	
<input type="checkbox"/> Height _____	
<input type="checkbox"/> Weight _____	
<input type="checkbox"/> Body Build _____	
<input type="checkbox"/> General Appearance/ Posture _____	
<input type="radio"/> Rating in / X	_____
Evaluated by: _____	
III. Entrance Examination	
<input type="checkbox"/> Score X	
Evaluated by: _____	
IV. Scholastic Record	
<input type="checkbox"/> General AverageX =	
<input type="checkbox"/> E.P.P / T.H.E.X =	
Total Points	_____

- To be admitted
- Waiting list

Not to be admitted for the following
reason/s: _____

OSA Director or her Representative