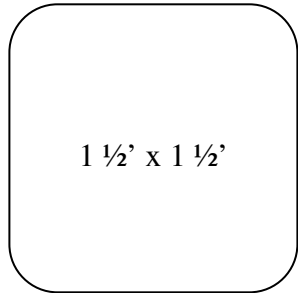




**MAPUA INSTITUTE OF TECHNOLOGY**  
**Office of the Vice President for Student Affairs**  
**Center for Scholarships and Financial Assistance**

**APPLICATION FORM FOR SCHOLARSHIP**

|                             |
|-----------------------------|
| <b>NAME OF SCHOLARSHIP:</b> |
|-----------------------------|



**PERSONAL DATA**

|  |                             |                                 |                |
|--|-----------------------------|---------------------------------|----------------|
| Name   |                             |                                 |                |
| Surname  | First Name                  | Middle Name                     |                |
| Student Number   | Program of Study & Year     | Existing Scholarship/s, if any: |                |
| Remaining Units Including This Term  | Remaining Terms to Graduate |                                 |                |
| Date of Birth  | Age                         | Place of Birth                  | E-mail Address |
| Citizenship  | Gender                      | Civil Status                    | Religion       |
| Address in Metro Manila:   |                             | Contact Number/s                |                |
| Residing at: <input type="checkbox"/> Boarding House <input type="checkbox"/> Parent's House <input type="checkbox"/> With Guardian: _____ |                             |                                 |                |
| Permanent/ Provincial Address:   |                             | Contact Number/s                |                |

**FAMILY BACKGROUND**

|  |                   |   |                                    |
|--|-------------------|---|------------------------------------|
| <b>Father's Name</b>   |                   |   | Age                                |
| Occupation   | Net Annual Income |   |                                    |
| Home Address   | Contact Number/s  |   |                                    |
| Name of the Company or Business/ Address   |                   | Contact Number/s                        |                                    |
| <b>Mother's Name</b>   |                   |   | Age                                |
| Occupation   | Net Annual Income |   |                                    |
| Home Address   | Contact Number/s  |   |                                    |
| Name of the Company or Business/ Address   |                   | Contact Number/s                        |                                    |
| <b>Brothers/ Sisters</b> [use extra sheet of paper if necessary]   | Age               | School/ Location or Occupation/ Company | Program Presently Taking/ Finished |
| Name   |                   |   |                                    |
|  |                   |   |                                    |
|  |                   |   |                                    |
|  |                   |   |                                    |
|  |                   |   |                                    |
|  |                   |   |                                    |
| Total Number of Sibling/s: _____ Number of Working- Siblings: _____ Number of Studying- Sibling/s: _____ |                   |   |                                    |

**EDUCATION- Secondary Level**

|   |                           |
|---|---------------------------|
| School/ Location  | Year Graduated            |
| Honors/ Awards Received   | General Average           |
| Organizations   | Rank among the Graduates: |
| Others: list other school you have attended and indicate the course/s you took from that school (i.e. computer courses, etc.) |                           |

**MAPUA CORE VALUES: Discipline Excellence Commitment Integrity Relevance**

**MATRIX OF GENERAL WEIGHTED AVERAGE**

| Year Level           | General Weighted Average |                      |                      |                      | SCHOLARSHIP/S RECEIVED |
|----------------------|--------------------------|----------------------|----------------------|----------------------|------------------------|
|                      | 1 <sup>st</sup> Term     | 2 <sup>nd</sup> Term | 3 <sup>rd</sup> Term | 4 <sup>th</sup> Term |                        |
| 1 <sup>st</sup> year |                          |                      |                      |                      |                        |
| 2 <sup>nd</sup> year |                          |                      |                      |                      |                        |
| 3 <sup>rd</sup> year |                          |                      |                      |                      |                        |
| 4 <sup>th</sup> year |                          |                      |                      |                      |                        |

**Why should I be granted the SCHOLARSHIP?** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**What can I contribute to make the society a better place?** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Current Membership in Organizations** (in Mapua and off- campus: Please provide proof):

|    | Name of Organization/s | Position |
|----|------------------------|----------|
| 1] | _____                  | _____    |
| 2] | _____                  | _____    |
| 3] | _____                  | _____    |
| 4] | _____                  | _____    |

**Hobbies:** \_\_\_\_\_  
 \_\_\_\_\_

**TABULATED CLASS SCHEDULE** (Please write the course & the classroom assignment)

|               | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
|---------------|--------|---------|-----------|----------|--------|----------|--------|
| 7:30- 9:00 am |        |         |           |          |        |          |        |
| 9:00- 10:30   |        |         |           |          |        |          |        |
| 10:30- 12:00  |        |         |           |          |        |          |        |
| 12:00- 1:30   |        |         |           |          |        |          |        |
| 1:30- 3:00    |        |         |           |          |        |          |        |
| 3:00- 4:30    |        |         |           |          |        |          |        |
| 4:30- 6:00    |        |         |           |          |        |          |        |
| 6:00- 7:30    |        |         |           |          |        |          |        |
| 7:30- 9:00    |        |         |           |          |        |          |        |

|                       | Name  | Relationship to the Applicant | Contact Number |
|-----------------------|-------|-------------------------------|----------------|
| <b>References:</b> 1] | _____ | _____                         | _____          |
| 2]                    | _____ | _____                         | _____          |

*I hereby certify that the above information is true and correct. Any misrepresentation of facts will render this form invalid and will immediately disqualify my application to this scholarship.*

\_\_\_\_\_  
**Student's signature above Printed Name**

\_\_\_\_\_  
**Date Submitted**

Other Requirements:

- Two 1 ½ x 1 ½ ID Pictures
- Latest Income Tax Return of Parents or  
Certificate of Tax Exemption from BIR
- Photocopy of Certification of Matriculation
- Photocopy of Final Grades Report Since First Year
- For first Year Applicant: Certified True Copy of Form 137
- Certificate of Good Moral Character
- Certificate of Good Health
- Essay: Why The scholarship should be given to me

**Interviewed by:**  
 \_\_\_\_\_  
*Financial Assistance Officer*

**Approved by:**  
 \_\_\_\_\_  
*Director, OASC*

*"... Mapua... responding to the big local and global technological challenges of the times."*