

COLLEGE OF THE HOLY SPIRIT OF TARLAC

Tarlac City, Philippines 2300
Tel. Nos. (045) 982-3952 / 982-5367 Tefelax No. (045) 982-5367

1 x 1

SHS STUDENT'S DIRECTORY - REGISTRATION FORM

Enrolment No REGISTRAR'S COPY	Old Student: () New Student: ()			
Name:			Gender: () Male () Female
(PRINT) (Last Name)	(First Name)	(Middle	e Name)	
Academic Track/Strand: () STEM ()	ABM () HUMSS	Grade Level: S	School Year: 2020_	Semester:
Complete Home Address (Present):				
Date of Birth:(Month)(Day)(Year) [Place of Birth:		
Religion:	Rantized? (Ves () No	Confirmed? () V	es () No
Nationality: Contact No	s.: Mobile:	Landline:	Email Add:	
Name of Father:		•	Occupation:	
	(Middle Name)	(Last Name)	,	
Name of Mother:	11 11 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Occupation:	
(PRINT) (First Name)	(Middle Name)	(Last Name)		
Approximate Monthly Family Income: (() Below P15,000.00 () P15,000		5,000.00 - P34,999.00	() P35,000.00 and	i above
Name of School Previously Attended: Kindergarten:			a.	School Year
Primary Grades (Grades 1-4):				
Intermediate Grades (Grades 5-6):				
Junior High School (Grades 7-10):				
*).		Sisters/Brothers Studyi		Grade Level
Parent's/Guardian's Signature Over Printed I	Name		a 54	
PTA OR No	×.			
Date Paid:	Physical Delication		h. Gerrover	a, sep.
	Registrar		• Principal	