



DE LA SALLE JOHN BOSCO COLLEGE
SENIOR HIGH SCHOOL DEPARTMENT
Mangagoy, Bislig City

REGISTRAR'S COPY

Credentials Submitted

- Form 138-A
- PSA Birth Certificate
- Certificate of Good Moral
- Certificate of Completion
- ESC Certificate (from private school)

REGISTRATION FORM
SY _____
_____ Semester/Term

- Returnee New Student
- Transferee

Name:			Mobile No.:		
(Surname)		(First Name)		(Middle Name)	
			Gender: <input type="radio"/> Male <input type="radio"/> Female		
Date of Birth(MM/DD/YY):			Religion:		
Place of Birth:			Incoming Grade:		
Home Address:					
Previous School Attended:			Previous School Address:		
Father's Last Name:		First Name:		Middle Name:	
Mother's Last Name:		First Name:		Middle Name:	
If Employed:			Please check:		
Father's Occupation:		Employer:		Public:	Private:
Mother's Occupation:		Employer:		Public:	Private:
Father's Contact Number:			Mother's Contact Number:		
Legal Guardian:			Address of Legal Guardian:		

Track:		Strand:			
<input type="checkbox"/> Academic		<input type="checkbox"/> Accounting, Business and Management (ABM)			
		<input type="checkbox"/> Science, Technology, Engineering and Mathematics (STEM)			
		<input type="checkbox"/> Humanities and Social Sciences (HUMSS)			
		<input type="checkbox"/> General Academic Strand (GAS)			
<input type="checkbox"/> TVL		<input type="checkbox"/> Home Economics		<input type="checkbox"/> Front Office	<input type="checkbox"/> Housekeeping <input type="checkbox"/> Caregiving
		<input type="checkbox"/> ICT		<input type="checkbox"/> Computer System Servicing	
		<input type="checkbox"/> Industrial Arts		<input type="checkbox"/> Electrical Installation & Maintenance	<input type="checkbox"/> Automotive <input type="checkbox"/> Consumer Electronics <input type="checkbox"/> Shielded Metal-Arc Welding

Signature of:

Enrolment In-charge

SH Coordinator

Registrar

Applicant's Signature above Printed Name

Date

Date

Date

Date



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Mangagoy, Bislig City

STUDENT'S COPY

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_____ Semester/Term

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Place of Birth:			Incoming Grade:		
Home Address:					
Previous School Attended:			Previous School Address:		
Father's Last Name:		First Name:		Middle Name:	
Mother's Last Name:		First Name:		Middle Name:	
If Employed:			Please check:		
Father's Occupation:		Employer:		Public:	Private:
Mother's Occupation:		Employer:		Public:	Private:
Father's Contact Number:			Mother's Contact Number:		
Legal Guardian:			Address of Legal Guardian:		

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Enrolment In-charge

SH Coordinator

Registrar

Applicant's Signature above Printed Name

Date

Date

Date

Date

O.R. # _____
 Amount Paid _____
 Date _____
 Cashier Signature _____

CONDITION OF ENROLMENT

A. MODE OF PAYMENT

The tuition and other school fees shall be payable in cash in accordance with the following schedules after deducting the advance payment upon enrolment:

1ST Sem-Advance Payment _____	upon enrolment			
1 st payment _____	payable on or before	- September		
2 nd payment _____	payable on or before	- October		
3 rd payment _____	payable on or before	- December		
4 th payment _____	payable on or before	- January		End of First Semester (Accounts must be fully paid)
2ND Sem- Advance Payment _____		- February		
1 st payment _____	payable on or before	- March		
2 nd payment _____	payable on or before	- April		
3 rd payment _____	payable on or before	- May		
4 th payment _____	payable on or before	- June		End of Second Semester (Accounts must be fully paid)

Full payment of tuition account on or before August 31 is entitled a **5% discount on Tuition and Other Fees**. In case of failure to pay at least two (2) installments of the due and demandable tuition and other school fees as indicated in the above schedule of payment on installments, we (the parents) or I (in case of student) shall recognize, without reservation, the right/authority of the school to drop our child (the parents) or me (in case of the student) from the school or suspend our child or me from further attending classes and enter the school campus, without need of judicial intervention or permission. That our child or I shall be readmitted only as soon as the tuition and other school fees are paid **PROVIDED**, however, that our child will be solely responsible in keeping up with the lessons and assignments missed and shall not have any right to require that special lessons, quizzes and/or examinations be given to make up for the quizzes and/or examinations given during the school day, our child or I was not allowed to enter and attend classes.

B. In Case of Withdrawal, the Pupil/Student has to (Section 66 of MRPS)

- Secure withdrawal forms from the Department Head.
- Accomplish withdrawal forms and submit to the Department Head.
- Accomplish clearance form for withdrawal made after two (2) weeks of classes.
- Submit duly accomplished clearance forms to Finance Office, Registrar's Office & Department Head's Office.

In case he/she withdraws within two weeks after the beginning of classes and has already paid the pertinent tuition and other school fees in **FULL** or any length longer than one month, such fees may be charged under the following conditions:

- Ten (10) percent of the tuition and other fees due for the year if he/she withdraws within the first week of classes.
- Twenty (20) percent within the second week of classes regardless of whether or not he/she actually attended classes.

The students may be charged the school fees in **FULL IF HE/SHE WITHDRAWS ANYTIME AFTER THE SECOND WEEK OF CLASSES**. Where tuition fees together with the entrance or registration, laboratory and library fees are paid for the month only on arrangement for a monthly installment, no such fees will be refunded when a student withdraws anytime after registration (7th Ed. MRPS. Pa. 137p. 103) Certification maybe requested with other documents upon presentation of a request from the Registrar's Office and upon presentation of documentary stamps required by the BIR and receipt of payment for said document from the Finance Office.

 Applicant's Signature Above Printed Name

O.R. # _____
 Amount Paid _____
 Date _____
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