



**Admission Application for Undergraduate Program
AY. 2024-2025**



Last Name: _____ Incoming 1st Year Transferee

Middle Name: _____

First Name: _____

Year for Transferee 1st Year 2nd Year 3rd Year 4th Year

Preferred Campus: _____

Preferred Program(s) First Choice: _____

Second Choice: _____

Third Choice: _____

Programs Offered: Dingle Campus

- Bachelor of Science in Agriculture (BSAgri)
- Bachelor of Secondary Education (BSEd) (Math)
- Bachelor of Elementary Education (BEEd)
- Bachelor of Science in Information Technology (BSIT)
- Bachelor of Science in Hospitality Management (BSHM)

Last School Attended: _____

Year Graduated: _____

Academic Strand: _____

Date of Birth: _____

Permanent Address: _____

Permanent Address: _____

Contact No.: _____ Email Address: _____

Father's Name (First Name, Middle Name, Last Name): _____

Mother's Name (First Name, Middle Name, Last Name): _____

Guardian's Name (First Name, Middle Name, Last Name): _____

Requirements:

- One Piece 2X2 ID Picture with white background
- Photo copy of Form 138A (3rd quarter or 1st semester) / Certificate of Rating for Alternative Learning System (ALS)/ Transcript of Records (TOR) for Transferees

Testing Schedule: _____ Time: _____

Testing Permit No: _____



Testing Permit No: _____

Name of Applicant: _____

Testing Schedule: _____ Time: _____

Verified by: _____

Signature over Printed Name

***Note: Please bring 2 pencils with eraser. Please come 20 minutes before the test starts. NO Permit, NO Entrance Test.**