



Republic of the Philippines  
DEPARTMENT OF EDUCATION  
National Capital Region  
MAKATI SCIENCE HIGH SCHOOL  
City of Makati  
INFORMATION SHEET



NOT FOR SALE MAY BE  
REPRODUCED ALL  
ENTRIES /SIGNATURE  
IN THIS FORM MUST BE  
ORIGINAL

Once officially stamped, DO  
NOT detach photo. Missing  
stamped photo will make  
this info null and void.  
Attach another copy of the  
1"x1" photo for the test  
permit

for the

**MAKATI SCIENCE HIGH SCHOOL 2016 ADMISSION TEST**

Instruction: Write clearly in the box provided or check the box for the appropriate answer. Avoid erasures. For any erasure, the applicant should countersign the item corrected along the page margin. PLEASE ANSWER ALL ITEMS

**Deadline for Submission:** 05 January 2016 (Tuesday) **Date of Examination:** 09 January 2016 (Saturday)

LAST	
FIRST	
MIDDLE	
Signature of Examinee	

2. Sex  Male  Female 3. Citizenship

4. Date of Birth  5. Place of Birth

6. Contact Number: Landline  Cell Phone No.  Email Address

7. Permanent Address

8. Number of Children in the family  9. Birth Order of Applicant (1st child, 2nd child, etc.)

10. Name (Put Family Head* as first in the list; include name of applicant) (1)	Relationship to Applicant (2)	Age (3)	Civil Status (4)	Highest Educational Attainment (Specify grade, year or degree) (5)	Grade or Year Attending if Currently in School (6)	Occupation of Working Family Member (7)	Class of Worker (See codes below) (8)	Gross Income for the Year 2015 (in pesos) (9)

11. Elementary School (Where applicant completed/is completing elementary education)		
12. Name of elementary School (Do not Abbreviate)		
13. Former Name (if any)		
14. Elementary School Mailing Address (Number and Street, Subd. Village Barangay, City Town Province)		
15. Date Established	Telephone/Mobile Nos.	Email Address:

16. Type of School  Public  Private

17. School Marking System (For letter grades, please attach a copy of the Grading Scale with the numeric equivalent of each grade in the scale.)

Highest Possible Grade	
Passing Grade	
Lowest Possible Grade	

SUBJECT	School Year _____ Grade IV Final Grade	School Year _____ Grade V Final Grade	School Year _____ Grade VI Final Grade	
			1 <sup>st</sup> Quarter Grade	2 <sup>nd</sup> Quarter Grade
English				
Filipino				
Mathematics				
Science/Health				
Heograpiya/Kasaysayan				
Sibika (HKS)				
EdukasyonPantahanan at Pangkabuhayan (EPP)				
Musika,Sining at EdukasyonPagpapalakas ng Katawan (MSEP)				

Affixed here is the school dry seal  
 This school has no dry seal  
\_\_\_\_\_  
Date

I certify to the completeness and correctness of the foregoing record  
\_\_\_\_\_  
School Head's Official Designation  
Signature over printed name

**FORM A**

**CERTIFICATE OF GOOD MORAL CHARACTER**

TO WHOM IT MAY CONCERN:

This is to certify that \_\_\_\_\_ has consistently maintained good moral character, there having no disciplinary action taken against him/her as of the date of application.

\_\_\_\_\_  
Printed Name & Signature of Principal/Guidance Counselor  
Date: \_\_\_\_\_

**FORM B**

**PRINCIPAL CERTIFICATION**

Name of Elementary School \_\_\_\_\_  
Address \_\_\_\_\_

TO WHOM IT MAY CONCERN:

This is to certify that \_\_\_\_\_ is a candidate for graduation for the school Year 2015-2016 and is classified within the upper ten percent of the total \_\_\_\_\_ graduating pupils.  
Number

\_\_\_\_\_  
Printed Name & Signature of Principal  
Date: \_\_\_\_\_

**FORM C**

**PARENT'S CERTIFICATION**

This is to certify that my son/daughter, \_\_\_\_\_, has no pending application for immigration to the USA or any other country.

\_\_\_\_\_  
Printed Name & Signature of Parent

**FORM D**

**CERTIFICATE OF RESIDENCY**

TO WHOM IT MAY CONCERN:

This is to certify that \_\_\_\_\_ is a bonafide resident of \_\_\_\_\_  
\_\_\_\_\_ for \_\_\_\_\_ years/months

\_\_\_\_\_  
Printed Name & Signature of Barangay Official/Principal

**FORM E**

**HEALTH CERTIFICATE**

Date: \_\_\_\_\_

TO WHOM IT MAY CONCERN:

This is to certify that I have examine \_\_\_\_\_ And found him/her to be physically fit.  
Name of Applicant

This certification is issued in connection with his/her application for the MAKATI SCIENCE HIGH SCHOOL ADMISSION TEST.

\_\_\_\_\_  
Printed Name & Signature of Medical Officer

\_\_\_\_\_  
Official Designation/License No.