

Cagayan State University
Office of the Campus Registrar at:

registrar.gonzaga@csu.edu.ph For announcements, visit us online at: http://gonzaga.csu.edu.ph/ The Office of the CEO -CSU G

0993-568-4238

Republic of the Philippines

CAGAYAN STATE UNIVERSITY

Office of Student Records Management Services Campus: _

E N

Please complete in BLOCK CAPITALS, write legilbly, use ballpen and avoid erasures. For items that have choices, put an X mark on the circle.

F-REG-2710

my knowledge. Withholding or giving false information will make me ineligible for admission or subject to dismissal. If admitted, I agree to abide by the policies, rules

Signature over PRINTED NAME

FRONT FACING PHOTO

TAKEN WITHIN THE LAST
THREE (3) MONTHS.

Name:	First Name		Middle Name
Date of Birth:		Δσε.	Religion:
Sex: Male Female Nationalit			
Civil Status: OSingle OMarried			
Facebook/Messenger Account:	1	(Last	t name,First Name Middle Name)
Home Address:			Province
If boarding, Boarding Address:	Street Berengey/Zene	Town/City	Province
Name of Landlord/lady or Guardia			
Degree/Program applied for:			
EDUCATION DATA			
,			
Elementary:		Scho	ol Address:
Secondary: OHigh School OSe			
Track and Strand last attend		-	
Name of Secondary School:			
Are you a scholar? Oyes No		program?	
Are you a transferee? Yes ON If YES, what school and cou			
Organizations you are a member o Name of Orga			Position
Name of Orga	mzation		TOSITION
FAMILY DATA			
FATHER: OLiving ODeceased			
MOTHER: OLiving ODeceased	Name:	Con	itact No:
		Children in the Fam	
Total annual family income:	Age	Highest Education	al Attainment - Schoo
Total annual family income: Name of Sibling/s (Eldest to yougest)	rige	U	
-			
-			
-			
-			
-			

and regulations of Cagayan State University.

Date:_

SOCIO-ECONOMIC PROFILE OF STUDENT

1.	Family income bracket:5,000 and below per month	10,001 to 2	0,000 per month	30,001 to 40),000 per month
2.	5,000 and below per month 5,001 to 10,000 per month Our family resides in:			40,001 and	above
	our own housean apartr a rented housea house c	ment owned by relative	es (nakikitira)		
3.	Father's occupation:	4.	Mother's Occupation	n:	
5.	How many siblings (brothers and sisters)				
6.	How much is your daily allowance?below PHP 50 pesos per day (pleasePHP 50 pesos per dayPHP 60 pesos per dayPHP 70 pesos per day		80 pesos p	y to 100 per day	ease specifiy:)
7.	Your applied for enrollment at the CagaEducation is completely freeStudies are easier at CSUThe graduates of CSU are preferredMy friends enrolled here.				
8.	Which of the following documents can you Income Tax Returns BIR Certificate of Tax Exemption DSWD Listahan Certificate DSWD 4Ps Certification NCIP Certification of Membership in DSWD Certificate of Indigence	•		economic status?	
9.	Are you a member of an indigenous culto Commission on Indigenous Peoples? Yes; please specify(tional No	
10	What language do you speak at home?				
10.	lbanagllocanoltawes	English Other	s (Please specify):		
		Andrews Tuguega	ministration and Fir Campus rao City		
	l _c			, with	address at
	College of	l mobile phone r		FIRST semester of	_enrolled or enrolling Academic Year 2023-
1. I n n 2. I ir 3. I to 4. I n n b 5. I U	do hereby declare under oath that: have been made aware that under the hiscellaneous FEES, UNLESS I elect to opt out can avail of the benefits of R.A. 10931 Of including academic and disciplinary required cknowledge that I am granted these bere of perform my civil duties as well as to serve am not a member of any organization the evolution or recession, nor I am a member by the Administration of the Cagayan Statemave been apprised of the rules of disciplinative sity. OR THE FIRST SEMESTER of Academic Year I wish to avail myself of	of the scheme, NLY if I meet the ements and requestion of the Republic; nat advocates the of any society, the University; ne of the University at the benefits of Reference of Reference to the University of the	; ADMISSION AND RE- isites; ernment of the Repu ne violent overthrow fraternity, sorority or o ty, and that I submit r SE CHECK) epublic Act. No. 1093	TENTION requiremed blic of the Philippin of the government organization that in myself to the disciples.	ents of the university, nes and am prepared nt, or that advocates s not duly accredited
In the	full knowledge that this option shall bind i				
	Student's Printed Name of	and Signature	D	ate	
Sign i	n the presence of:				
	A STATE OF THE STA				