



THE PALMTRIDGE SCHOOL

Preschool • Grade School • High School

Level: _____

(For PS - Gr. 3) Preferred Slot: AM PM

STUDENT'S ENROLLMENT FORM (OLD STUDENT)

S.Y. _____ - _____

Administrative Copy: **Please fill out ALL information ACCURATELY, COMPLETELY, and tick appropriate boxes.**

STUDENT'S INFORMATION		DepEd Learner Reference Number		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>				
Student's Legal Name: _____																								
<small>(PSA/NSO Birth Certificate)</small>																								
Surname					First Name/s					Middle Name					Nickname									
Date of Birth: _____					Age: _____					Gender					<input type="checkbox"/> Male <input type="checkbox"/> Female									
<small>Month</small>					<small>Date</small>					<small>Year</small>														
Place of Birth: _____										Citizenship: _____														
<small>City</small>										<small>Country</small>														
<input type="checkbox"/> Roman Catholic					<input type="checkbox"/> Christian					<input type="checkbox"/> Muslim					<input type="checkbox"/> Others: please specify _____									
Mother Tongue: _____										Ethnicity (ex: Bicolano, Igorot, Ilocano, etc.) _____														
Home Address: _____																								
<small>House No. & Street</small>					<small>Village/Subdivision</small>					<small>Town/City</small>					<small>Country</small>					<small>Zip Code</small>				
Name/s of Sibling/s enrolled in The Palmtree School																								
Name/s					Level					Name/s					Level									
_____					_____					_____					_____									
_____					_____					_____					_____									
_____					_____					_____					_____									
PARENTS'/GUARDIAN'S INFORMATION										Age: _____ Religion: _____														
Father										Home Phone No./s: _____														
Surname					First Name/s					Middle Name					Mobile No./s: _____									
Occupation/Position: _____										Business Tel. No./s: _____														
Company Name: _____										E-mail Address: _____														
Company Address: _____																								
Mother										Age: _____ Religion: _____														
Surname										Home Phone No./s: _____														
First Name/s					Middle Name					Mobile No./s: _____														
Occupation/Position: _____										Business Tel. No./s: _____														
Company Name: _____										E-mail Address: _____														
Company Address: _____																								
Guardian										Age: _____ Religion: _____														
Surname										Home Phone No./s: _____														
First Name/s					Middle Name					Mobile No./s: _____														
Occupation/Position: _____										Business Tel. No./s: _____														
Company Name: _____										E-mail Address: _____														
Company Address: _____																								
Please indicate to whom The Palmtree School should address school communication letter:																								
<i>Ex: Atty. & Mrs. Alfredo M. Santos, Dr. & Mrs. Alberto C. Santiago, Mr. & Mrs. Juan S. Dela Cruz, Ms. Susan G. Cruz, Mr. Jose L. Reyes</i>																								

If any of the above information changes during the course of the school year, please fill out a new form at the Registrar's Office immediately.

I/We understand that as parents/guardians, I/we shall abide by this learning institution's existing policies, rules, and regulations.

Parent's/Guardian's Signature above Printed Name

Date