For	m	1



STUDENT INFORMATION SHEET

	Incoming Grade Level For SHS Applicant, Strand:			School Year 20 20		
	school Applicant, Gen					
IAME						
(Last Name)		st Name)	(M	(Middle Name) (M.I.)		
Nickname	Religion			Age		
Birthdate	Place of Birth		Citizenship			
lome Address						
Residence Phone	Mobile _		E-mail _	E-mail		
Buardian	R	elationship to S	Student			
lome Address			Mobile			
ducation History (List all pre	vious schools attende	ed, starting with	n the current scho	ool)		
Name of School	From (Month - Year)	To (Month - Year)	Grade	Reason for	Leaving	
		<u> </u>				
			 			
las your child skipped a grade	Level? No	Vac M	What Level/s?			
las the applicant ever received						
Please state reason/s:			,11001: 140	163		
cholastic Achievements						
Awards, Citations, or Honors Received		Year		School		
xtracurricular Involvement	•					
Clubs or Organization		Position		School		
			_			



Health Information

nearth information		
Has your child received any intervention or rec	ommeno	lation? Kindly check the box/es that apply.
Development Pediatrician		Physical Therapist
☐ Child Psychologist/Psychiatrist		Ophthalmologist
Reading Specialist		SPED Tutor / Specialist
☐ Speech Therapist		Others
☐ Occupational Therapist		
Does your child have any allergies (to medicating Please specify known allergies	ion, food	or others) that you are aware of? No Yes
Note for parents: Should you check any of the species clearance/report. The Rosehill Guidance Office will		above, please submit a copy of your child's recent medica ate with you for more information.
Agreement By signing below, we, the parents agree to the f	_	
 All information provided in Forms 1 and 2 in the right to withhold the application, admissing information provided requires verification or if m 	ion, or e	• •
 Parents will provide the necessary supporti to aid in making informed decisions regarding th These documents may include but are not limite individual education plans, progress reports, etc. 	ne applicated to, psy	
 Parents authorize PAREF Rosehill School t of obtaining and verifying student records. 	to contac	et the applicant's former school(s) for the purpose
access, disclosure, and sharing of personal info not be disclosed, distributed, or shared with indi This information will only be used for the legitim	y Act of 2 to safeguesions on ormation. ividuals rate purpose	2012, its implementing rules, and other relevant uarding the privacy of your personal information the collection, use, storage, retention, disposal, The information collected through this form will
Conforme:		
Father's Name and Signature Date:		Mother's Name and Signature Date: