

ANNEX 1

**MODIFIED BASIC EDUCATION ENROLLMENT FORM**

THIS FORM IS NOT FOR SALE.

|  |  |
| --- | --- |
|  | *Check the appropriate box only:* |
| School Year: |  |  |  |  | - |  |  |  |  |  |  | No LRN |  | With LRN |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Grade level to Enroll:  |  |  |  |  |  |  |  |  | Returning (Balik-Aral) |

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| **INSTRUCTIONS:** | *Print legibly all information required in CAPITAL letters. Submit accomplished form to the Person-in-Charge/Registrar/Class Adviser. Use black or blue pen only.* |

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| **STUDENT INFORMATION** |
|  |
| PSA Birth Certificate No. (if available upon registration)  |  |  |
|  |  |
| Learner Reference No. (LRN) |  |  |  |  |  |  |  |  |  |  |  |  |
|  |
|  |
| LAST NAME |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |
| FIRST NAME |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |
| MIDDLE NAME |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |
| EXTENSION NAME e.g. Jr., III (if applicable) |  |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| DATE OF BIRTH(Month/Day/Year) |  |  | / |  |  | / |  |  |  |  | SEX |  | MALE |  | FEMALE |  | AGE |  |
|  |
| Belonging to any Indigenous Peoples (IP) Community/Indigenous Cultural Community? |  | No |  | Yes | If Yes, please specify: |  |
|  |  |
| Mother Tongue |  |  |
| **ADDRESS** |
| House Number and Street |
| Barangay |
| City/Municipality/Province/Country | Zip Code |  |  |  |  |

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| **PARENT’S/GUARDIAN’S INFORMATION** |
| Father’s Name (Last Name, First Name, Middle Name) |  | Mother’s Maiden Name (Last Name, First Name, Middle Name) |
| Guardian’s Name (Last Name, First Name, Middle Name) |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Telephone No. |  | Cellphone No. |  |

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| **For Returning Learners (Balik-Aral) and Those Who Shall Transfer/Move In** |
|  |
| Last Grade Level Completed |  | Last School Year Completed |  |
|  |  |
| School Name |  | School ID |

|  |  |  |  |  |  |
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|  |  |  |  |  |  |

 |
| School Address |  |

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| **For Learners in Senior High School** |
| Semester |  | 1st Sem |  | 2nd Sem |
|  |
| Track |  | Strand (if any) |  |

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| --- | --- | --- | --- |
|  |  |  | **Preferred Distance Learning Modality/ies**  |
|  |  |  |  |  |
|  | Modular (Print) |  | Online  |  | Radio-based instruction  |  | Blended |  |  |  |  |
|  |  |  |  |  |  |  | Homeschooling |
|  | Modular (Digital) |  | Educational TV |  | Homeschooling |  |

I hereby certify that the above information given are true and correct to the best of my knowledge and I allow the Department of Education to use my child’s details to create and/or update his/her learner profile in the Learner Information System. The information herein shall be treated as confidential in compliance with the Data Privacy Act of 2012.

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|  |  |  |
| Signature Over Printed Name of Parent/Guardian |  | Date |