

STUDENT INFORMATION SHEET AND ASSENT FORM

PLEASE PRINT LEGIBLY

Student Number	FAMILY Name, FIRST Name, MIDDLE Name (<u>ENCIRCLE</u> Maiden name if married)	Course & College
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Complete **PERMANENT** Address (House No., Street, Purok/Barangay, City/Province, Zip Code)

Telephone Number	Cellphone Number	Email Address
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Address while **ENROLLED** in UP Mindanao

Place of Birth	Date of Birth (Month/Date/Year)	Gender (Please <u>ENCIRCLE</u> answer) 1 Male 2 Female	Citizenship (Please <u>ENCIRCLE</u> answer) 1 Filipino 2 Others _____
Civil Status	Religion/Belief	Cultural Group	For PWD (kindly indicate disability)

<u>FOR INCOMING FRESHMAN</u>	<u>FOR GRADUATE STUDENT & TRANSFEREE</u>
Name of Senior High School :	Previous School Attended:
School Address: Student Learner's Reference No. _____	School Address:

For FRESHMEN ONLY, PLEASE DO NOT LEAVE BLANK:

Date of Graduation (Month/Date/Year): _____ Academic Honors Received (If not applicable, write N.A.): _____

Type of School (Please <u>ENCIRCLE</u> answer)	Annual Family Income (Indicate the numeric value on the space below:)
1 Public General 5 UP Administered 2 Public Special 6 Private Sectarian 3 Public Vocational 7 Private Non-Sectarian 4 Public Barangay 8 Private Vocational	PhP _____

Name of <u>FATHER</u>	Contact No./E-mail	Occupation
Employer	Employer's Address & Contact Number	
Name of <u>MOTHER</u>	Contact No./E-mail	Occupation
Employer	Employer's Address & Contact Number	

Name of <u>GUARDIAN or SPOUSE/PARTNER</u> , please <u>ENCIRCLE</u> answer	Contact No./E-mail	Occupation
Employer	Employer's Address & Contact Number	

For GRADUATE SCHOOL STUDENT ONLY:

Present Occupation	Designation
Name of Employer	Address
	Contact No./Email

I have read the University of the Philippines' Privacy Notice for Students.

I understand that for the UP System to carry out its mandate under the 1987 Constitution, the UP Charter, and other laws, that the University must necessarily process my personal and sensitive personal information.

Therefore, I grant my consent to and recognize the authority of the University to process my personal information pursuant to the abovementioned Privacy Notice and other applicable laws.

DATE: _____

SIGNATURE of STUDENT: _____