## De La Salle-College of Saint Benilde

2455 Taft Avenue, Manila, Philippines 1004



## PIERRE ROMANCON GRANT (PRG)

## Dear PRG Applicant,

Please su	ubmit this checklist with the following requirements. Email all requirements in ONE email
to schol	arshipapplications@benilde.edu.ph
L   L   L   C   Fr   C   C   C   C   C   C   C   C   C	atest Water billing statements and official receipts of the last 3 months atest Electric billing statements and official receipts of the last 3 months atest Landline billing statements and official receipts of the last 3 months atest Cellular Plan billing statement and official receipts of the last 3 months atest Internet billing statement and official receipts of the last 3 months official receipts of monthly house rent of the last 3 months (updated or certification rom the landlord)  Official receipt of monthly house amortization (lealty tax declaration and the official receipt of the past year patest pay slips of the last 3 months (Parents, Siblings and Applicant)  Certificate/ Contract of Employment with Compensations (Parents, Guardians, Siblings)  Note: If applicant is working, Letter of Recommendation of employer is required.  OTI or Municipal Business Permit, Income Tax Return, Balance Sheet, and Financial statement of parents  Pension Voucher and retirement documents of parents or guardians if applicable  Death certificate of either parent, guardian or any immediate family member if applicable  Death certificate & laboratory test results of a reported medical concern of a family member of applicable  Documents of any kind that you are sponsored by others besides your parents or guardian if applicable  Documents of any kind that your family has made outstanding loans to any institution or person applicable  Documents of the house (front, back, all rooms)
	The Center for Admissions- Scholarships and Grants reserves the right to request for others as needed.
Incom	plete requirements will not be processed.
Thank yo	ou!
Center fo	or Admissions- Scholarships and Grants
	stand that the information in this checklist is required for evaluation and assessment of ication for a financial aid grant to the De La Salle-College of Saint Benilde.
_	Applicant's Name Parent's / Guardian's

\*Guardian has to be at least 5 years older than the applicant and can prove relationship with applicant is required

Signature over printed name

Signature over printed name