



De La Salle-College of Saint Benilde

Center for Admissions
 2544 Taft Avenue Malate, Manila, Philippines 1004
 Tel no: +63 2 8230-5100 local 1803
 Email: seniorhighschool.application@benilde.edu.ph

Name of Applicant: _____ Sex: _____
 Surname First name Middle name
 School: _____ Years Attended: _____ to _____
 School Address: _____

To the Applicant: Write the information needed above and give this form to the Registrar’s Office.

Verification/Authorization: I voluntarily and knowingly consent to the processing of the information contained in this form and its disclosure to Benilde Center for Admissions for purpose of assessing my application.

 Printed Name & Signature of Applicant Date Printed name and Signature of Parent/Guardian Date

To the Registrar: Please type the student’s final grades for the following subjects. For failing grade/s, please indicate the summer grade/s. For letter grades, please indicate the numerical equivalent if available. If unavailable, please attach a copy of the grading system. Upon completion, please place your School Dry Seal to authenticate the information. Thank you very much.

LEARNER REFERENCE NUMBER

SUBJECT	FINAL GRADES			AVAILABLE	AVERAGE (DO NOT FILL)
	Grade 7 SY ____ to ____	Grade 8 SY ____ to ____	Grade 9 SY ____ to ____	Grade 10 SY ____ to ____	
FILIPINO					
ENGLISH					
MATHEMATICS					
SCIENCE					
SOCIAL STUDIES					
CONDUCT/DEPORTMENT <small>If there are no conduct/deportment grades, please indicate the homeroom grades.</small>					

Certified Correct By: _____ **GENERAL AVERAGE**
 (DO NOT FILL)

 Printed Name & Signature

 Designation

 Date

 Contact Number

PLACE
 SCHOOL DRY SEAL
 HERE

NOTE: Applicants who studied abroad should submit an apostille/authenticated Transcript of Records by the Philippine Foreign Service Post.