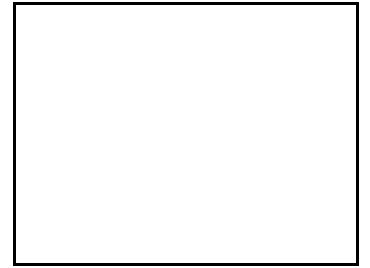




**Philippine Cultural College**  
**APPLICATION FORM**

Level applied for  
English \_\_\_\_\_  
Chinese \_\_\_\_\_



中文姓名 Chinese Name:	英文姓名 English Name:	性别 Gender:	年龄 Age:
地址 Address:	出生日期 Birthday:	国籍 Citizenship:	
	电话 Contact numbers:		

父亲中文姓名 Father's English Name:	母亲中文姓名 Mother's English Name:
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Previous Education	Name of School	Inclusive Level	School Years attended
托儿班 Nursery			
幼稚园 Kindergarten			
小学 Elementary			
初中学 Junior HS			
高中学 Senior HS			

申请转来理由  
Reason for transfer

Brothers &/ Sisters	姓名	Name	年龄 Age	Relationship	Occupation	

以上所填皆属实 I certify that the information above is true and correct.  _____ Parent's signature over printed name	Department	Signature	Date
	Office of Student Affairs		
	Discipline Office		
	English Department		
	Chinese Department		
	Kindergarten Department		
	Accounting Department		

English Test Permit Name: Test Level Testing Date / Time Room Number Issuing personnel signature	中文准考试证 学生_____ 经初次审查后合格, 准予参考 _____ 年级入学考试。考试日期_____ 时间: _____ 地点: _____ 教务主任签盖: _____ 注: 考试结果于考试五天后公布
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