

Name of landlord/landlady _____
What is his/her contact number? _____

How much is the monthly rent? _____
(*Please attach original and photocopy of official receipt of the last 3 months.)

How much is the average monthly bill for
Electricity? _____
(*Please attach original and photocopy of billing statement or official receipt of the last 3 months.)
Water? _____
(*Please attach original and photocopy of billing statement or official receipt of the last 3 months.)

SCHOOLING

Name of high school attended _____
Address _____
Period enrolled: Year _____ to Year _____
If not graduated, reason(s) for stopping _____
Schooling financed by (*Encircle*) Self / Parents / Relative / School Scholarship / Educational Plan / Government Grant

Name of vocational school attended (if any) _____
Address _____
Period enrolled: Year _____ to Year _____
If not graduated, reason(s) for stopping _____
Schooling financed by (*Encircle*) Self / Parents / Relative / School Scholarship / Educational Plan / Government Grant

Name of college attended (if any) _____
Address _____
Period enrolled: Year _____ to Year _____
If not graduated, reason(s) for stopping _____
Schooling financed by (*Encircle*) Self / Parents / Relative / Scholarship / Educational Plan / Government Grant

WORK (This section is only for applicants who are working.)

Do you derive your income from (*Encircle*)
Employment / Registered Business / Others (*Please specify*) _____

If currently employed,
Name of company _____
Company address _____
Name of immediate superior _____
His/her contact number(s) _____
(*Please attach a recommendation letter from your immediate superior.)

Employee status (*Encircle*) Contractual / Probationary / Permanent
Job or responsibilities _____
Period of employment: Month/Year _____ to Month/Year _____

Average monthly salary/wage _____
(*Please attach original and photocopy of (a) Income Tax Return or Certificate of Employment and Compensation, and (b) payslips of the last 3 months.)

If engaged in registered business,
What kind of business? _____
Name of business _____
Business/shop/stall address _____

Average monthly business income _____
(*Please attach original and photocopy of (a) Income Tax Return, and/or (b) DTI or municipal business permit.)

If other than employment or registered business,
What is the source of your income? _____
Average monthly income _____
(*Please attach original and photocopy of Income Tax Return.)

In case you lose your job or business for any reason, who will support you while you are studying? _____

Other work experiences (*Begin with the most recent job.*)

Your Monthly Salary	Period	Name of Company	Address	Immediate Superior	Contact Number

FAMILY DATA

PARENTS

Please attach a letter from either of your parents explaining your current financial need and the reasons for such a need. If either parent or both are deceased, please attach a photocopy of death certificate/s. *(Supply the indicated information on your family, including the required documents or proofs of income similar to those asked for in the previous section.)*

RELATION	FATHER	MOTHER
NAME		
AGE		
CIVIL STATUS		
MAILING ADDRESS		
EDUCATIONAL ATTAINMENT		
SCHOOL OR COLLEGE		
OCCUPATION		
NAME OF COMPANY		
TELEPHONE NO.		
EMAIL ADDRESS		
AVERAGE MONTHLY INCOME	*	*

Are both your parents still living together? ☐ Yes ☐ No
If No, when did the separation happen? _____
With whom are you staying? _____
Are you receiving financial support from your other parent? _____
*(*Please attach a letter stating your parents' agreement on financial obligations.)*

BROTHERS/SISTERS *(Please attach additional sheet if necessary.)*

RELATION	SIBLING 1	SIBLING 2	SIBLING 3
NAME			
AGE			
CIVIL STATUS			
EDUCATIONAL ATTAINMENT			
SCHOOL OR COLLEGE			
OCCUPATION (or Year/Level)			
NAME OF COMPANY			
TELEPHONE NO.			
AVERAGE MONTHLY INCOME	*	*	*

HOUSE COMPANIONS *(Please attach additional sheet if necessary.)*
(Supply the indicated information on who stays with you and your family, including the required documents or proofs of income similar to those asked for in the previous section. If some persons are the same as above, write only their names.)

RELATION			
NAME			
AGE			
CIVIL STATUS			
EDUCATIONAL ATTAINMENT			
SCHOOL OR COLLEGE			
OCCUPATION (or Year/Level)			
NAME OF COMPANY			
TELEPHONE NO.			
AVERAGE MONTHLY INCOME	*	*	*

OTHER DATA

Do you have relative/s who have received grants from Benilde? ☐ Yes ☐ No

If Yes, name/s _____

What is their relation to you (respectively)? _____

In which course/program were they enrolled (respectively)? _____

In which year did they start the course/program (respectively)? _____

Do you have relative/s who work abroad who help out in your finances ? ☐ Yes ☐ No

If Yes, name/s _____

What is their relation to you? _____

How much money do they send monthly on the average? _____

Do you have other relative/s in the Philippines who help out in your finances? ☐ Yes ☐ No

If Yes, name/s _____

What is their relation to you? _____

How much money do they send monthly on the average? _____

How many household help are living with your family?

HOUSEHELP	NUMBER	MONTHLY SALARY	HOUSEHELP	NUMBER	MONTHLY SALARY
Maid	_____	_____	Houseboy	_____	_____
Yaya	_____	_____	Cook	_____	_____
Laundrywoman	_____	_____	Driver	_____	_____

Does your family have any of the following appliances? *(Please indicate the number of units.)*

UNIT	NUMBER	UNIT	NUMBER	UNIT	NUMBER
Television	_____	CD player	_____	Cordless phone	_____
Stand/Desk fan	_____	Freezer chest	_____	Rice cooker	_____
VHS	_____	Karaoke	_____	Computer	_____
Ceiling/Wall fan	_____	Electric/Gas stove	_____	Blender/Osterizer	_____
DVD	_____	Videoke	_____	Computer games	_____
Air-conditioner	_____	Gas range with oven	_____	Electric Thermos	_____
Radio	_____	Piano/Electric organ	_____	Camera	_____
Washing machine	_____	Microwave oven	_____	Floor polisher	_____
Stereo	_____	Extension phone	_____	Video camera	_____
Refrigerator	_____	Toaster	_____	Vacuum cleaner	_____

Does your family have any of the following means of transportation? *(Please indicate the number of units.)*

UNIT	NUMBER	UNIT	NUMBER	UNIT	NUMBER
Car	_____	Owner-type jeep	_____	Tamaraw/FX	_____
Bicycle	_____	Pedicab	_____	Tricycle	_____
Van	_____	Passenger-type jeep	_____	Pick-up	_____
Bicycle with side car	_____	Motorcycle	_____	Truck	_____
				Bus	_____

Do you have a passport? ☐ Yes ☐ No

If Yes, when was the last time you used it? _____

For what purpose? _____

Who financed the trip? _____

Is this your first time to apply in Benilde? ☐ Yes ☐ No

If No, date of previous application _____

Have you availed of any scholarship or grant? _____

If Yes, please indicate which level ☐ grade school ☐ high school

Please state the name of scholarship _____

How long (in terms of school years) were you a grantee? _____

How did you learn of Benilde’s scholarship/financial assistance program? (Tick all that apply.)

Through	<input type="checkbox"/> Benilde website	<input type="checkbox"/> Career talk in our school
	<input type="checkbox"/> Other websites (Please specify)	<input type="checkbox"/> Advertisements/posters posted in my school
	<input type="checkbox"/> Inquired by visiting the College	<input type="checkbox"/> Relative <input type="checkbox"/> Friend <input type="checkbox"/> Acquaintance
	<input type="checkbox"/> Inquired by email	<input type="checkbox"/> Teacher <input type="checkbox"/> Counselor <input type="checkbox"/> Principal
	<input type="checkbox"/> Inquired by phone	
	<input type="checkbox"/> Inquired at the Student Grants Office	
	<input type="checkbox"/> Newspaper advertisement	
	Which newspaper? _____	
	<input type="checkbox"/> Newspaper article	
	Which newspaper? _____	

What would be your daily mode of transportation to and from Benilde? *(Encircle)*

Family-owned vehicle / Carpool / Motorcycle / Public transport / Bicycle / Walking

If by public transport, what is the cost per day (going to school and going home)? Php _____

VICINITY SKETCH OF RESIDENCE (For background investigation)

Draw a map that shows how to get from your residence to Benilde. Indicate landmarks and names of major streets and use an “X” to mark your house on the map.

A large, empty rectangular box with a thin black border, intended for a hand-drawn map showing the route from a residence to Benilde. The box occupies the majority of the page below the instructions.

CONFORME

Carefully read and understand the following conforme before you print your name and sign above it.

I hereby certify, upon my honor, that the information given herein and in the accompanying documents is complete and accurate. I also hereby authorize the Student Grants Office (SGO) Director or his/her representative to check on the veracity of the information and authenticity of the documents I have given.

I am aware that any falsification or withholding of information will automatically nullify my application. Furthermore, if such falsification or withholding of information on my part is discovered after I have been awarded financial assistance, I will be required to reimburse the College all tuition and fees that had been subsidized by the College plus all the legal rate of interest prevailing at the time of the reimbursement and to pay all tuition and fees thereafter.

If I qualify for the grant, I know that the commission of any major offense as stipulated in the Benilde Student Handbook will automatically result in the permanent discontinuance of any financial assistance given to me. I also understand that the College expects me to finish my course/degree in the least time possible, abide by the policies governing the grant I am applying for, and fulfill the responsibilities attached thereto.

Printed Name & Signature of Applicant

Printed Name & Signature of Parent(s)/Guardian

Date

ACKNOWLEDGEMENT

(Please have this document notarized.)

REPUBLIC OF THE PHILIPPINES

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BEFORE ME, a Notary Public for and in the above jurisdiction, this _____ day of _____, _____, personally appeared (*Name of Applicant*) _____ with Community Tax Certificate # _____ issued at _____ on _____, and (*Name of Parent/Spouse/Guardian*) _____ with Community Tax Certificate # _____ issued at _____ on _____, known to me to be the same persons who executed the foregoing instrument and all attachments and acknowledged to me that the same is their true, free and voluntary act and deed.

IN WITNESS WHEREOF, I have hereunto set my hand and seal on the date and place herein above stated.

NOTARY PUBLIC

Doc. No. _____
Page No. _____
Book No. _____
Series of _____