



Leadership Camp 2008

Office of Student Leadership, Involvement, Formation and Empowerment

Please type or print all entries. Use additional sheets if necessary.

Submit all requirements (application form, 1 x1 picture & Certificate of Good Moral) in a brown envelope on or before September 24, 2008.

Full Name			Nickname		
ID Number		Year/Course		Date of Birth	
Address					
E-mail Address					
Mobile Phone No.			Landline		
Languages Spoken			Religion		
Skills/Hobbies/Interests					
Medical Background					
Illness/ Allergy/Recent Surgery			Medication Taken		
Family Information					
Father's Name			Mother's Name		
Occupation			Occupation		
Business Address			Business Address		
Telephone			Telephone		
Education					
	Institution	Year Graduated	General Average	Academic Awards Received	Special Awards Received
Elementary					
High School					
Seminars/Contests/Workshops Attended					
Term GPA			Cumulative GPA		



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Co-& Extra-Curricular Information			
Organization	Position	Activities Initiated	Year

What influenced you to join the Leadership Camp? Please be as specific as possible.

Statement of Application Integrity

I hereby certify that I have provided accurate information in this application. I authorize all persons or entities to provide any relevant information in their possession to the Office of Student LIFE or its agent for use in considering me for admission to the Leadership Camp. I expressly waive any required notice to me. I understand and agree that my misrepresentation or omission of facts in my application will justify the denial or cancellation of admission to the program. This application is my own honest statement to the Screening Committee.

Signature	Date
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Do not write on the space below. For Student LIFE use only.

Checklist of Requirements	
Completed Application Form	
One 1x1 ID picture	
Certificate of Good Moral Character	

Please attach 1x1 ID picture here

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Kindly show this stab to the Accounting Office.

TO : ACCOUNTING OFFICE
FROM: OFFICE OF STUDENT L.I.F.E.

Please credit the amount of **Php 1000** to the ***MOVE* Depository Fund**
(Acct. No. 600-024).

Thank You.

Name of Student: _____