

2 x 2 ID Photo

Undergraduate Scholarship Appeal Application Form (for Current DLSU Students)

Date of Application		AY / Term
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Number of times you applied for scholarship appeal (excluding this one)

1. PERSONAL INFORMATION

Name (Last, First, Middle)							
ID No.	Gender			Civil Status	vil Status Citizenship		
College/School				Degree Coo	de	_	
Remaining Terms (term)	excluding this			CGPA	-		
Date of Birth				Place of Bir	th		
Address					Tel. N Mobil	No./ le No.	
					Email	l address	
of application for	cumstances / reasons scholarship appeal ements e.g. due to						
2. FAMILY RESID	ENCE INFORMATION						
Classification of the house your family is staying	Owned, not mortgaOwned, mortgaged	•		ly amortizat	ion	annua	nt of realty tax being paid ally
in	Rented		Month	ly rental			
	□ Rent free / Living v □ Others, please spec		٢				

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Approximate house	e floor area	a sq. m.	Number of bedrooms	Number of toilets and bathrooms	Do you have a swimming pool? □ Yes □ No
Do you stay in an apartment /	□ Yes □ No	If Yes, Address			Monthly rent? P
boarding house / room for rent?					

3. OTHER STUDENT INFORMATION

Brother / Sister enrolled in an undergraduate program in DLSU

Name		ID Number	Colle	ege	Program		Civil Status		urrently Salle So			
						-	_		Status	Yes		No
Person (s) that help finance your education	 Parents Relative Self Scholar scholar Educati Others 	es ship ship			Please spec	cify			tri M tri M	mester P aximum am mester P	ount of ount of	support per
Daily mode of transportation from DLSU			By car By mo By put	nily / own vehicle pool torcycle blic transport ycle/walking	Amou	unt of fa	ire per day	P				
Are you currently employed? □ Yes □ No	If yes, na Company			any		[Employment Status Contractual Probationar Permanent	ſУ	Period of en Month 	/Year	salary	nt monthly /
Have you trave	elled outsid	е	🖵 Ye	s If yes,	how many f	times?	Who fina	nced	the trip(s)?			



the Philippines within the	🖵 No	 Family
last two (2) years?		Others

4. FAMILY / HOUSEHOLD INFORMATION

Family members who are co-residing with you

Father
Mother
Legal Guardian
Brothers
Sisters
Others
Total members of your family co-residing with you

Number	
Number	
Number	
Number	

Parents / Legal Guardian

Relation	Name	Age	Educational Attainment	School or College Last Attended	Employer's Name	Occupation	Net Monthly Income
Father							
Mother							
Legal Guardian							

Other household members who are employed and contributing to meeting family expenses (Use extra sheet if necessary)

Relation	Name	Age	Educational Attainment	School or College Last Attended	Employer's Name	Occupation	Net Monthly Income



Non-earning single brothers/sisters living with the family (Use extra sheet if necessary)

Name	٨٥٥	Relationship to Applicant	Study	ving?	Educational Attainment	School Attended or	With Scho	larship?
Name	Age		Yes	No		Graduated From	Yes	No

Number of household help living with your family

Househelp	Number	Monthly Salary	Househelp	Number	Monthly Salary
Maid		Р	Houseboy		P
Yaya		Р	Cook		Р
Laundrywoman		Р	Driver		Р

Home appliances

(Include those in good working condition and have been acquired within the last ten (10) years)

Unit	Number	Unit	Number	Unit	Number
Television (size)		Gas Stove		Electric water pump and tank	
DVD Player		Electric Stove		Electric water heater	
VCD Player		Gas range with oven		Washing machine	
		_ 0		Heated electric clothes	
Stand / Desk Fan		Microwave oven		dryer	
Ceiling / Wall Fan		Rice cooker		Flat iron	
Air conditioner		Toaster		Desktop computer	
		-		Notebook / Laptop	
AM/FM Radio		Electric Thermos		computer	
		_		Computer game system	
Stereo/Audio System		Blender / Osterizer		(e.g. Sony PlayStation)	
		-		Piano/Electronic	
Telephone		Refrigerator		Keyboard	
		Upright or chest-type		_	
Cell phone		freezer		Video camera	
		Floor polisher		_	
		Vacuum Cleaner		_	



Ownership of family vehicle

Mak	e / Model	Year	How many?
Do you have electricity? □ Yes □ No	If yes, amount of electricity bills for the last three (3) months	Month	Amount of bill P Amount of bill P Amount of bill P
Do you have piped or running water inside the house? Yes I No	If yes, amount of water bills for the last three (3) months	Month	Amount of bill P Amount of bill P Amount of bill P
Do you have a cab subscription? Do you have an Int subscription?	le or satellite television ernet service	□ Yes □ No □ Yes □ No	
·	nother /legal guardian have	🗆 Yes 🗆 No	 What type of credit card? American Express Locally issued (e.g. PNB Visa, BPI Express Credit, Citibank Visa, HSBC

5. FINANCIAL STATUS

Family Income (Annual Gross)

Particulars	Amount in Peso (Php)
Combined Annual Pay (Father, Mother)	
Combined Annual Pay (Brother, Sister)	
Income from Business	
Income from Land Rentals	
Income from Residential/Building Rentals/Lease	
Retirement Benefits/Pension	
Commissions	
Support from Relatives	
Bank Deposits	

MasterCard)



Family Expenses (Monthly)

Particulars	Amount in Peso (Php)
Food & Grocery	
School Tuition and Other Fees	
House Rental/Amortization	
Car Loan Amortization	
Other Loan Amortization	
School Service Payment	
Transportation/Gasoline	
Education Plan Premiums	
Insurance Policy Premiums	
Health Insurance Premiums	
SSS/GSIS/PAG-IBIG Loans	
School/Office Uniform/Clothing	
Electricity, Water, Cable, Cooking Gas	
Telephone/Cellphone	
Helper/Yaya	
Driver	
Medicines	
Doctor's Fee/Consultation	
Hospitalization	
Recreation	

I certify that the entries above are true and correct to the best of my knowledge. I hereby authorize De La Salle University to verify such entries. I understand and agree that any misinterpretation or omission made herein shall constitute the basis for the awarding of scholarship by DLSU.

Signature over Printed Name APPLICANT Signature over Printed Name PARENT ON-RECORD