



APPLICANT INFORMATION

To be completed by applicant. Please print or type in all information. The applicant and their parent or guardian must sign the last page of this form.



Applying for grade:

9 10 11 12

Year of Entry

Name _____
LAST, FIRST MIDDLE

Preferred Name _____ Gender _____

Date of Birth _____ Place of Birth _____
MM / DD / YYYY CITY, COUNTRY

Nationality _____ Citizenship _____

First Language _____ Religious Affiliation _____

Home Address _____
NUMBER, STREET

CITY, PROVINCE, POSTAL CODE, COUNTRY

Mailing Address _____
(IF DIFFERENT FROM ABOVE) NUMBER, STREET

CITY, PROVINCE, POSTAL CODE, COUNTRY

Home Telephone _____ Mobile Phone _____

E-mail Address _____

Name of Current School _____

Current Grade/Level _____ School Website _____

School Address _____

Head of School/Principal _____ E-mail Address _____

STUDENT INFORMATION

This section to be completed by the student.

Which of the listed activities are the most important to you and why?

List any honors or awards you have received. Include honor roll, academic awards, all-star teams, times, records, music awards, art show prizes or anything else in which you take pride

What book have you found interesting in the last year? What appealed to you about the book?

What do you think are your strengths?

What do you think are your greatest weaknesses?

How could you describe your family and your role within the family?

FAMILY INFORMATION

Father/Guardian 1

RELATIONSHIP TO APPLICANT

Name _____
LAST, FIRST MIDDLE

Preferred Name _____ Nationality _____
(AS PER PASSPORT)

Highest Educational Achievement/School _____

Home Address _____

Telephone _____ Mobile Phone _____ E-mail _____

Business Name/Address _____

Business Telephone _____ Position/Occupation _____

Who is the custodial parent/guardian?

Guardian 1

Guardian 2

Both

To whom should the admission correspondence be sent?

Guardian 1

Guardian 2

Both

Mother/Guardian 2

RELATIONSHIP TO APPLICANT

Name _____
LAST, FIRST MIDDLE

Preferred Name _____ Nationality _____
(AS PER PASSPORT)

Highest Educational Achievement/School _____

Home Address _____

Telephone _____ Mobile Phone _____ E-mail _____

Business Name/Address _____

Business Telephone _____ Position/Occupation _____

Name of sibling	Age	Date of Birth	Schools Attending / Attended	Current Level

Failure to provide complete and accurate information of any kind on this form will void the application and could result in the student being permanently dropped from Beacon Academy after being enrolled. The Beacon Academy reserves the right to determine the placement of the applicant in the grade level deemed most appropriate for the student.

I have completed this application in good faith and to the best of my ability. I have answered all questions truthfully, and the application answers and essays are entirely my own work.

 SIGNATURE OF APPLICANT

 DATE

To the best of my knowledge, the information submitted on this form is true and correct.

 SIGNATURE OF FATHER/GUARDIAN

 SIGNATURE OF MOTHER/GUARDIAN

 DATE



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 Philippines 1630
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 F (632) 810 5046