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|  | Republic of the Philippines<br><b>Iloilo Science and Technology University</b><br><b>ILOILO CITY CAMPUS</b><br>La Paz, Iloilo City | Department:    | <b>Office of Student Affairs and Services</b> |                   |
|   |  | Document Code: | QF-OSAS-21                                    |                   |
|   | <b>FORM 1A – APPLICATION FOR ADMISSION</b><br><b>(BACCALAUREATE DEGREE PROGRAM)</b>  |                | Rev. No:                                      | 00                |
|   |  |                | Effective Date:                               | November 14, 2024 |

**I. PERSONAL INFORMATION** (To be filled out by the applicant)

Last Name:

First Name:

Middle Name:

Extension Name (Jr., III)

Signature

2x2 ID Picture  
(Do not paste)

**II. EDUCATIONAL INFORMATION** (To be filled out by the Class Adviser, or if already a SHS graduate or ALS completer, to be filled out personally.)

|   |  |
|---|--|
| School Name   |  |
| Address   |  |
| Senior High School Track  |  |
| Strand  |  |
| General Average ( <i>Grade 11 for graduating students; Grade 12 for graduates</i> ) |  |

\_\_\_\_\_  
 Name & Signature of the  
 Class Adviser or  
 SHS Graduate/ALS Completer

**III. CERTIFICATION** (To be filled out by the School Principal, School Head, or Registrar. If already a SHS graduate or ALS completer, leave this blank.)

This is to certify that Mr./Ms. \_\_\_\_\_ is a candidate for graduation for the School Year \_\_\_\_\_ and has consistently demonstrated good moral character during his/her time at our school.

Furthermore, I hereby confirm that I have affixed my signature on the back of the applicant's 2x2 ID picture.

\_\_\_\_\_  
 Name & Signature of the  
 School Principal / Registrar / Head

\_\_\_\_\_  
 Date