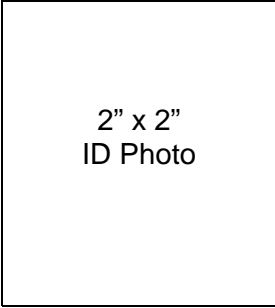


UNIVERSITY OF THE PHILIPPINES
National College of Public Administration and Governance

SENATOR ANTONIO TRILLANES IV SCHOLARSHIP GRANT

APPLICATION FORM



Name of Applicant: _____

(Last Name) (First Name) (Middle Name)

Student No.: _____ Course: _____ Year Level: _____

Number of units left at the time of the application: _____ Are you on MRR? () Yes () No

Birthplace: _____ Birthdate: _____ Citizenship: _____ Sex: _____ Civil Status: _____

Permanent Address: _____

Zip Code: _____ Tel. No. _____ Present Address: _____

Zip Code: _____ Tel. No. _____

Campus Address: _____

Mobile No.: _____ E-Mail : _____

Father's Name

Mother's Name

Occupation: _____

Gross yearly salary: _____

If retired, year of retirement: _____

If with pension, state amount received monthly: _____

If both parents are unemployed, state reason's: _____

Source/s of livelihood: _____ Amount earned yearly : _____

Or contributions/support from other sources like relatives, etc. _____

If self-employed, state type of business: _____ Earnings per year _____

For Employed Applicants:

State last five (5) years of employment, please start with the most recent:

Employer:

Address/Contact Info:

Period of Employment:

For Married Applicants:

Spouse's Name : _____ Occupation: _____ Gross yearly salary: _____

Name of Children:

Age:

For Unmarried Applicants:

Name of Sibling/s: _____ Age: _____ Civil Status: _____ If working/state income: _____

Please answer:

1. Are you currently enjoying any scholarship, financial assistance, or other privileges?

(a) From the University? () Yes () No

(b) Other than from the University? () Yes () No

If you answered "yes" to either question, please specify:

Name of Scholarship/Grant Nature of Scholarship/Grant Benefit Received:

2. Do you/your parents/spouse: (a) own a real property? () Yes () No

If "yes" please specify _____ Current Market Value: _____

(b) Others. Ex. Cars, stocks, etc.: _____ Current Market Value: _____

3. If applicant's parents are separated, state support received from father and/ or mother:

4. If applicant is married but separated:

State if husband/wife is giving support: _____ Amount received: _____

I hereby certify that all statements above are true and correct.

Signature of Applicant

Name in Print

Date

For CPAGE Personnel Use only:

Date Received: _____

Received by: _____

Documents Submitted

- One (1) 2" x 2" photo
- Current Income Tax Return and/or W2 of parents: if applicant is working, his/her Income Tax Return and/or W2; if married, attach ITR and/or W2 of spouse; If income is derived from business, attach income statement; if exempted from filing, attach BIR certificate of Exemption; If parent is unemployed, attach notarized affidavit of unemployment income earned.
- Birth Certificate
- Current Form 5 (for MPA/DPA)
- Previous Semester Form 5 (for BAPA)
- True Copy of Grades/CRS printout
- Certificate of Good Moral Character from Student Disciplinary Tribunal (Rm. 201 Vinzons Hall)

DEADLINE FOR FILING APPLICATION: MAY 18, 2011