



HOLY NAME UNIVERSITY

Janssen Heights, Dampas District, Tagbilaran City

COLLEGE STUDENT INFORMATION FORM

Date Today (MM/DD/YYYY)

Copy for

Registrar

SAO

Guidance Office

Student

*This form is not for sale

To be filled out by the student

ID NUMBER

Have you been enrolled in HNU/DWCT Before?

If yes	Elementary	If no	New Student
	HS/SHS		Transferee
	College		

School Year
Semester
Course and Year

First Name

Middle Name

Surname

Date of Birth

(MM/DD/YYYY)

Age

Sex

Civil Status

Citizenship

Place of Birth

Religion

Contact No(s).

Email Address

City Address

Home Address

Father's Name

(First Name, Middle Name, Surname)

Occupation

Contact No(s).

Email Address

Mother's Name

(Please use maiden name: First Name, Middle Name, Surname)

Occupation

Contact No(s).

Email Address

Place where you are staying in Tagbilaran:

No. of Brother(s)

Home with parents

Apartment/Dormitory/Boarding House

No. of Sister(s)

Staying with relatives/family friends

Others:

(Please Specify)

Person(s) supporting your studies aside from parents

Name

Relationship

Occupation

Address

| Educational Background

Primary School (Grade 4)

School Address

School Year

Honor(s) Recieved

Intermediate (Grade 6)

School Address

School Year

Honor(s) Recieved

Junior HS

School Address

School Year

Honor(s) Recieved

Senior HS w/Track

School Address

School Year

Honor(s) Recieved

General Average

Scholarship Aailed

| For Transferees

Last School Attended

School Year

| Medical/ Health concerns that you need HNU to know about?

In case of Emergency, please notify

Current Address

Contact No(s).

Email Address

Guardian's Signature Over Printed Name

Guardian's Signature Over Printed Name

Student's Signature Over Printed Name

I am aware that in case of complete withdrawal or withdrawal from one or more of the courses enrolled, charges are computed as follows:

From the start up to 13 days of classes - no charge

14 - 24 days of classes	10% on tuition and laboratory fees and full payment of miscellaneous and other fees.
25 - 35 days of classes	30% on tuition and laboratory fees and full payment of miscellaneous and other fees.
36 - 50 days of classes	50% on tuition and laboratory fees and full payment of miscellaneous and other fees.
51 days and above	FULL PAYMENT OF FEES

STUDENT'S SIGNATURE

Date signed: _____

Data Privacy Notice

Holy Name University recognizes and respects your right to privacy and the confidentiality of your personal information. HNU is committed to safeguarding your personal information pursuant to the provisions of the Data Privacy Act of 2012 (RA 10173). Such informations are acquired, generated, and used for legitimate academic and administrative functions of the university which also include historical, statistical, research and marketing purposes.

Student's Consent

In acknowledgment of the Holy Name University's data privacy policy and the Data Privacy Act of 2012 (RA 10173), I willfully give my consent to Holy Name University to collect, store, process and use my personal and private information and associated data that may be generated for its legitimate academic and administrative functions and related purposes.

(Student) Signature over Printed Name / Date

Witness to the Word