

UNIVERSITY OF THE PHILIPPINES
OFFICE OF SCHOLARSHIPS AND STUDENTS SERVICES
Scholarship Section, Rm. 302, Vinzons Hall, Quezon City

APPLICATION FOR SCHOLARSHIP GRANT

(Scholarship/Study Grant being applied for)

2" X 2"
ID Photo

Name of Applicant: _____

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

Student No.: _____ Course: _____ College: _____ Yr. Level: _____

Please Check: Degree course at the time of application? () 1st Degree () 2nd Degree
With intention to shift? () Yes. () No. If yes, please specify which course: _____
Shiftee/Transferee? () Yes. () No. If yes, specify: _____ When: _____
No. of units left at the time of application: _____
Are you 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: _____ Occupation: _____ Gross Yearly Salary: _____

If retired, year of retirement: _____ If with pension, state amount received monthly: _____

Mother's Name: _____ Occupation: _____ Gross Yearly Salary: _____

If retired, year of retirement: _____ If with pension, state amount received monthly: _____

If both parentys 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: | Reason for Leaving: |
|----------|------------------------|-----------------------|---------------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

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: |
|--------------------|-------|---------------|--------------------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

(Use additional sheets if necessary)

Please answer.

1. Are you 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

Benefits Received:

2. Do your parents: (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 are true and correct.

Signature of Applicant

Name in Print

Date

For OFFICE OF SCHOLARSHIPS AND STUDENT SERVICES personnel only:

Date Received: _____

Received By: _____

For Freshman:

- One (1) 2"x2" 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, indicate approximate income earned.
- Form 5 or Certificate of Admission
- Birth Certificate
- Certificate of Good Moral Character from High School.

For Student already enrolled in the University

- One (1) 2"x2" 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, indicate approximate income earned.
- Current Form 5
- True Copy of Grades/CRS printout
- Certification of Year Level Standing from College
- Certificate of Good Moral Character
 - College
 - Room 1 OSA
- Birth Certificate
- Certification from College indicating the *remaining units* and that the student is *not on maximum residency* (MRR).

Additional Requirements

- For Graduate students: transcript of academic records; program of study; notice of admission (if new graduate students)
- For Presidential Leadership, Tuition, Foreign, etc:
 - Letter of recommendation from the head institute
 - Certification of study leave with pay
 - Nomination from home government
 - Letter of financial support
 - Letters of recommendation from former professors (3 Letters)
 - Recommendation/Certificate of good moral character from current employer/s
 - List of accomplishments arranged by levels. i.e. in high school, college and community duly authenticated by the appropriate authority
 - For UP Employee, submit certificate of Good Moral from the unit where he/she is currently employed.
- Others please specify: _____

DEADLINE OF FILING: _____

DATA PRIVACY CONSENT FORM

The undersigned one of the applicants/grantees of the _____,

has given permission to the UPLB-OVCSA, Office of Scholarships and Grants (UPLB OVSCA-OSG) staff, in charge of scholarship/financial assistance in the collection, lawful use and disclosure of my personal information which may include my student number, name, contact information, course, academic performance (i.e number of units enrolled, subject's with grade/s obtained and grant details

I, further confirm that the UPLB-OVCSA-OSG and other appropriate offices in the University are authorized to provide the above information to legitimate officers/ institutions requesting specific information in relation to the awarding/renewal of my scholarship/financial assistance within the specified academic period.

This consent enables the UPLB OVCSA-OSG to comply with R.A. 10173, otherwise known as the Data Privacy Act of 2012.

"I certify that the information given above is true and correct".

I consent to the processing of my personal information contained in this form and in documents submitted for my scholarship application for the purpose of enabling the University of the Philippines Sytem including all the relevant System and Constituent University Offices to verify my identity, prevent fraud, process my application, determine wether I am qualified to avail of any scholarship or similar financial or other assistance, conduct or research using non identifiable information in order to study the effectivenesss of the university's scholarships and other financial assistance programs and assess how to improve the systems for the selection and execution of scholarship programs.

I further expressly agree that the concerned System and/or CU office may directly detain all my relevant student records wether in electronic or paper based format in order to verify the information contained in my application for the purpose of determining my eligibility for the scholarship or other financial assistance from the relevant UP Registrar, disciplinary board or tribunal and other University offices.

I expressly authorize the University to provide information required by the scholarship funders or sponsors for the purpose of enabling the latter to determine wether or not to continue to provide finacial and other assistance with the assurance that the University will require such parties to observe strict compliance with the Philippine Data Privacy Act and other related laws and issuances when they process my personal and sensitive personal information.

I understand that the University of the Philippines including System and CU offices are authorized to process my personal and sensitive personal information without need of my consent pursuant to the relevant portions of section 4.12 and 13 of the Philippine Data Privacy Act.

Signature over printed name

Date: _____

If the student is a minor

Signature over printed name of parent/guardian

Date: _____