



**AQUINAS SCHOOL**  
 183 F. Blumentritt St.  
 San Juan City

**SCHOLASTIC RECORD FORM**

This form may be accomplished by the Principal or School Registrar

NAME OF APPLICANT: \_\_\_\_\_

	Last Name	First Name	Middle Name
Grade Applying for:	<input type="checkbox"/> Junior Kinder	<input type="checkbox"/> Grade 3	<input type="checkbox"/> Grade 8
	<input type="checkbox"/> Senior Kinder	<input type="checkbox"/> Grade 4	<input type="checkbox"/> Grade 9
	<input type="checkbox"/> Grade 1	<input type="checkbox"/> Grade 5	<input type="checkbox"/> Grade 10
	<input type="checkbox"/> Grade 2	<input type="checkbox"/> Grade 6	<input type="checkbox"/> Grade 11
		<input type="checkbox"/> Grade 7	<input type="checkbox"/> Grade 12

SEX:       MALE       FEMALE

PREVIOUS SCHOOL: \_\_\_\_\_

SCHOOL ADDRESS: \_\_\_\_\_

CURRNT GRADE LEVEL: \_\_\_\_\_ NUMBER OF YEARS IN PREVIOUS SCHOOL: \_\_\_\_\_

The above mentioned student is applying for admission to AQUINAS SCHOOL. You are kindly requested to provide in the space below his current academic record. This will be used as part of the students' evaluation.

Please place the quarterly grade or final grade of the current school year in the average column. Grades must be stated in standard quantitative equivalents (e.g. 85.00).

This form is not valid without the official dry seal of the school and must be placed in a plain white envelope and signed by the Principal or School Registrar across the flap.

Any misrepresentation of information on this form, or any violation of the instructions shall be grounds for forfeiture of the right to enroll in this institution.

SUBJECTS	ACADEMIC QUARTER: _____
English	
Filipino	
Mathematics	
Science & Technology	
Araling Panlipunan	

Certified by:

\_\_\_\_\_  
 Signature over Printed Name

\_\_\_\_\_  
 Designation

\_\_\_\_\_  
 Date



For any inquiries please contact the following:  
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