



Saint Theresa's College of Cebu
Don Ramon Aboitiz Street, Cebu City 6000 PH
Telephone No: (032) 255-3891 / (032) 255-2448

Grade & Section

PROCEDURES FOR ADMISSION OF NEW APPLICANTS

NAME OF STUDENT: _____ GENDER _____
(Family Name) (First Name) (Middle Name)

N.B. Please print name as it appears in the birth certificate.

- Step 1. Please submit the following requirements to the Registrar for approval
- a. For Nursery, the applicant must be born on January – August 2013
For Kindergarten, the applicant must be born on January – August 2012
For Grade One, the applicant must be born on January – August 2011
 - b. Birth Certificate from the NSO (original and photocopy)
 - c. Catholic Baptismal Certificate (photocopy)
 - d. Two (2) copies of identification size picture (1"x 1")
 - e. Report Card (Form 138) for Grades 1 to 6 applicants (photocopy)
Should have an average grade of at least 80 and no grade below 78
 - f. Medical certificate for pupils with special medical condition

Fill up STC Forms 2, 3 and 4 then present these to the Registrar for signature

REGISTRAR

- Step 2. See the Cashier to pay the testing fee of P300.00

CASHIER

- Step 3. Go to the Grade School Guidance Office to submit the duly signed STC Forms 3 and 4 for filing and secure a **test schedule/permit** and the **Recommendation Form**

PSYCHOMETRICIAN

- Step 4. Go to the Grade School Guidance Office for testing (Please bring along the STC Form 2 and the Test Permit)

PSYCHOMETRICIAN

- Step 5. After the test, call the GS Guidance Office, Tel. #253-2199 for the test result and schedule of interview of the applicant.

- Step 6. If the applicant qualifies, please come for an interview of your child at the Grade School Guidance Office.

GUIDANCE COUNSELOR

Parent/s with the Principal at the Principal's Office

PRINCIPAL

- Step 7. After the interview, see the Registrar for encoding

REGISTRAR

- Step 8. Pay to the Cashier a Reservation fee of P2000.00 ***(The reservation fee is non-refundable/non-transferrable).***
Should you fail to reserve, the slot will be given to another applicant.

CASHIER

- Step 9. Go back to the Registrar to fill up STC Form 5 (Reservation Form) and secure STC Forms 6 and 7

REGISTRAR

PLEASE SEE AT THE BACK FOR ENROLMENT PROCEDURES

A. ENROLMENT PERIOD FOR NURSERY / KINDER / GRADES 1 - 6

DATE: _____ 8:00 – 11:00 **(MORNING ONLY)**

PROCEDURE:

1. Registration at the AVR and present the following:
 - Report Card – original copy for Grades 1-6
(NO REPORT CARD, NO ENROLMENT) _____
REGISTRAR
 - STC FORMS 2, 6 and 7
 - Get a copy of Book List & Requirements, Car Pass & ID form

2. Check the name of the pupil in the database. _____
SECRETARY

3. Secure a priority number for the assessment of fees and textbook

4. See the Cashier for payment. _____
CASHIER

5. Go to the Registration / Book Room in-charge and secure an admission slip _____
REGISTRAR

B. PARENTS' ORIENTATION MEETING

When: _____

Where: _____

NOTE:

- * Admission Slip and Student Handbook will be distributed after the orientation meeting.

- * For Nursery and Kindergarten applicants, please secure gate pass form.

CUMULATIVE REPORT

PERSONAL DATA OF THE APPLICANT:

I. Name _____
(FAMILY NAME) (FIRST NAME) (MIDDLE NAME)

Home Address: _____

Date of Birth : _____ Place of Birth: _____

Citizenship : _____ Religion: _____

Baptism : [] Yes [] No Confirmation: [] Yes [] No

by: _____ by: _____

Church : _____ Church : _____

Address : _____ Address : _____

PERSONALITY (please check)

1. Good Traits	Weaknesses
_____ self-confident	_____ attention seeker
_____ considerate	_____ quarrelsome
_____ courteous	_____ inattentive/short attention span
_____ friendly	_____ shy
_____ cooperative/helpful	_____ hard-headed/stubborn
_____ conscientious	_____ needs constant prodding
_____ industrious	_____ lazy
_____ respectful	_____ irritable
_____ neat & orderly	_____ disorderly
_____ honest	_____ talkative
_____ cheerful	_____ indifferent/aloof
_____ dependable/responsible	_____ clumsy
_____ caring	_____ over-sensitive
_____ generous	_____ easily exhausted
_____ others, pls. specify:	_____ others, pls. specify

2. Does she have definite interest and talents?

3. Does your child take private lessons? Please check.
_____ ballet lessons _____ art/painting _____ others (specify)
_____ piano _____ swimming

II. FATHER: _____
(FAMILY NAME) (FIRST NAME) (MIDDLE NAME)

Age : _____ Place of Birth : _____

Address: _____ Tel. No. Res. : _____
Ofc. : _____

Degree(s): _____ Religion : _____

Occupation: _____ Nationality : _____

Position : _____ (please specify position)

Name and address of company/business: _____

Special Talents/Abilities/Skills : _____

III. MOTHER: _____
(FAMILY NAME) (FIRST NAME) (MIDDLE NAME)

Age : _____ Place of Birth: _____

Address: _____ Tel. No. Res. _____

_____ Ofc.: _____

Degree(s): _____ Religion : _____

_____ STC Alumna (Please check)

_____ Yes _____ No

Occupation: _____ Nationality : _____

Position : _____ (please specify position)

Name and address of company/business: _____

Special Talents/Abilities/Skills : _____

IV. BROTHERS and SISTERS (of the child) BIRTHDATES

	BIRTHDATES
_____	_____
_____	_____
_____	_____
_____	_____

V. FAMILY (of the child)

Father and Mother are: (please check)

_____ married and living together

_____ remarried

_____ married and separated

_____ father deceased

_____ not married & living together

_____ mother deceased

_____ not married (single parent)

_____ both deceased

Income Bracket: Monthly family income from all sources (please check)

_____ Below P10,000

_____ P30,000 - P34,999.99

_____ P10,000 – P14,999.99

_____ P35,000 - P39,999.99

_____ P15,000 – P19,999.00

_____ P40,000 – P44,999.99

_____ P20,000 – P24,999.99

_____ P45,000 – P49,999.99

_____ P25,000 – P29,999.99

_____ P50,000 and above

Family owns the house we're living in

_____ yes

_____ renting or

_____ staying at parents'/relatives' house

APPLICATION FOR ENTRANCE EXAMINATION

Name : _____ Age : _____

Date of Birth: _____ Grade Applied for: _____

Previous Grade Attended: _____ General Average: _____

Name of School last attended: _____

Address of School: _____

Name of Parents/Guardian:

Father : _____ Mother : _____

Guardian: _____

Religion Practiced: _____ E-mail Address: _____

Address: _____ Tel. No. _____

_____ No. of Sisters in STC: _____

Checked by:

Registrar

Guidance Staff

ENTRANCE TEST RESULTS

Test: _____

Date: _____

Score: _____

Classification _____

Remarks: _____

Signature of Psychometrician:
