# PHILIPPINE SCHOLARSHIP APPLICATION FORM

### **International School Manila**

MS Counseling Office No.: (632) 8840.8555 Date of Application: (Year / Month / Day)

ATTENTION: This is a fillable PDF form which must be submitted together with all application requirements. You have the option to #1 Fill this out electronically and save before sending to mscounseling@ismanila.org OR #2 Print, fill out manually and email a scanned copy to mscounseling@ismanila.org OR #3 Print, fill out manually and submit a hard copy to the MS Counseling Office at IS Manila

			names as record			h Certificate.			
Name of									
LAST NAME			FIRST NAME			MIDDLE NAME PREFERRED		ERRED NAME	
Gender at Birth: Male		Male	Female			Are you a dual citizen?		Yes No	No
						Citizenship			
Date of	Birth:					(As recorded			
	Year	уууу	Month-mm	Day-y	'Y	Passport/Birt	n Certificate)		
Resident	ial Address in	the Philippi	nes for Report C	ards and	Correspor	dence (update	as needed):		
Addresse	ee:								
Address:									
Home Te	elephone Num	ber:							
_									
N	IOTE: Please info	orm the Admiss	ions Office if the ma	ailing addres	ss is differen	from the residen	tial address.		
1.	Number of	children in th	ne family:		_ Applicar	t's ordinal pos	ition in the fan	nily:	
							V=0		
2.	•	•	any sibling(s) in ames & gradele		iave been	ın, ISM!	YES		NO
2			-		£1			.1	
3.		•	ing and writing land grade level)	ievei:	fluent	good	limited	d	none
4.		English spea ropriate to age	king level: and grade level)		fluent	good	limited	b	none
5.	Major langu	iage(s) used	at home: a.			b			
	Other	languages s <sub>i</sub>	ooken:						
6.			ed in advanced . etc.)? If yes, plo			ifted and Talen	ted, Gateway,	Advance	èd
7.	•		v special health on the second		allergies,	etc. that the sc	hool should be	aware o	of? Please
8.	Has your ch explain.	ild ever beer	asked to leave	school be	cause of a	ny behavioral/	disciplinary pr	oblems?	If yes, please

	Band (Instrument?)				
	Strings (Instrument?)				
	☐ Vocal or Chorus ☐ Drama ☐ Student Government	Art Dance	Compu	ter	_
	Athletics – favorite sport(s):				
	Other special talents or interest	ts:			
10.	child was out of the school for Note that Column 1 starts wire may have been a preschool.  In Column 2, indicate the name of the column 3, fill in the acade of the column 4, indicate their again. In Column 5, indicate the 'name of the column 5, indicate the column 5, indicate the 'name of the column 5, indicate the 'name of the column 5, indicate the column 5, indicate the 'name of the column 5, indicate the 'name of the column 5, indicate t		nt for every hat fact. Al ool but no y attended imn 1.	school year atte llow one line for t necessarily 'gra	ended. If your each year. ide one' as it
ear in chool	2 Name of School and Location	3  Academic Year  monthyeartomonthyear	4 Child's Age	5 Grade, Form, Year or Standard Name	6 Language of Instruction
1		to			
2		to			
3		to			
4		to			
5		to			
6		to			
7		to			
8		to			
9		to			
10		to			
	FD INFORMATION: Provide (print) t	he name, telephone number and em			
our chi	ild's current or most recent school. Is information on a student and/or for		d.		

11.	Please have your child write a short essay on why they want to study at International School Manila including a description of who they are and their most memorable learning experience.

## PARENT/ LEGAL GUARDIAN INFORMATION List all names as recorded in Birth Certificate/Passport. Legal Guardian 1 Parent 2 Legal Guardian 2 Parent 1 Relationship to Student: Relationship to Student: Check if **Alumnus** and indicate year(s): Check if **Alumna** and indicate year(s): Last Name: Last Name: First Name: First Name: Middle Name: Middle Name: Citizenship Citizenship (Passport/Birth (Passport/Birth Certificate) Certificate) Employer or Employer or Organization: Organization: Position: Position: Annual Salary: Annual Salary: Please review the Please review the Financial Requirement Financial Requirement Letter for a listing of all Letter for a listing of all necessary documents. necessary documents. Office Address: Office Address: Office Phone Number: Office Phone Number: Cell Phone Number: Cell Phone Number: You will receive TEXT Messages about emergency school You will receive TEXT Messages about emergency school closure or other special announcements on this number. closure or other special announcements on this number. **Email Address: Email** Address: **Emergency Contact Information:** Address: Name: Office Phone: Home Phone: Cell Phone Email: 12. Where did you hear about the Scholarship at ISM? Facebook/Instagram Newspaper (Print or Online)\_\_\_\_\_ Company/Organization\_\_\_\_\_ Friend or Family member ISM website

### NOTE:

1. Please note that the nature of the scholarship is as follows:

Signature of Parent / Guardian

Printed Name over Signature

- a. The scholarships are available to students entering Grade 8 in the International School Manila.
- b. The need-based scholarships will include fees such as tuition fee, matriculation fee, and book rental.
- c. A participation fee may be required from the parents to cover a portion of the school fees for those selected for partial scholarships.
- d. The scholarships may be enjoyed for five years provided the awardees maintain the appropriate scholastic level and abide by the school rules and regulations set by the Scholarship Advisory Committee.
- Failure to provide complete and accurate information of any kind on this form will void the application and may result in the student being permanently dropped from the rolls of **ISM** after being enrolled.
- International School Manila reserves the right to determine the placement of the applicant in the grade level or subjects deemed most appropriate for the student's experience / performance.
- It is the parent / guardian's responsibility to inform the school of any changes in status or contact information.
- By signing this application form, the parent gives permission for International School Manila to contact previous schools to request additional information including all academic, medical and psycho educational records, within school policy, as may be required for admission consideration of this applicant.
- In order to comply with a new government law on data privacy, we are now obliged to ask for parents' permission to collect, process and store all personal data. When you tick the box below, you are giving formal consent for this to happen.

Yes – I give my consent to ISM to process my personal information and sensitive personal information for the purpose(s) described in the ISM Privacy Policy found in <a href="www.ismanila.org">www.ismanila.org</a> > Student Services > Technology at ISM.
No – I do not give my consent to ISM to process my personal information and sensitive personal information for the purpose(s) described in this ISM Privacy Policy found in <a href="www.ismanila.org">www.ismanila.org</a> > Student Services > Technology at ISM.
If you are not willing to give your consent, we are unable to proceed with your application.
 To the best of my knowledge the information submitted on this form is true and correct.

Any and all files submitted as part of the Philippine Scholarship admissions requirement to International School Manila automatically becomes the property of the School.

Signature of Parent / Guardian

Printed Name over Signature

(Year/Month/Day)

Date