



**Espiritu Santo Parochial School of Manila, Inc.**  
 1912 Avenue Sta. Cruz, Manila  
 Tel. 7110991 – 7210075 – 7086603 Fax. 7111426  
 Annex II - 7111103 – 5540743

1 X 1  
Colored  
Picture

### Grade School Application Form

Admission To						Application Status													
N	K	P	1	2	3	4	5	6	<input type="checkbox"/> Regular			<input type="checkbox"/> Dropped			<input type="checkbox"/> Repeater				
Last Name						First Name						Middle Name							
<i>Home Address</i>																			
Blk, / House No.				Street				Barrio				City /Town							
Birth Date			Sex			Age			Birth Place			No. of Brothers			No. of Sisters				
Birth Order ___ Only Child ___ Eldest ___ Youngest ___ Middle (specify if 2 <sup>nd</sup> , 3 <sup>rd</sup> , 4 <sup>th</sup> etc. from the eldest) ___																			
Tel. No.						Cell No.						Religion							
<i>Family Background</i>																			
Parents / Guardian's Name						Age		Occupation				Company				Office Tel. No.			
Father																			
Mother (Maiden Name)																			
Official Guardian (if student is not living with parent)																			
Relationship Status of Parent: ___ Single Parent ___ Separated ___ Married & Living Together ___ Others _____																			
<i>Educational Background</i>																			
Level				Name of School				Inclusive Dates				Honors / Awards							
Pre-school																			
Primary																			
Brothers / Sisters studying in Espiritu Santo Parochial School																			
Name						Grade / Year & Section													
I hereby certify that the above information are true and correct																			
Parent's / Guardian's Signature						Printed Name						Date of Filling							
Do Not Fill-In this part (ESPS Registrar's Office Use Only)																			
Examination Date						O.R. No. / O.R. Date						Re-scheduled Date							
TEST RESULT – To be filled in by the Admission Committee																			
Date												Guidance Counselor							
Date												VP – Academics							
Date												VP – Discipline							



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### High School Application Form

Admission To				Application Status			
<input type="checkbox"/> Grd. 7		<input type="checkbox"/> Grd. 8		<input type="checkbox"/> 3 <sup>rd</sup> Year		<input type="checkbox"/> 4 <sup>th</sup> Year	
<input type="checkbox"/> Regular				<input type="checkbox"/> Dropped		<input type="checkbox"/> Repeater	
Name of School				School Address			
Gen Ave.		Grading Period			Conduct Grade		
Math ___ Science ___ English ___		Total Attendance			Honors / Awards		
Last Name		First Name			Middle Name		
<i>Home Address</i>							
Blk, / House No.		Street		Barrio		City /Town	
Birth Date		Sex	Age	Birth Place		No. of Brothers	No. of Sisters
Birth Order ___ Only Child ___ Eldest ___ Youngest ___ Middle (specify if 2 <sup>nd</sup> ,3 <sup>rd</sup> ,4 <sup>th</sup> etc. from the eldest)___							
Tel. No.			Cell No.			Religion	
Family Background							
Parents / Guardian's Name			Age	Occupation	Company	Office Tel. No.	
Father							
Mother (Maiden Name)							
Official Guardian (if student is not living with parent)							
Relationship Status of Parent: ___ Single Parent ___ Separated ___ Married & Living Together ___ Others _____							
I hereby certify that the above information are true and correct							
Parent's / Guardian's Signature			Printed Name			Date of Filling	
Brothers / Sisters studying in Espiritu Santo Parochial School							
Name				Grade / Year & Section			
Do Not Fill-In this part (ESPS Registrar's Office Use Only)							
Examination Date		Room Number		O.R No. / O.R. Date		Re-Scheduled	
Examination Date		Room Number		O.R No. / O.R. Date		Re-Scheduled	
TEST RESULT – To be filled up by the Admission Committees							
Guidance							
VP – Discipline							
VP – Academics							
Guidance							
VP – Discipline							
VP – Academics							
Reservation Receipt / Date			Enrolment Receipt / Date			Mode of Payment	