

**FORM A**

Republic of the Philippines  
 Department of Science and Technology  
 SCIENCE EDUCATION INSTITUTE  
 P.O. Box 18 Taguig Post Office

NOT FOR SALE  
 CAN BE REPRODUCED  
 ALL ENTRIES/SIGNATURE  
 IN THIS FORM MUST BE  
 ORIGINAL.

**TO BE FILLED-OUT BY DOST/SEI STAFF ONLY**

TCC/APPLN. NO. \_\_\_\_\_

2009 Total Annual Family Gross Income: P \_\_\_\_\_  
 (Taxable & Non-taxable) Month 1 \_\_\_\_\_ kwh

Average Electricity Month 2 \_\_\_\_\_ kwh  
 Consumption in kwh: Month 3 \_\_\_\_\_ kwh  
 Total = \_\_\_\_\_ / 3 mos.  
 CV = \_\_\_\_\_ kwh

4th Year Annual HS Net  
 Tuition & Other School Fees: P \_\_\_\_\_

Scholarship Program Assessment:  
 **RA 7687**  
 **Merit** P 200.00/O.R. No. \_\_\_\_\_

Assessed by: \_\_\_\_\_  
 Printed Name/Signature

SEI  DOST RO. No.: \_\_\_\_\_

**INFORMATION SHEET**

for the

**DOST-SEI  
 SCIENCE AND TECHNOLOGY  
 SCHOLARSHIPS FOR 2011**

Attach recent  
 1" x 1"  
 photo here

Once officially stamped,  
 DO NOT detach photo.  
**Attach another copy  
 of the 1" x 1" photo  
 for the Test Permit.**

Instruction: Write clearly in the box provided or check the box for the appropriate answer. Avoid erasures. For any erasure, the applicant should countersign the item corrected along the page margin. PLEASE ANSWER ALL ITEMS.

**Deadline for Submission: 08 October 2010 (Friday)**

**Date of Examination: 21 November 2010 (Sunday)**

**I. PERSONAL DATA**

1. Name of Applicant \_\_\_\_\_  
 Surname First Name Middle Name

2. Sex  Male  Female 3. Date of Birth \_\_\_\_\_ 4. Place of Birth \_\_\_\_\_

5. Citizenship \_\_\_\_\_ 6. Do you have a dual citizenship?  Yes  No If yes, please specify: \_\_\_\_\_

7. Contact Nos.: Landline Phone No. \_\_\_\_\_ Cell Phone No. \_\_\_\_\_ 8. Email Address: \_\_\_\_\_

9. Permanent Address \_\_\_\_\_  
 No. Street Barangay City/Municipality Province Zip Code

10. Number of Children in the Family  11. Birth Order of Applicant (1st child, 2nd child, etc.)

12. Name of High School \_\_\_\_\_

13. Type of High School \_\_\_\_\_  
 Regular Public Science Private High School Code (To be provided by DOST-SEI)

14. Address of High School \_\_\_\_\_

15. Tuition and Other School Fees Paid in a Private High School P \_\_\_\_\_  
 (Please attach assessment form/statement of account provided by the school). If under scholarship, indicate name of scholarship and submit certification from school or foundation.

16. Have you been issued a passport?  Yes  No Passport No. \_\_\_\_\_

**II. FAMILY DATA**

	Father	Mother	Legal Guardian (To be accomplished ONLY by those whose parents are deceased, working abroad, etc; should submit affidavit of guardianship)
17. Name			
18. Highest Educational Attainment			
19. Occupation (pls. specify)			
20. Name of Employer			
21. Employer Address			
22. 2009 Annual Income (in pesos) (taxable and non-taxable)			
23. If self-employed, declare gross income.			
24. Tribal Affiliation If applicable, please submit a certification of membership from the local Office of Muslim Affairs or National Commission on Indigenous People.			

**III. SCHOLARSHIP INTENTIONS DATA**

25. Check appropriate box for scholarship program applied for:

- RA 7687 SCIENCE AND TECHNOLOGY SCHOLARSHIP**  
 For applicant who belongs to a family whose socio-economic status does not exceed the set values of ALL the identified indicators as approved by the Advisory Committee on the S&T Scholarships.  
 Applicant must thoroughly accomplish the Household Information Questionnaire (Form B.)
- DOST-SEI MERIT SCHOLARSHIP**  
 For an applicant who belongs to a family whose socio-economic status exceeds the set values of any of the identified indicators. Applicant must pay a non-refundable test fee of P200.00.

26. Have you applied for scholarship other than the DOST-SEI?  Yes  No  
 If yes, please identify which scholarship:  OWWA  CHED  GSIS  Others, specify \_\_\_\_\_
27. College/University where you intend to enroll: \_\_\_\_\_  
 \* You are advised to take the admission test of the college/university where you intend to enroll for SY 2011-2012.
28. Test Center nearest your school: \_\_\_\_\_  
 \* Please refer to the list of designated test centers in the 2011 S&T Scholarship Announcement.  
 The scholarship examination will be administered on **21 November 2010 (Sunday)** at the identified test center in your province.

**I certify that all answers given above are true and correct to the best of my knowledge.**

Attested by:

\_\_\_\_\_  
 Parent/Legal Guardian  
 (Please print name and sign above it.)

\_\_\_\_\_  
 Signature of Applicant  
 Date: \_\_\_\_\_

## FORM B HOUSEHOLD INFORMATION QUESTIONNAIRE

### A. HOUSEHOLD PROFILE

1. Profile of household members (Please include ALL members who live under the same roof and share in common food.)  
*(Ibilang ang mga kasambahay o mga kamag-anak na kasalukuyang nakatira sa bahay at kasama sa inihahaing pagkain.)*

Name (Put Household Head as first in the list; include name of applicant) (1)	Relationship to Applicant (2)	Age (3)	Civil Status (See codes below) (4)	Highest Educational Attainment (Specify grade, year or degree) (5)	Grade or Year Attending if Currently in School (6)	Occupation of Working Household Member (7)	Class of Worker (See codes below) (8)	Gross Income for the Year 2009 (in pesos) (9)
1.								
2.								
3.								
4.								
5.								
6.								
7.								
8.								
9.								
10.								

\*Household head is the person who generally provides the chief source of income for the household unit. He/She is the adult person, male or female, who is responsible for the organization and care of the household or who is regarded as such by members of the household.

Codes for Col. 4 (civil status):

- 1 Single    2 Married    3 Widowed    4 Divorced/Separated    5 Unknown

Codes for Col. 8 (class of worker):

- 1 Works for private household  
 2 Works for private establishment  
 3 Works for government agency/corporation  
 4 Self-employed without any employee  
 (e.g., sari-sari store owner, dressmaker)  
 5 Employer in own family-operated farm/business  
 6 Works with pay on own family-operated farm/business  
 7 Works without pay on own family-operated farm/business  
 8 Unemployed (e.g. housewife)

2. 2009 Total Annual Gross Income (Total of entries in column 9) P \_\_\_\_\_

3. Do you have any relatives **other** than those in the **Household Profile** (whether here or abroad) who contribute in meeting your household expenses?  Yes  No

If yes, how much is the average monthly contribution? P \_\_\_\_\_ /month

**Paalala: Kung ang mga magulang ay may hanapbuhay (employed) o di kaya ay may sariling negosyo, magbigay ng kopya ng Income Tax Return (ITR) para sa taong 2009; o kung walang hanapbuhay (unemployed), magbigay ng kopya ng BIR Certification o Municipal/Barangay Certification of Non-employment. Kung ang ina ay walang hanapbuhay at nasa bahay lamang tanging ang ama na lamang na may hanapbuhay ang siyang kinakailangang magsumite ng nasabing dokumento.**

**FORM C**

**CERTIFICATE OF GOOD MORAL CHARACTER**

TO WHOM IT MAY CONCERN:

This is to certify that \_\_\_\_\_ has consistently maintained good moral character, there having no disciplinary action taken against him/her as of the date of application.

\_\_\_\_\_  
Printed Name & Signature of Principal/Guidance Counselor  
Date: \_\_\_\_\_

NOTE: Failure to maintain good moral character before the award of the scholarship shall cause forfeiture thereof. DOST-SEI may require another certification before the signing of the Scholarship Agreement, should the applicant qualify.

**FORM D-1 For Applicant from Regular High School**

Name of High School \_\_\_\_\_  
Address \_\_\_\_\_

**PRINCIPAL'S CERTIFICATION**

TO WHOM IT MAY CONCERN:

This is to certify that \_\_\_\_\_ is a candidate for graduation for the School Year 2010-2011 and is classified within the **upper five** percent of the total \_\_\_\_\_ graduating students.  
Number

\_\_\_\_\_  
Printed Name & Signature of Principal  
Date: \_\_\_\_\_

**FORM D-2 For Applicant from DOST-SEI Identified/DepEd Recognized Science High School**

**PRINCIPAL'S CERTIFICATION**

TO WHOM IT MAY CONCERN:

This is to certify that \_\_\_\_\_ is a candidate for graduation of \_\_\_\_\_ for the School Year 2010-2011.  
(Name of School/Address)

School Type:  PSHS System  DepEd Regional Science HS  Special Science Classes of the 110 S&T Oriented High Schools  
 Other DepEd Recognized Science High Schools  
(Attach certification from DepEd that the school has a special science curriculum)

\_\_\_\_\_  
Printed Name & Signature of Principal  
Date: \_\_\_\_\_

**FORM E** (In case applicant has already graduated from high school in the previous year)

**APPLICANT'S CERTIFICATION**

TO WHOM IT MAY CONCERN:

This is to certify that the undersigned has not taken any previous DOST-SEI Scholarship Examination and has not earned any post-secondary or undergraduate units.

Attested by: \_\_\_\_\_  
Printed Name & Signature of Parent/Guardian

\_\_\_\_\_  
Printed Name & Signature of Applicant  
Date: \_\_\_\_\_

**FORM F**

**PARENT'S CERTIFICATION**

This is to certify that my son/daughter, \_\_\_\_\_, has no pending application for immigration to the USA or any other country.

\_\_\_\_\_  
Printed Name & Signature of Parent  
Date: \_\_\_\_\_

**FORM G** (For RA 7687 Applicants only)

**CERTIFICATE OF RESIDENCY**

TO WHOM IT MAY CONCERN:

This is to certify that \_\_\_\_\_ is a bonafide resident of \_\_\_\_\_ for not less than 4 years.

\_\_\_\_\_  
Printed Name & Signature of Barangay Official/Principal  
Date: \_\_\_\_\_

**FORM B Household Information Questionnaire (Continuation)**

4. Electric Consumption for the Last Three Months  kwh  kwh  kwh  
 June 2010 July 2010 August 2010

(Note: Provide clear photocopies of the electrical bills. Present original copies for verification.)

5. Type of Toilet Facility Used by the Household (Indicate answer in the box provided)
- 1 Water-sealed, used exclusively by households      3 Closed pit, e.g. Antipolo      5 Others (pail system, arinola, etc.)  
 2 Water-sealed, shared with other households      4 Open pit
6. Floor area of the housing unit  (area in sq.m)
7. Ownership of the housing unit: (Indicate answer in the box provided)
- 1 Owned, Fully Paid    2 Owned, Amortized    3 Rented    4 Rent free/living w/ relatives    5 Others, pls. specify \_\_\_\_\_
8. Construction material of the walls of the housing unit: (Indicate answer in the box provided)
- 1 Concrete      3 Wood (e.g., bamboo, coco lumber)  
 2 Semi-Concrete      4 Makeshift/Salvaged
9. Owns residential land area other than where the family resides?  (area in sq m)       None
10. Owns agricultural or non-residential land?  (area in sq m)       None
11. Indicate name(s) of existing health card/insurance (other than Philhealth/Medicare/GSIS/SSS) of family members, if any: \_\_\_\_\_

12. Indicate name(s) of existing credit cards of the family members, if any: \_\_\_\_\_

13. Does your household own any of the following appliances, facilities and vehicles?

No. of Working Units	Appliance/Vehicle	Year Acquired (only for the latest unit)
_____	Airconditioning unit	_____
_____	Digital Camera	_____
_____	Video Camera or Movie Camera	_____
_____	Gas/Electric Range w/ Oven	_____
_____	Microcomputer	_____
_____	Car/Van/Pajero/Other Similar Vehicle	_____
_____	Jeepney (AUV/Owner Type)	_____
_____	Motorcycle	_____

**SIGNED DECLARATION BY THE PARENTS/LEGAL GUARDIAN:**

I/We hereby certify to the truthfulness and completeness of information provided. Any misinformation or withholding of information will automatically disqualify my/our child from the DOST-SEI Scholarship Program. I am/we are also willing to refund all the financial benefits received plus the appropriate interest if such misinformation is discovered after my/our child accepted the award.

In connection with this application for financial aid, I/we hereby authorize the DOST-SEI/DOST Regional Office to conduct a credit check on the family finances, including bank accounts, credit card accounts, SSS and GSIS accounts, and to visit our family dwelling.

Father's Signature \_\_\_\_\_  
 Over Printed Name \_\_\_\_\_  
 OR  
 Mother's Signature \_\_\_\_\_  
 Over Printed Name \_\_\_\_\_  
 Legal Guardian's Signature \_\_\_\_\_  
 Over Printed Name \_\_\_\_\_  
 Date \_\_\_\_\_  
 Contact Nos. of Father/Mother/Legal Guardian: Landline : \_\_\_\_\_  
 Cellphone : \_\_\_\_\_

**For DOST RO/SEI STAFF USE ONLY**

**CHECKLIST OF DOCUMENTS SUBMITTED:**

- Accomplished Information Sheet including Forms C, D-1 or D-2, E and F
- Form G \*
- Photocopy of Birth Certificate
- 2009 Income Tax Return/W2/BIR Certificate of Tax Exemption of Parents/Municipal/Barangay Certification of Non-employment
- Latest three consecutive months of Electric Bill for the Year 2010
- Assessment form/statement of account from the private high school/scholarship certification
- Two recent photographs (1" x 1")
- If legal guardian, affidavit of guardianship
- Certification of tribal affiliation/membership from the local Office of Muslim Affairs (OMA)/National Commission on Indigenous People (NCIP)
- Accomplished Household Information Questionnaire (Form B) \*

\* For RA 7687 Applicants only

**THIS APPLICATION FORM AND ATTACHED DOCUMENTS WERE VERIFIED FOR COMPLETENESS BY:**

\_\_\_\_\_  
 Printed Name/Signature

SEI     DOST RO. No. \_\_\_\_

Remarks:  
 \_\_\_\_\_  
 \_\_\_\_\_

Date: \_\_\_\_\_