



BASIC EDUCATION ENROLMENT FORM

THIS FORM IS NOT FOR SALE



School Year: -

Check the appropriate box only:

☐ No LRN ☐ With LRN ☐ Returning (Balik-Aral)

INSTRUCTIONS: Print legibly all information required in CAPITAL letters. Submit accomplished form to the Person In-Charge/Registrar/Class Adviser. Use black or blue pen only.

STUDENT INFORMATION

PSA Birth Certificate Number:

Learner Reference Number (LRN):

LAST NAME

FIRST NAME

MIDDLE NAME

EXTENSION NAME e.g. Jr., III (if applicable) _____

DATE OF BIRTH: / / SEX ☐ MALE ☐ FEMALE AGE

(Month/Day/Year)

Belonging to any indigenous Peoples (IP) Community/Indigenous Cultural Community? ☐ No ☐ Yes If yes, please specify: _____

Mother Tongue _____

ADDRESS

House Number and Street _____

Barangay _____

City/Municipality/Province/Country _____

Zip Code

PARENT'S/GUARDIAN'S INFORMATION

Father's Name (Last Name, First Name, Middle Name) _____

Mother's Maiden Name (Last Name, First Name, Middle Name) _____

Guardian's Name (Last Name, First Name, Middle Name) _____

Telephone No(s). _____

Cellphone No(s). _____

For Returning Learners Balik-Aral) and Those Who Shall Transfer /Move in

Last Grade Level Completed _____

Last School Year Completed _____

School Name _____

School ID

School Address _____

For Learners in Senior High School

Semester ☐ 1st Sem ☐ 2nd Sem

Track _____ Strand (if any) _____

I hereby certify that the above information given are true and correct to the best of my knowledge and I allow the Department of Education to use my child's details to create and/or update his/her learner profile in the Learner Information System. The information herein shall be treated as confidential in compliance with Data Privacy Act of 2012.

Signature Over Printed Name of Parent/Guardian _____

Date _____

For use of DepEd Personnel Only. To be filled up by the Class Adviser.

DATE OF FIRST ATTENDANCE

(Month/Day/Year)

/ /

Grade Level _____

Track (for Senior HS) _____