



**2017 DOST-PHILIPPINE SCIENCE HIGH SCHOOL SYSTEM
NATIONAL COMPETITIVE EXAMINATION (NCE)
APPLICATION FORM**

THESE MATERIALS ARE NOT FOR SALE. THEY MAY BE PHOTOCOPIED AND MAY BE DOWNLOADED FROM www.pshs.edu.ph

Instructions:

Please accomplish this form in two copies. Type or print legibly all information needed. **DO NOT ABBREVIATE. DO NOT LEAVE ANY ITEM BLANK.** Countersign all erasures and corrections made.

DEADLINE OF SUBMISSION: September 1, 2017

Staple Only

1" x 1"
Photo

PERSONAL DATA:

1) NAME OF PUPIL-APPLICANT: (Last Name, First Name, Middle Name)

2) BIRTHDATE:

<input type="text"/>							
M	M	D	D	Y	Y	Y	Y

3) SEX:

MALE

4) CONTACT

NUMBERS:
(pls. include all possible contact numbers)

5) EMAIL ADDRESS:

(pls. include all possible email addresses)

6) COMPLETE HOME/ PERMANENT ADDRESS: (pls. include your zip code)

BARANGAY NAME (based on your residence): _____

CONSIDER THE FOLLOWING WHEN CHOOSING A CAMPUS:

- The score in the NCE is the major basis for qualifying to any PSHS campus.
- All examinees are ranked from highest to lowest. The top 240 qualifiers irrespective of region of origin will be invited to enroll at the Main Campus but acceptance to the invitation is not compulsory.

TO BE FILLED UP BY THE PARENTS:

- Is your child a Filipino citizen?
- Does your child belong to the Indigenous Cultural Communities? *If YES, pls. specify:* _____
- Does your child have a pending or approved application as immigrant in any foreign country?
- Has your child taken the PSHS National Competitive Examination before?
- Are you willing to enroll your child in a regional campus even if qualified in the Main Campus (MC)?
(If NO, your child will be considered for ranking, as principal or alternate qualifier, **ONLY in the MC, Quezon City.**)

YES NO

<input type="checkbox"/>	<input type="checkbox"/>

Please check the regional campus (**choose only ONE**) if answer in **No.5 is YES.**

- ILOCOS REGION** – San Ildefonso, Ilocos Sur
- CAGAYAN VALLEY** – Bayombong, Nueva Vizcaya
- CENTRAL LUZON** – Clark Freeport Zone, Pampanga
- CALABARZON** – Batangas City
- MIMAROPA** – Odiongan, Romblon
- BICOL REGION** – Goa, Camarines Sur
- WESTERN VISAYAS** – Jaro, Iloilo City
- CENTRAL VISAYAS** – Argao, Cebu
- EASTERN VISAYAS** – Palo, Leyte

- ZAMBOANGA PENINSULA** – Dipolog City
- CENTRAL MINDANAO** – Balo-i, Lanao del Norte
- SOUTHERN MINDANAO** – Tugbok, Davao City
- SOCCSKSARGEN** – Paraiso, Koronadal City
- CORDILLERA ADMINISTRATIVE REGION** – Irisan, Baguio City
- CARAGA** – Ampayon, Butuan City

I certify that the above information is true and correct.
I understand that any false or misleading information will result to the disapproval of application/admission.

Signature over Printed Name of Parents

TO BE FILLED UP BY THE SCHOOL AUTHORITY CONCERNED:

1) NAME OF SCHOOL (Write name of school in full):

2) COMPLETE SCHOOL ADDRESS:

3) SCHOOL CONTACT NOS.:

4) SCHOOL TYPE:

Public

Private

5) Pupil-Applicant's FINAL GRADE IN SCIENCE (SY 2016-2017):

6) Pupil-Applicant's FINAL GRADE IN MATHEMATICS (SY 2016-2017):

I hereby certify that the pupil-applicant is currently enrolled in Grade 6 for SY 2017-2018.

Signature over Printed Name of Principal/ School Head/ Registrar/ Teacher

(PLEASE DO NOT DETACH)

This serves as a proof of application. **IMPORTANT: This DOES NOT serve as the test permit.**

NAME OF PUPIL-APPLICANT: _____

NAME OF SCHOOL: _____

Submit the following upon filing of application:

- Fully accomplished Application Form in two (2) copies
- Two (2) identical recent 1 x 1 ID pictures
- Non-refundable test fee - P 100 for private school students/**Free for public school students**
- Certified true copy of report card (SY 2016-2017)
- If final grade in Science and/ or Math is below 85, submit a certification or proof that the child belongs to the upper 10% of the batch

Recommendation of the PSHS Registrar/DOST or PSTO Coordinator:

As per data above:

Approved: []

Disapproved: []

Reason/s for Disapproval: _____

Processed by: [] DOST _____ Date: _____

[] PSHS _____

To be accomplished by the PSHS Cashier:

Mode of Payment: Cash only

Payment Received by: _____

Date: _____

REMINDERS TO THE EXAMINEE:

- Be at your testing center on **October 21, 2017** one (1) hour before your scheduled examination (either a.m. or p.m. as indicated in the exam permit).
- Present the **Examination Permit** and your **school I.D.** to the Proctor/ Room Examiner.
- Bring at least **two sharpened #2 pencils, a good eraser and snacks.**
- If you do not receive your examination permit two (2) weeks before the exam, you may visit or call the nearest PSHS Campus or call PSHS-Admissions Office at telephone no. (02) 939-PSHS (9397747) or check at www.pshs.edu.ph.**
- In case of emergency (e.g. adverse weather conditions, impassable roads due to floods and earth quake), the NCE may be postponed. You should call the PSHS Admissions Office or the nearest PSHS Campus or check www.pshs.edu.ph for announcements.
- You will be notified if you qualify to enroll at PSHS either by mail or you may also check results at www.pshs.edu.ph. You may also inquire from the nearest PSHS Regional Campus or call PSHS-Admissions Office, Tel. No.: (02) 939-PSHS (9397747).
- The following are items to be submitted as enrollment requirements for **qualified examinees ONLY**: a) Certified true copy of Grade 6 card (SY 2017-2018) with character rating of at least a satisfactory rating or its equivalent; b) Photocopy of any document with examinee's date of birth.