ANNEX 1



BASIC EDUCATION ENROLLMENT FORM THIS FORM IS NOT FOR SALE.

School Year	Check the appropria	_			
Grade level to Enroll:	1. With LRN?	Yes No	2. Returning (Balik-Aral)		
	ITAL letters. Submit accomplished form to the		dviser. Use black or blue pen only.		
	LEARNER IN	FORMATION			
PSA Birth Certificate No. (if available upon regist (LRN) Last Name First Name Middle Name Extension Name e.g. Jr., III (if applicable)	Belo	Sirthdate (mm/dd/yyyy)	Ps? Yes No	munity	
If Yes, specify the type of disability:					
☐ Visual Impairment ☐ a. blind		Learning Disability Emotional- Behavioral Disorde	☐ Intellectual Disability r ☐ Orthopedic/Physical Handicap		
□ b. low vision	☐ Speech/Language Disorder ☐	Cerebral Palsy	☐ Special Health Problem/ Chronic Disease		
☐ Multiple Disorder			☐ a. Cancer		
Current Address					
House No.	Sitio/Street Name	Barangay			
Municipality/City	Province	Country	Zip Code		
Permanent Address Same with you	ur Current Address? ☐ Yes ☐ No				
House No./Street	Street Name	Barangay			
Municipality/City	Province	Country	Zip Code		
PARENT'S/GUARDIAN'S INFORMATION					
Father's Name Last Name	First Name	Middle Name	Contact Number		
Mother's Maiden Name				_	
Last Name	First Name	Middle Name	Contact Number		
Legal Guardian's Name	i L				
Legal Guardian's Name Last Name	First Name	Middle Name	Contact Number		
For Returning Learner (Balik-Aral) and Those Who will Transfer/Move In					
Last Grade Level Completed		Last School Year Co	ompleted	_	
Last School Attended	Last School Attended School ID				
For Learners in Senior High School					
Semester ☐ 1st ☐ 2 nd					
	Strand				
If school will implement other distance learning modalities aside from face-to-face instruction, what would you prefer for your child? Choose all that apply: Modular (Print) Choose all that apply: Homeschooling Homeschooling					
I hereby certify that the above information given are true and correct o 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 the Data Privacy Act of 2012. Signature Over Printed Name of Parent/Guardian					