Republic of the Philippines

Benguet State University

 **COLLEGE OF PUBLIC ADMINISTRATIONAND GOVERNANCE**

La Trinidad, Benguet

Philippines 2601

PLEASE ATTACH

RECENT 2X2 PHOTO

HERE

**APPLICATION FOR ADMISSION**

**DOCUMENTARY REQUIREMENTS:**

***Note:*** *Ladderized Program*

|  |  |  |
| --- | --- | --- |
|  **CePA** 1. Photocopy of Official Transcript of Records (OTR). If non-BSU graduate, please request a Certificate of Transfer of Credentials (CTC) from the last school attended.
2. Recommendation from two former professor or supervisor (please use the IPA Standard Recommendation Form).
3. Certificate of English Proficiency. This is required only for applicants from countries where English is not the medium of instruction and / or not the naïve language.
 |  **DiPA**1. Must have passed all CePA 12 units courses

*Please note: If non-CePA graduate and transferees, accomplish CePA Application Requirements*. |  **MPA**1. Must t have passed all DiPA 18 units courses

*Please note: Those who did not undergone the ladderized program will have to sumit the requirements for CePA.* |
| *Please note that Application requirements are different from Admission requirements indicated in the Notice of Acceptance.* |
| **APPLICATION FEE:** Php 100.00 for Filipino Citizens or US $25 for foreign nationals. |  |

**DEADLINES:** June 30 for the first semester (August) admission, November 30 for 2nd semester (January) admission, and April 30 for mid-year term (June) admission.

**PERSONAL DATA**

**1.** Full Legal Name:

 (Family Name) (First Name) (Middle Name)

**2.** Mailing Address:

 (Number) (Street) (City/Town) (Province/State) (Zip Code) (Country)

**3**. Contact Details:

 (Email address) (Cell phone No.)

**4.** Place of Birth: **5.** Date of Birth:

**6.** Citizenship: **7.** Sex: Male Female

**8.** Civil Status: Single Married Widow/er

**9.** Present Occupation/Position:

**10.** Name of Employer (Institution or Company) and Contact details:

**11.** Address of Employer:

 (Number) (Street) (City/Town) (Province/State) (Zip Code) (Country

**12. ACADEMIC BACKGROUND**

List all schools previously attended starting with the most recent.

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| **NAME AND ADDRESS OF SCHOOL** | **MAJOR FIELD** | **DEGREE & DATE RECEIVED** |
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**ADMISSION REQUEST**

**13.** Semester for which admission is sought:

 First Semester (S.Y. 20\_\_\_ ) Second Semester (S.Y. 20\_\_\_ ) Summer (Year 20\_\_\_ )

**14.** What researches other than thesis have you published? (if applicable)

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| --- | --- | --- | --- |
| **TITLE OF ARTICLE** | **PUBLISHED/ NOT PUBLISHED** | **TITLE OF PUBLICATION** | **YEAR PUBLISHED** |
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**15.** Please list your membership in honor and professional organizations. (Pls. use additional sheet if necessary)

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**16.** Please list scholarship, honors, prizes and awards you have received. (Pls. use additional sheet if necessary)

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**17.** Names, titles and address of the professors whom you have requested to recommend you.

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| --- | --- | --- |
| **NAME** | **TITLE** | **ADDRESS** |
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**CERTIFICATION**

 I affirm that the information I have provided in this application form is complete, accurate and true to the best of my knowledge. I agree to submit other documents that may be required for this application for admission. I understand that furnishing any false information may result in the cancellation of my admission.

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 Signature of Applicant Date

**(To be filled up by Evaluation Committee)**

 Approval Recommended Denial Recommended

 Regular Admission

 Admission on Probation

Conditions of Admission on Probation

EVALUATION COMMITTEE

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Member Member

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

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College Secretary

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

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

College Dean

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

**OFFICE OF THE UNIVERSITY REGISTRAR’S ACTION FOR THE ISSUANCE OF NOTICE OF ACCEPTANCE**

 Approved Denied

 Regular Admission

 Admission on Probation

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University Registrar

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