



**OFFICE OF THE MAYOR  
Taguig City, Philippines**

**LIFELINE ASSISTANCE FOR NEIGHBORS' IN-NEED  
SCHOLARSHIP APPLICATION FORM  
Honors/Premier/Priority**

Recent  
2x2  
ID Picture  
(taken in the last 6  
months)

**Instruction:**

1. PRINT all entries. Place an X on the appropriate blanks.
2. Be HONEST and ACCURATE with your answers.

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

**SCHOLARSHIP APPLIED FOR**

\_\_\_\_ Honors (Top \_\_\_\_\_ of the Batch)      \_\_\_\_ Premier      \_\_\_\_ Priority

\_\_\_\_ New Applicant    \_\_\_\_ Renewing Scholarship (No. of Semesters that you have benefited from the Scholarship \_\_\_\_\_)

|                                |                                                                                                                                                                                                                                                                                                                |
|--------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Honors(Full)Scholarship</b> | Top 10 graduates of public high schools in Taguig.                                                                                                                                                                                                                                                             |
| <b>Premier Schools</b>         | Those enrolling in, or enrolled in the University of the Philippines System (Luzon Campuses) & other public & private colleges and universities certified by CHED as Centers of Excellence in the NCR.                                                                                                         |
| <b>Priority Courses</b>        | Those enrolling in or enrolled in DOST-listed priority courses in DOST-listed schools, or if persons with disabilities, must be endorsed by the city PDAO, or if taking up law or medicine, must be enrolled or enrolling in top performing schools as listed by the Program based on the listing of PRC/CHED. |

1. Please provide **2 (two) sets of all the documents**. All photocopied documents should be faithful reproduction of the original. **Bring the original copies of documents for validation purposes**. Ask for the "Receiving Copy" upon submission.
2. Fill in ALL the data required in the Application Form and **submit ALL the documents** during the Application. Scholarship application forms must be answered completely and those with incomplete requirements shall NOT be accepted, or IF inadvertently accepted, it shall NOT be processed.
3. Submit your Scholarship Application at the L.A.N.I. Scholarship Secretariat Office at the **Sen. Renato "Compañero" Cayetano Memorial Science and Technology High School (Cayetano Science)**, Pamayanang Diego Silang, Brgy. Ususan, Taguig City, during the application period ONLY. Check the Scholarship (Taguig) FB Account and [www. Taguig.gov.ph](http://www.Taguig.gov.ph) regularly for announcement regarding dates and venue.
4. Please do NOT wait for the last day of the application period if you do not want to be inconvenienced, or worse rejected.

**CHECKLIST OF REQUIREMENTS TO BE SUBMITTED**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Filled-up Application Form with 2X2 Recent Picture<br><input type="checkbox"/> Enrolment Form for Current Semester/Term with Official Receipt, if applicable<br><input type="checkbox"/> Authenticated or True Copy of Grades last semester, with school seal/official signature (for trimester, grades for the past 2 terms)<br><input type="checkbox"/> Junior & Senior High School Report Card/Diploma/Other valid proof of having Graduated from High School (for Freshmen/New Applicants)<br><input type="checkbox"/> Certificate of Good Moral Character (Issued within the school year)<br><input type="checkbox"/> School ID (back to back photocopy in a single page)<br><input type="checkbox"/> <b>Certificate of Academic Excellence for Top 10 graduates of Taguig public high school</b> (for Honors/Full scholars) | <input type="checkbox"/> Other necessary documents to facilitate the processing of your scholarship application (Transcript or True Copy of Grades since start of college for New Applicants who are continuing students, F137, Course Curriculum, Birth Certificate, <b>PDAO Endorsement and ID</b> (for PWD Scholar), etc.<br><input type="checkbox"/> Voter's Certification issued by COMELEC, showing that at least one of the parents of the applicant is a registered voter (Issued after the May 9,2016 election)<br><input type="checkbox"/> Voter's Certification of the applicant (for 18 years old and above); (Issued after the May 9,2016 election) |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**PERSONAL INFORMATION**

Full Name: \_\_\_\_\_  
 (Last Name) (First Name) (Middle Name)

Address: \_\_\_\_\_ Barangay: \_\_\_\_\_  
 District (1 or 2): \_\_\_\_ Years of Residency in Taguig (applicant): \_\_\_\_ Age: \_\_\_\_ Gender: \_\_\_\_\_  
 E-mail Address: \_\_\_\_\_ Contact No.: \_\_\_\_\_ Religion: \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_ Marital Status: \_\_\_\_\_  
 Residence: \_\_\_\_ Owned by family \_\_\_\_ Owned by relatives \_\_\_\_ Renting \_\_\_\_ Paying-to-own \_\_\_\_ Others (pls specify): \_\_\_\_\_  
 If renting or paying-to-own, how much are you paying monthly?: P \_\_\_\_\_  
 Have you been the object of any disciplinary action in school? \_\_\_\_ Yes \_\_\_\_ No . Have you been accused or convicted of any offense/crime? \_\_\_\_ Yes \_\_\_\_ No If the answer to any of the last 2 questions above is "Yes," please provide details:

**COURSE and SCHOOL**

Course: \_\_\_\_\_ Year Level: \_\_\_\_\_ GWA last sem: \_\_\_\_\_  
 School: \_\_\_\_\_ Course Duration: \_\_\_\_ 2 yrs \_\_\_\_ 4 yrs \_\_\_\_ 5yrs  
 School Address: \_\_\_\_\_ Others: \_\_\_\_\_

Graduating this semester/term \_\_\_ Yes \_\_\_ No If yes, are you graduating with honors? \_\_\_ Yes \_\_\_ No  
 If no, how many semesters more to go before you graduate, including the current sem/term? \_\_\_\_\_

**EDUCATIONAL BACKGROUND**

| Name of Schools Attended | School Type<br>(Indicate if Public or Private) | School Address | Year Started - Year Graduated | Honors/Awards Received (if any) |
|--------------------------|------------------------------------------------|----------------|-------------------------------|---------------------------------|
| Senior High School       |                                                |                |                               |                                 |
| Junior High School       |                                                |                |                               |                                 |
| Elementary               |                                                |                |                               |                                 |

**FAMILY BACKGROUND**

|                                | FATHER<br>( ) Living ( ) Deceased | MOTHER<br>( ) Living ( ) Deceased | HUSBAND/WIFE<br>(If Married) |
|--------------------------------|-----------------------------------|-----------------------------------|------------------------------|
| Name                           |                                   |                                   |                              |
| Address                        |                                   |                                   |                              |
| Contact No.                    |                                   |                                   |                              |
| Occupation                     |                                   |                                   |                              |
| Place of Work                  |                                   |                                   |                              |
| Highest Educational Attainment |                                   |                                   |                              |
| Ave. Monthly Income            |                                   |                                   |                              |

Number of siblings in the family (including applicant): \_\_\_\_\_. Please fill out information below about your siblings:

| Name | Age | Marital Status<br>(M or S) | Highest Educational Attainment<br>(as of date) | If working, indicate where they work & their average monthly income |
|------|-----|----------------------------|------------------------------------------------|---------------------------------------------------------------------|
|      |     |                            |                                                |                                                                     |
|      |     |                            |                                                |                                                                     |
|      |     |                            |                                                |                                                                     |
|      |     |                            |                                                |                                                                     |
|      |     |                            |                                                |                                                                     |

*I hereby certify that ALL the answers given above are TRUE and CORRECT to the best of my knowledge, and the attached documents are FAITHFUL REPRODUCTION of the original copies. I further acknowledge that ANY ACT OF DISHONESTY OR FALSIFICATION MAY BE A GROUND FOR MY DISQUALIFICATION from this scholarship program.*

*I also understand that this submission of application does NOT automatically qualify me for the scholarship grant and that I will abide by the decision of the L.A.N.I. Scholarship Management.*

*Thank you so much.*

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

Attested by:

\_\_\_\_\_  
 Printed Name & Signature of Parent/Legal Guardian  
 Date: \_\_\_\_\_

***Investing in education, investing in the City's Foundation!***