



Manila Adventist College

(formerly Manila Sanitarium and Hospital and School of Medical Arts, Inc.)

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"Equipping students for life and preparing them for eternity"

Juris Doctor Program College of Law

APPLICATION FORM

PERSONAL DATA

Name: _____
Surname Given Name Middle Name
Date of Birth: _____ Place of Birth: _____ Citizenship: _____
Age: _____ Sex: _____ Civil Status: _____ Height: _____ Weight: _____
Religion: _____ Contact No: _____
E-mail Add: _____ Language/s Spoken: _____
Home Address: _____

EDUCATIONAL BACKGROUND

College Degree Earned: _____ Date Finished: _____
Name of the School: _____
Honors/Awards Received: _____

CAREER INFORMATION

Employed Self-Employed Unemployed
Name of Employing Company: _____
Regular Status Contractual Part-time

PERSON TO BE NOTIFIED IN CASE OF EMERGENCY

Name: _____ Address: _____
Relationship: _____ Contact No. _____ E-mail Add: _____
Medical History: _____
Treatment/s you have had: _____

Perceived General Health Condition: Excellent Very Good Good
 Fair Poor

I hereby certify that the above information is true and correct. If admitted, I agree to abide by the policies, rules and regulations of the college.

Applicant's Signature

Date