

IV. HOME AND FAMILY BACKGROUND

	FATHER [] Living [] Deceased	MOTHER [] Living [] Deceased
NAME		
AGE		
EDUCATIONAL ATTAINMENT	<input type="checkbox"/> Elementary Level <input type="checkbox"/> Elementary Graduate <input type="checkbox"/> High School Level <input type="checkbox"/> High School Graduate <input type="checkbox"/> College Level <input type="checkbox"/> College Graduate <input type="checkbox"/> Postgraduate <input type="checkbox"/> Others _____	<input type="checkbox"/> Elementary Level <input type="checkbox"/> Elementary Graduate <input type="checkbox"/> High School Level <input type="checkbox"/> High School Graduate <input type="checkbox"/> College Level <input type="checkbox"/> College Graduate <input type="checkbox"/> Postgraduate <input type="checkbox"/> Others _____
COURSE		
OCCUPATION		
NATURE OF WORK	<input type="checkbox"/> Government Employee <input type="checkbox"/> Overseas Worker <input type="checkbox"/> Private Employee <input type="checkbox"/> Entrepreneur <input type="checkbox"/> Unemployed <input type="checkbox"/> Others _____	<input type="checkbox"/> Government Employee <input type="checkbox"/> Overseas Worker <input type="checkbox"/> Private Employee <input type="checkbox"/> Entrepreneur <input type="checkbox"/> Unemployed <input type="checkbox"/> Others _____
COMPANY		
COMPANY ADDRESS		
CONTACT NUMBER		

Guardian's Name (if not living with parents): _____
 Age: ____ Relationship: _____ Contact Number: _____
 Occupation: _____ Address: _____

Starting with the eldest, list the names of children in your family including yourself.

Name	Sex	Age	School/ Company	Level / Position

Person to contact in case of emergency:

Name _____ Relationship: _____ Contact No. _____

Parents' Marital Relationship: (Please Check)

- Single Parent Married and staying together Married but Separated
 Widowed Others (please specify): _____

Number of Brother/s: ____ Number of Sister/s: ____
 Source of Financial Support in Schooling: Parents Relatives Self
 Scholarship (please specify) _____

How many are earning a salary in the family? (check as many as possible)

- Father Mother Sister Brother

No. of sisters working ____ No. of brothers working ____

Parents' Total Monthly Income:

- Below Php 5,000 Php 15,001-Php 20,000 Php 30,001-Php 35,000 Php 45,001-Php 50,000
 Php 5,001- Php 10,000 Php 20,001-Php 25,000 Php 35,001-Php 40,000 Above Php 50,001
 Php 10,001-Php15,000 Php 25,001-Php 30,000 Php 40,001-Php 45,000 Others _____

Present Living Arrangement: *(Please Check)*

- family home house of married brother/sister relative's house grandparent's house
 step family's house family rented apartment Others *(please specify)* _____

Mode of Transportation To and From School:

- Bus Tricycle Car Jeepney
 Motorcycle Bicycle Others *(please specify)* _____

Health Record:

Illness(es) that afflicted me in the past: _____
 Illness(es) I am still afflicted with: _____
 I have been hospitalized due to _____

Reasons you enrolled in Carcar City College: *(Please Check)*

- Personal Choice Near to the Residence Did not pass other school *(please specify)* _____
 Parent's Choice Scholarship Others *(please specify)* _____

Available Electronic Gadgets for Online Class:

- Cellular Phone Tablet Laptop Personal Computer Computer at Internet Shops

Internet Provider:

- Mobile Data Pocket Wifi Home Wifi Connection Internet Shops

PERSONALITY PROFILE

Choose only one (1) answer for each item.

- Most of the time, I prefer to be with others alone
- When making decisions,
 I consider how I feel about the matter; my heart rules over my mind
 I consider what I think is necessary regardless of how I feel or what others feel about the matter
- Most of the time
 I am quick to make up my mind; I decide on matters fast
 I take time before making decisions because I need to think about other considerations as well

Complete the following sentences.

- I can describe myself as _____
- My ambition _____
- I would always adhere to the values _____
- I am afraid _____
- My priorities are _____
- My stay in school would be happy _____
- I enjoy _____
- My favorite _____
- I am interested in _____
- I wanted to learn how to _____

***Please review carefully before submission.

I affirm that all the above-mentioned information are true and reliable.

Signature over Printed Name of Student

Date