Republic of the Philippines Province of Cagayan Municipality of CLAVERIA

MUNICIPAL EDUCATIONAL ASSISTANCE PROGRAM APPLICATION (Highschool)

Last Name	First Name	Middle Name
Address:		
Age:	Gender:	
Birthday Date:	Birthplace:	
Civil Status:	Contact No.:	
Schools Attended:		
Elementary:	Yea	ar Graduated:
Junior:	Gra	de/Level:
Senior:	Gra	de/Level:
Parents:		
Father:	Occupation: _	
Mother:	Occupation: _	
Are you a recipient of any scholar grant?	if yes, what?_	
Note: Indicating false information in the Please write legibly.	is application form	may be charged of perju
Signature of Applicant	×	Date
Requirements:		
Certificate of Grades for the previous Registration/Enrolment Form Certificate of residency and Indigence		gay

Note:

✓ No Grade lower than 75 & must have an average grade not lower than 80