



# PTS COLLEGE & ADVANCED STUDIES

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*Spirituality and Academic Excellence*

## APPLICATION FOR ADMISSION Undergraduate Studies

2x2 Photo  
 For online submission,  
 attach photo to E-Mail.

### Preferred Program:

- Certificate of Special Studies (CSS)
- Bachelor of Arts in Theology (BATH)
- Bachelor of Arts in Biblical Studies (BABS)
- Bachelor of Christian Education (BCEd)  
*(Secondary Education major in Values Education)*
- Bachelor of Elementary Education (BEEd)
- Bachelor of Early Childhood Education (BECEd)

### Entry Term (Regular/Modular):

- 1<sup>st</sup> Semester
- 2<sup>nd</sup> Semester
- Inter-semester Module

### Academic Year:

20\_\_\_ to 20 \_\_\_

### CSS Specialization:

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## PERSONAL INFORMATION

Last Name		First Name		Middle Name		Suffix	
Current Address							
Permanent Address (if other than current)							
Email Address				Landline No.		Mobile No.	
Age	Date of Birth (MM/DD/YY)		Place of Birth (City/Town, Province)			Gender	
Civil Status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Annulled				Nationality		Citizenship	
Name of Father		Contact No.		Name of Mother		Contact No.	
Occupation		Email Address		Occupation:		Email Address	
Name of Spouse		Occupation		Name of Children		Age(s)	Gender
Spouse's Age		Contact No.		1.			
Spouse's Birth Date (MM/DD/YY)		Email Address		2.			
Nationality				3.			
				4.			
				5.			

## EDUCATIONAL INFORMATION

Senior High School (If non-SHS Graduate, High School)	
School Name	School Address

SHS Track	Training/Extra-curricular Participation		
Company/Organization (Immersion)		Company/Organization Address (Immersion)	
Date Graduated (MM/YY)	General Point Average	Honor(s)/Award(s) Received	
<b>Technical-Vocational</b>			
School/Provider Name		School/Provider Address	
Courses/Programs Taken			
Name of Course(s) Taken:		Certification(s) Received:	
<b>College Undergraduate/Associate Degree</b>			
School Name		School Address	
Course Program		Major	
Inclusive School Years	Units Earned	Honor(s)/Award(s) Received	
Reason for stopping			
<b>Informal Education (Non-DepEd/Non-CHEd)</b>			
Training/Course Name		Training/Course Provider	Inclusive Date(s)

### VOCATIONAL/EMPLOYMENT INFORMATION

<i>List positions and jobs held beginning with the most recent/current job.</i>				
Position /Type of Work	Company/Organization Name	Company/Organization Location	Inclusive Dates	Full-Time   Part-Time   Freelance

**FAITH and MINISTRY INFORMATION**

Current Faith/Religion	Since When?	Name of church you were baptized	Month/Year of Baptism	
Current Church		Current Church Address		
Name of Pastor/Minister		Email Address	Contact No.	
Denomination/Affiliation	How long have you been attending this church?	Your Current Ministry Involvement		
Ministerial Status <input type="checkbox"/> Ordained <input type="checkbox"/> Licentiate <input type="checkbox"/> Ministerial Candidate				
<b>List all the other churches you attended and/or became a member of and/or served.</b>				
Dates (MM/YY)	Church Name	Location	Denomination/Affiliation	Nature of Involvement

**FINANCIAL INFORMATION**

<b>How do you plan to finance your education? Check and answer all that apply. (Combined support is allowed)</b>			
<input type="checkbox"/> Self/Spouse-support <input type="checkbox"/> Parental Support <input type="checkbox"/> Relative Support <input type="checkbox"/> Direct Sponsorship <input type="checkbox"/> Church Sponsorship <input type="checkbox"/> Scholarship			
If Self/Spouse-support:	Gross Monthly Income	Source of Income:	<input type="checkbox"/> Full-time Employment <input type="checkbox"/> Part-time Employment <input type="checkbox"/> Business <input type="checkbox"/> Freelance <input type="checkbox"/> Savings/Securities
If Parental-support:	Gross Monthly Income	Source of Income:	<input type="checkbox"/> Full-time Employment <input type="checkbox"/> Part-time Employment <input type="checkbox"/> Business <input type="checkbox"/> Freelance <input type="checkbox"/> Savings/Securities
If Relative-Support	How much will your relative contribute?  Semesters covered:	What is your commitment/obligation to your relative during/after your studies?	
If Direct Sponsorship	How much will your sponsor contribute?  Semesters covered:	What is your commitment/obligation to your sponsor during/after your studies?	
If Church Sponsorship	How much will your sponsor contribute?  Semesters covered:	What is your commitment/obligation to your sponsor during/after your studies?	
If Scholarship	What will the scholarship cover?  Semesters covered:	What is your commitment/obligation to the scholarship grantor during/after your studies?	

**APPLICANT'S PLEDGE**

I, \_\_\_\_\_, hereby agree that,

*All information provided herein are true and correct.*

*PTS College and Advanced Studies (PTSCAS) is authorized to conduct all necessary checking and verification.*

*Should I be admitted as a student, I will abide with the policies, standards, and guidelines of PTSCAS, seek to live in harmony with everyone in the campus, and promptly meet all obligations.*

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Signature

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Date