



2 x 2 Picture

(Submit 3 copies of recent 2 x 2 picture with white background)

7TH Floor, ACB, Pearl Drive, Ortigas Center, Pasig City Tel: (632) 637-0912 loc. 323 and 368

Email Address: slg@uap.asia

Juris Doctor Program

Application for Admission

Application No: _____
LSQT date: _____
(To be filled up by SLG officer)

INSTRUCTIONS:

- Fill out the required information. Do not leave items unanswered. **Put n/a for items not applicable to you.** (Note: This application form must be filled out in ink, typewritten or reproduced from a computer. Kindly limit your answers to the spaces provided.)
- The following requirements and documents must be submitted together with this accomplished application form to the School of Law and Governance
 - Photocopy of collegiate transcript of records showing compliance with eligibility requirements for admission to the Law program (a. have completed at least 18 units of English, 6 units of Mathematics, and 18 units of Social Science subjects, 3 units of Rizal; b. have at least a GWA of 80% or equivalent).
 - For graduating students, a certification of candidacy for graduation from your Registrar
 - For graduates and professionals, a photocopy of your collegiate diploma
 - 3 copies of I.D. picture, size 2" x 2" with white background
 - Proof of payment of the LSQT testing fee of PHP 1,500

APPLICANT INFORMATION

Name _____
LAST NAME FIRST NAME MIDDLE NAME NICKNAME

Sex	Nationality	Civil Status	Religion
Date of Birth (DD-MM-YYYY)	Birth Place	Telephone number	Mobile number
		Email Address	
Complete Permanent Address (Foreign students should specify their address at their country of origin)			
House/Unit Number _____		Street _____	
City _____			
Province _____		Zip Code _____	
Mailing Address (if not the same as above)			
_____		_____	
_____		Zip code _____	
Father's Name		Mother's Name	
Occupation		Occupation	
Address and Contact Details		Address and Contact Details	
No. of Older Siblings	No. of Younger Siblings	Who to Contact In Case of Emergency?	

		Contact Details
If married, name of Spouse		For applicants <u>currently</u> employed
No. of children		Present employer
Does your family own a business/Do you own or run your own business? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please specify name and nature of business		Employer address
		Reference person and contact details
		Position & employment status (<i>probationary, regular etc.</i>)
In the box below, state and describe briefly any illnesses or health concerns		

EDUCATION AND QUALIFICATIONS		
School <i>(List current and all schools previously attended)</i>	Period Attended/Year Graduated <i>(If currently enrolled, specify date applicant expects to graduate)</i>	Degree or Equivalent
High School		
College		
Graduate School		
Others		
Government/Licensing Exam(s) Passed		
Professional certifications		
Membership in Professional Organizations, Associations, etc.		

What was your **General Weighted Average** for your undergraduate program? *(If not yet a graduate, the estimated GWA?)* _____

SCHOLASTIC INFORMATION

List and explain all your academic achievements, honors, awards received in college/university, and extra-curricular activities. Indicate when you received them.

Were you ever dismissed/suspended/meted any form of disciplinary action (academics or conduct) in any of the schools you attended? ___ Yes ___ No
If yes, please explain.

