



## St. Rita's College of Balingasag

Balingasag, Misamis Oriental  
Higher Education Department

### COLLEGE REGISTRATION FORM (Old Students)

#### GENERAL INFORMATION

LAST NAME:	FIRST NAME:	MIDDLE NAME:	AGE:
DATE OF BIRTH:	PLACE OF BIRTH:	RELIGION:	CITIZENSHIP:
EMAIL ADDRESS:	CIVIL STATUS <i>(please check)</i> : <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed		GENDER <i>(please check)</i> : <input type="checkbox"/> Female <input type="checkbox"/> Male
PERMANENT HOME ADDRESS:			CONTACT NUMBER:

#### STUDENT'S PLEDGE

In consideration of my admission to St. Rita's College of Balingasag and of the privilege of a student of this institution, I hereby promise and pledge to abide by and comply with all the rule and regulations laid down by competent authority in the college and the institution

Parent's/ Guardian Signature \_\_\_\_\_ Student's Signature \_\_\_\_\_

#### ENROLLMENT DETAILS *(Please check the box for your choice in each category.)*

Semester: <input type="checkbox"/> 1 <sup>st</sup> <input type="checkbox"/> 2 <sup>nd</sup>	Please Select: <input type="checkbox"/> Regular <input type="checkbox"/> Irregular	Year Level: <input type="checkbox"/> 1 <sup>st</sup> <input type="checkbox"/> 2 <sup>nd</sup> <input type="checkbox"/> 3 <sup>rd</sup> <input type="checkbox"/> 4 <sup>th</sup>
Course: <input type="checkbox"/> BS Business Administration <input type="checkbox"/> BS Criminology <input type="checkbox"/> BS Elementary Education <input type="checkbox"/> BS Hospitality Management <input type="checkbox"/> BS Information Technology <input type="checkbox"/> BS Secondary Education	Major <input type="checkbox"/> BSBA <input type="checkbox"/> Financial Management <input type="checkbox"/> Human Resource Management <input type="checkbox"/> Marketing Management <input type="checkbox"/> N/A	BS Secondary Education <input type="checkbox"/> Major in English <input type="checkbox"/> Major in Filipino <input type="checkbox"/> Major in Mathematics <input type="checkbox"/> Major in Science <input type="checkbox"/> N/A

#### *To be signed during submission of requirements.*

_____	_____	_____
1) Student's Signature	2) Program DEAN / OIC	3) DEAN of Student Affairs
_____	_____	
4) Registrar	5) Cashier	

**Disclaimer:** I have read the institution Data Privacy Statement and express my consent for St. Rita's College of Balingasag to collect, record, organize, update or modify, retrieve consult use, consolidate, block, erase or destruct my personal data as part of my information. I hereby affirm my right to be informed, object to processing, access and rectify, suspend or withdraw my personal data, and be agreeable in case of change pursuant to the provisions of the Republic Act No. 10173 of the Philippine Data Privacy Act of 2012 & its corresponding Implementing Rules & Regulations