



EMILIO AGUINALDO EDUCATIONAL CORPORATION
AGUINALDO INTERNATIONAL SCHOOL
PHILIPPINES

PARENT/GUARDIAN INFORMATION FORM

Parent/Guardian

Name of Applicant (First, Middle Initial, Last) _____ Preferred name/Nickname _____

Male/ Female E- Mail Address _____ Candidate for _____ Grade of School Year _____

Student Primary Address _____

City _____ State _____ Country _____ Zip _____ Home Telephone _____

Mailing Address (in the Philippines) _____

Birthdate _____ Place of Birth _____ Citizenship _____

Other Languages spoken at home _____

Applicant's School Information

Present School _____ Current Grade _____

School Address _____ City _____ State _____ Zip _____

School Telephone _____

Previous School(s) and grade(s) attended _____

Family Information

Parent/Guardian I

Parent/Guardian II

Parent/Guardian I	Parent/Guardian II
(Mr., Mrs., Dr., Ms.) and Name	(Mr., Mrs., Dr., Ms.) and Name
Relationship to Applicant	Relationship to Applicant
Home Address	Home Address
City, ZIP Code No.	City, ZIP Code No.
Contact Phone No.	Contact Phone No.
Occupation/Position	Occupation/Position
Business/Firm	Business/Firm
Business Telephone	Business Telephone
Highest Educational Attainment	Highest Educational Attainment
School/College(s) attended	School/College(s) attended
E - Mail Address and Fax No.	E - Mail Address and Fax No.

Please check all that apply:

- Parents/Guardians living together Parents/Guardians separated
 Parent/Guardian I remarried Parent/Guardian I deceased
 Parent/Guardian II remarried Parent/Guardian II deceased

If separated or divorced, with whom does the student reside? _____

If Parent/Guardian I is remarried, spouse's full name and address _____

If Parent/Guardian II is remarried, spouse's full name and address _____

