



MMIS Application for Evaluation
SY _____

Name of the Child: _____

First Name _____ Middle Name _____ Surname _____

Previous School Attended: _____ Grade Level: _____ Gen. Ave: _____

Date of Birth: _____ Age (As of June): _____

Level Applied for: Pre-school _____ Grade School _____ Junior High _____ Senior High Strand: STEM_ ABM_ HUMMS_

Father's Name: _____ Mother's Name: _____ Religion Practiced: _____

Address: _____

Guardian: _____ Tel. No. _____ Mobile No. _____

How did you hear about MMIS? Website Newspaper/Magazine Friend Others: _____

REQUIREMENTS:

	PRESCHOOL DEPARTMENT	ELEMENTARY JUNIOR HIGH SENIOR HIGH
1. Photocopy of PSA issued birth certificate	*	*
2. Medical Certificate	*	*
3. 2 pcs 2x2 ID picture	*	*
4. MMIS form E-01	*	*
5. MMIS form E-02 (applicable to applicants with previous schooling)	*	*
6. MMIS form E-03	*	*
7. Photocopy of past report card with second or third grading grades (applicable to applicants with previous schooling)	*	*
8. Certificate of good moral character (applicable to applicants with previous schooling)	*	*
9. Baptismal certificate (for Catholics only)	*	*
10. NCAE result (For Senior High)		Senior High only
11. For foreign students:		*
a. Original and photocopy of Transcript of Records		
a.1. Translated to English for students from Non-English speaking Countries.		
a.2. Preferably stating the next academic level of the child		
b. Photocopy of the passports of the student and parents	*	*

Testing Fee Receipt No. & Cashier's Signature: _____

Recommendation/s: _____

Guidance Counselor

DR. BENITO F. SOTTO
Principal

MS. MIA VILLAMOR-YOUNG
Director



Guidance Office Recommendation Form
(From the Previous School)

Recommendation Form for New Applicants:

Name of Applicant: _____ Grade/ Year Applied for: _____

To the Recommending Officer:

The applicant whose name appears above is at present seeking admission in our school. Below are some points that the Committee on Admissions is interested to know. Your honest assessment will greatly help the Committee in its decision. Thank you very much.

1. Has the child ever repeated or skipped a grade / class / year level? Yes No
If yes, please give details.

2. Does the child, to your knowledge, have any particular learning disabilities? Yes No
If yes, please give details.

3. Has the child received remedial assistance in your school? Yes No
If yes, please give details.

4. Did the child have any behavioral/disciplinary problems in your school, e.g. bullying, cutting classes, etc.? Yes No
If yes, please give details.

5. Do you foresee any major difficulty on the part of the applicant when she/he transfers to another school? Yes No
If yes, please give details.

6. How long and in what capacity have you known the applicant?

What would be your recommendation for the applicant?
I strongly recommend I recommend with some reservation I do not recommend
Name & Signature of Evaluator School Designation
IMPORTANT: Please put the accomplished form in a sealed envelope with your signature on the flap. We thank you and assure you of the confidentiality of this communication.



Guidance Office Recommendation Form (From the Parents/ Guardians)

Recommendation Form for New Applicants:

Name of Applicant: _____ Grade/ Year Applied for: _____

To the Parent/ Guardian:

Below are some points that the Committee on Admissions is interested to know. Your honest assessment will greatly help the Committee in its decision. Thank you very much.

- 1. Has your child ever repeated or skipped a grade / class / year level? Yes No
If yes, please give details.

- 2. Does your child, to your knowledge, have any particular learning disabilities? Yes No
If yes, please give details.

- 3. Has your child received remedial assistance in his/ her current school? Yes No
If yes, please give details.

- 4. Did your child have any behavioral/disciplinary problems in his/ her current school, e.g. bullying, cutting classes, etc.?
Yes No
If yes, please give details.

- 5. Do you foresee any major difficulty on the part of your child when she/he transfers to another school? Yes No
If yes, please give details.

- 6. Describe your child as a learner, both in academics and behavior.

- 7. What are the reasons for transferring your child to another school?

PRINTED NAME AND SIGNATURE OF PARENT

IMPORTANT: Please put the accomplished form in a sealed envelope with your signature on the flap. We thank you and assure you of the confidentiality of this communication.