



ATENEO DE MANILA UNIVERSITY

2" x 2"
ID Picture

LOYOLA SCHOOLS
Office of the Associate Dean for Graduate Programs
APPLICATION FOR ADMISSION
TO GRADUATE STUDIES

Instructions:

1. Fill up this form completely and accurately. Print or type the information requested. Use a separate sheet if necessary.
2. Submit all the required documents by the deadline set by the Associate Dean for Graduate Programs. Only application forms properly accomplished and accompanied by all the required documents will be processed.
3. Arrange to take the entrance examination on any of the dates set by the Associate Dean for Graduate Programs.

I am applying to begin graduate studies in _____ I wish to take up the following graduate degree programs:
 (Please list in order of preference)

School Year 20__-20__	Intersession	1.
	Semester I	2.
	Semester 2	

PERSONAL INFORMATION

Legal Name	NAME IN BIRTH CERTIFICATE			Nickname
Sex M F	Married Name (If applicable)	Last Name	First Name	Middle Name
Permanent address	Street No	Street	Subdivision / Barangay	City / Municipality
	Province	Country	Zip Code	
Mailing address <i>(If not the same as the permanent address)</i>	Street No	Street	Subdivision / Barangay	City / Municipality
	Province	Country	Zip Code	
Phone and E-mail	Residence () Area code	Mobile:	E-mail:	
	Employed Self-Employed Not Employed	Job Title:		
Present Employment or Immediate past Employment <i>(if leaving job to study)</i>	Employer (company / school / private individual)			Full-time Regular Part-time Contractual
	Address			Office E-mail Address
	Government Others _____	Private	Non-Government	No. of Yrs in Service Nature of Business / Institution / Org. Office Landline and Fax No.
Date of birth	Day / Month / Year	Age	Place of Birth	
Citizenship	Filipino	Others (specify)		
Civil Status	Single	Married	Widowed	Separated Blood type
If married: Name of Spouse	Last Name	First Name	Middle Name	Contact nos. Landline Mobile
Person to contact in case of emergency <i>(Name, address, relationship and contact details)</i>	Last Name	First Name	Middle Name	Relationship
	Street No	Street	Subdivision / Barangay	Contact nos. Landline Mobile
	City / Municipality	Country	Zip Code	E-mail

Please do not write below this line

APPLICATION FEE PAID

OR No.	Amount	Date	Prepared by
Date Received	OADGP:	Department:	OADGP: Dean: Office of the Registrar:
By:			

Legal Name	Married Name (if applicable)	(Name in Birth Certificate) Last Name	First Name	Middle Name
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ENROLMENT AND PREVIOUS APPLICATION

Have you ever enrolled for graduate studies?	Yes	No	If yes, when?	
In what school?			For what program of study?	
Have you ever applied for graduate studies at the Ateneo de Manila University before?	Yes	No		
If yes, when?			For what program of study?	
Have you ever enrolled in the Ateneo de Manila University - Loyola Schools before?	Yes	No		
If yes, what is your ID No.?			In what program?	

EDUCATIONAL BACKGROUND - SCHOOLS ATTENDED

Level	Complete Name and Location of All Schools Attended	Dates of Attendance	Degree and Year Received or Expected
Graduate School			
College			
High School			

ACADEMIC HONORS (COLLEGE / GRAD SCHOOL) OR SPECIAL AWARDS RECEIVED

Award(s) Received	Awarding Institution	Date

FOR TEACHERS

Employment Status			Level Taught				
Currently teaching	Permanent	Probationary	Pre-Sch	GS	HS	College	Grad Sch
On Study Leave	Contractual	Substitute	Others	_____			

TEACHING EXPERIENCE

School(s) / Address(es)	Subject(s) Taught	Inclusive Dates

Legal Name	Married Name (if applicable)	(Name in Birth Certificate) Last Name	First Name	Middle Name
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PREVIOUS WORK EXPERIENCE OTHER THAN TEACHING AFTER GRADUATION FROM COLLEGE

Position	Company / Firm	Inclusive Dates

RESEARCH EXPERIENCE

Thesis written: If you wrote a thesis (undergraduate/graduate), what was the subject of your thesis? (Write the full title of the thesis if possible.) If you are an applicant for master’s level program, please write your undergraduate thesis topic; if an applicant for a doctoral degree, your master’s thesis topic.

Other Research.

If you have done research other than an undergraduate/master’s thesis, please fill up the following tables:

Research Projects	Research Institution	Position in Project	Inclusive Dates

Published Research Papers / Unpublished Research Papers Presented.

Title(s)	Publication(s) / Conference(s)	Date

SEMINARS / TRAININGS - DIRECTLY RELATED TO THE PROGRAM YOU ARE APPLYING FOR (if any)

Seminars / Workshops / Training Programs Attend	Organizing Institution(s)	Inclusive Dates

Legal Name	Married Name (if applicable)	(Name in Birth Certificate) Last Name	First Name	Middle Name
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PLAN OF STUDY

Do you plan to enroll as a	full-time student?	part-time student?
When do you plan to finish your degree and why?		
Who will provide all or most of the funding for your graduate education?		
Self	Parents	Relatives Others, pls. specify

SCHOLARSHIP

Are you applying for a scholarship?	Yes	No	Name of scholarship
Scholarship status as of this date:	Completing requirements	Submitted application	Already a grantee

PERSONAL ESSAY

(The essay should be 1-2 pages long, typed double-space, and printed on A4-sized bond paper.)

Please write a personal essay that covers the following:

1. Reason for graduate study
 - a. Reasons for pursuing graduate studies at this time
 - b. Reasons for choosing your program of study
2. Qualities and experiences which you feel will help you or give you difficulties in your chosen program of study
 - a. Personal qualities, abilities or special skills
 - b. Work experience (life experiences) and previous studies
 - c. Constraints or difficulties that you anticipate encountering in your studies
3. Potential contribution of an Ateneo graduate education to your profession and larger society

REFERENCES

(Pls. see the [RECOMMENDATION FOR GRADUATE ADMISSION FORM](#). The instructions given there indicate which names are to be written below.)

Name	Position, Institution, Telephone No. & E-mail Address
1	
2	
3	

I hereby certify that all information written in this application is complete and accurate. I authorize ADMU to process the same in order to act on my application and for other legitimate and lawful purposes. I understand that it shall be governed by the applicable Privacy Policy of the University. If accepted as a student, I agree that my admission, registration, and graduation are subject to the rules and regulations of the Loyola Schools, Ateneo de Manila University.

APPLICANT'S SIGNATURE _____ **DATE** _____

Important:

Credentials filed in support of this application become the property of the Ateneo de Manila University and will not be returned to the applicant. Misrepresentation of information requested in this application will be sufficient reason for refusal of admission or denial of enrollment in a subsequent semester.

ADDITIONAL INFORMATION REQUIRED FROM INTERNATIONAL APPLICANTS

Passport Number	Issued at	Expiry date
Type of visa in passport	Validity of visa	Day Month Year
Person to contact in the Philippines in case of emergency		
Relation to applicant	Mobile No.	E-mail
Address		

DO NOT FILL UP (For Registrar's Use)

I-CARD No.	
Issued on	Expiry Date