School Form 1 (SF 1) School Register (This replaced Form 1, Master List & STS Form 2-Family Background and Profile)

MA	RAN NG EC	UKA
KAGAM	RAN NG EL	NOAS
RE	OUBLIKA NG PILIE	MAS

School ID	Region	Division	

District		DE	JEU OF EDUCATION
	0 "		

	UBLIKA NG PILIP	School Name								School Year			G	Grade Level	Section																
NAME LRN (Last Name, First Name, Middle Name)	Sau	Sav	e _{au}	e	6		•				•					DIDTH	AGE as of 1st Friday of June	BIRTH PLACE	MOTHER	IP			ADD	RESS		NAME O	F PARENTS	PARENTS GUARDIAN (If not Pa		Contact Number	REMARK/S
	(Last Name, First Name, Middle Name)	(Last Name, First Name, Middle Name)	(Last Name, First Name, Middle Name)	Sex (M/F)	uu/yy)	(nos. of years as per last birthday)	PLACE (Province)	MOTHER TONGUE	(Specify Ethnic Group)	RELIGION	House # / Street/Sitio/ Purok	Barangay	Municipality/ City	Province	Father (1st name only if family name identical to learner)	Mother (Maiden: 1st Name, Middle & Last Name)	Name	Relationship	(Parent /Guardian)	(Please refer to the legend on last page)											
			-																												
			-																												
			-																												

	NAME (Last Name, First Name, Middle Name)	Sex	BIRTH	AGE as of 1st Friday of June	BIRTH	MOTHER	IP		ADDRESS				N/	ME OF PARENTS	GUARDIAN (If not Parent)	Contact Number	REMARK/S	
LRN			(M/F)	DATE (mm/ dd/yy)	(nos. of years as per last birthday)	PLACE (Province)	TONGUE	(Specify Ethnic Group)	RELIGION	House # / Street/Sitio/ Purok	Barangay	Municipality/ City	Province	Father (1st name onl family name identica learner)		Name Relations	(Parent /Guardian) nip	(Please refer to the legend on last page)
Indicator	Code	List an Required Information	d coc	de of Indic		der REMA Indicator	RK colum		Required Info	rmation				BoSY EoS	Prepared by:		Certified Corre	ct:
Transferred Ou		Name of Public (P) Private	e (PR)	School & F					CCT Control/re		r & Effectivity	Date	MALE	2001 200	•			
Transferred IN		Name of Public (P) Private					V.11		Name of school				FEMALE		(Signature of Adviser	over Printed Name)	(Signature of School	Head over Printed Name)
Dropped Late Enrollmen	DRP	Reason and Effectivity Da Reason (Enrollment beyon	ate		-		th Dissability	LWD	Specify Specify Level &				TOTAL		BoSY Date:	EoSYDate:	BoSY Date:	EoSYDate:
							-		- p, =0.010				L				DOCT DUIG.	Loo i Dato.