

2x2 ID PICTURE

TULONG DUNONG PROGRAM (TDP-SUC) APPLICATION FORM

Instructions. Read General and Documentary Requirements. Fill in all the required information. Do not leave an item blank Item is not applicable, indicate "NA".

		PERSONAL I	NFORMATIO	N		
Name	((=,				
Name	(Last Name)	(First Name)		(Middle Name)		Maiden Name (for Married Women)
Date of Birth (mm/dd/yyyy)		Permanent Address			Zip Code	
Place of <i>Birth</i>		Street & Town/v Barangay Municip				
	Male	Name of School Attended School ID Number				
Sex	Female	School Address				
Citizenship		School Sector		() Public () Private		
Mobile Number		Year Level		Course		Tribal Membership (if applicable)
E-mail Address		Type of Disability (if applicable)				(ii applicable)
FAMILY BACKGROUND						
		Father: () Living () Deceased		Mother: () Liv		ving () Deceased
Name						
Address Occupation						
Total Parents Gross income					No. of Sibling	is in the family
Are you enjoying other educational financial as		No. of Siblings in the family				
If yes, please specify 1						
2						
QUALIFICATION REQUIRE per Section 4 of the Memor	MENTS randum Circular No s. 2023	TERMS AND CONDITIONS Data Privacy				
the applicant is enrolled in a in the CHED Registry of Prothat the applicant has not be Education Subsidy (TES), Student Financial Assistan Higher Education (FHE), in packet and the subsequence of the su	REMENTS per Section 6 of thes. 2023. submit to the Scholarship Office the inrolment (COR/COE) for the First	 a. In connection with my application for the Tulong-Dunong Program for SUC (TDP-SUC), I authorize partner State Universities and Colleges (SUCs) and its representatives, and outsourced service providers, if any, to collect, process update or disclose personal information about me/us in accordance with the Data Privacy Act of 2012, its Implementing Rules and Regulations (IRR), and to verify, my personal information from any person or entity that may deem necessary under applicable laws, rules, and regulations. b. I agree to hold partner SUCs and the persons or entities from whom it may obtain, or with whom it may disclose or verify my personal information free and harmless from any liability arising from the use of any information. c. I confirm that I am aware that under the Data Privacy Act, I have (a) the right to withdraw the consent hereby given or to object to the processing of my personal information provided there is no other legal ground or overriding legitimate interest to the processing thereof; (b) right to reasonable fees, (c) right to rectification, and (d) right to erasure or blocking of my personal information subject, however, to the conditions for the legitimate exercise of the said rights under the Data Privacy Act and its IRR, and subject further to the right of partner SUCs to terminate the program availed by me should I withdraw my consent or request the removal of my personal information. 				
6.2 (Income Requirement) TDP-SUCs applicants shall submit a Certificate of Indigency as proof of income, duly issued by the Punong Barangay where the applicant resides.						
I hereby certify that foregoing statements are true and correct. ———————————————————————————————————						
Signature over Printed Name of Applicant Note: Fully accomplished form to be submitted to the SUC authorized personnel						
DO NOT FILL-OUT THIS PORTION FOR SUC AUTHORIZED PERSONNEL USE ONLY)						
Documents Attached Certificate of Registration/Enrolment (CORs/COEs) Certificate of Indigency						
Evaluated /Processed by:						
SUC Authorized Personnel						