

Application Number \_\_\_\_\_

**SCIENCE EDUCATION INSTITUTE**  
**Department of Science and Technology**  
Bicutan, Taguig City

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**APPLICATION FORM**

**Part-Time Scholarship for Science and Mathematics Teachers**  
(A component of the **Capacity Building Program in Science and Mathematics Education**)

School Term: [ ] First [ ] Second [ ] Third Semester/Trimester  
Academic Year \_\_\_\_\_

*Form 1. Information Sheet*

**I. PERSONAL DATA**

1. Name of Applicant: \_\_\_\_\_  
Last Name First Name Middle Name
2. Sex [ ] Male [ ] Female 3. Age \_\_\_\_\_ 4. Nationality \_\_\_\_\_
5. Permanent Address: \_\_\_\_\_  
No./Street Village/Barangay Congressional District
- \_\_\_\_\_
- City/Municipality Province Zip Code Region
6. Residence Phone No.: \_\_\_\_\_ 7. Mobile Phone No.: \_\_\_\_\_
8. Email Address : \_\_\_\_\_
9. Date of Birth: \_\_\_\_\_ 10. Place of Birth: \_\_\_\_\_
11. Civil Status: \_\_\_\_\_  
If married, Spouse's Name: \_\_\_\_\_  
Occupation: \_\_\_\_\_  
Business Address: \_\_\_\_\_  
\_\_\_\_\_
- Phone No.: \_\_\_\_\_

**II. EDUCATIONAL BACKGROUND**

<b>LEVEL</b>	<b>SCHOOL</b>	<b>DEGREE EARNED</b>	<b>YEAR GRADUATED</b>	<b>GENERAL WEIGHTED AVERAGE (GWA)</b>	<b>HONORS RECEIVED</b>
<b>Baccalaureate</b>					



	JLSS-RA 10612		
	Faculty Development Program for Teacher Education Institutions (TEIs)		
	ASTHRDP-Science Education		
	CBPSME		
	STRAND		

## VI. SCHOLARSHIP INTENTION

- Applying for **Master's** scholarship
- Field of Specialization: \_\_\_\_\_  
(Refer to the brochure and specify)
- Are you applying to other scholarship grant?     Yes             No  
If yes, kindly specify the name of the scholarship program: \_\_\_\_\_  
\_\_\_\_\_
- University you intend to enroll in (You are advised to seek admission at the university where you intend to enroll in.):

### CBSPME-NCGSME Universities

- \_\_\_\_\_ Ateneo de Manila University
- \_\_\_\_\_ Bicol University
- \_\_\_\_\_ Central Luzon State University
- \_\_\_\_\_ Cebu Normal University
- \_\_\_\_\_ De La Salle University
- \_\_\_\_\_ Leyte Normal University
- \_\_\_\_\_ Mariano Marcos State University
- \_\_\_\_\_ Mindanao State University-Iligan Institute of Technology
- \_\_\_\_\_ Mindanao State University-Marawi
- \_\_\_\_\_ Philippine Normal University
- \_\_\_\_\_ Saint Mary's University
- \_\_\_\_\_ University of San Carlos
- \_\_\_\_\_ UP Diliman -College of Education
- \_\_\_\_\_ UP Open University
- \_\_\_\_\_ Western Mindanao State University
- \_\_\_\_\_ West Visayas State University

### STRAND Universities

- \_\_\_\_\_ Central Mindanao University
- \_\_\_\_\_ Nueva Vizcaya State University
- \_\_\_\_\_ University of Science and Technology of Southern Philippines-Cagayan de Oro

- Have you been admitted to the Graduate School in your intended university?  
\_\_\_\_\_ Yes            \_\_\_\_\_ No

6. Intended start of program of study:

[ ] First Semester [ ] Second Semester AY \_\_\_\_\_ - \_\_\_\_\_

## VII. RESEARCH INVOLVEMENT

Use additional sheet if necessary.

A. Research conducted in the last 3 years. Use additional sheet if necessary.

AREA AND TITLE OF RESEARCH	LOCATION/ DURATION	FUND SOURCE	NATURE OF INVOLVEMENT

B. Discuss your proposed topic/research area/s of interest for your thesis/dissertation. Use separate sheet (Annex B).

Note: The research proposal must be aligned with the priority research thrusts identified in the DOST Harmonized National Research and Development Agenda (HNRDA). Refer to the DOST website, [www.dost.gov.ph](http://www.dost.gov.ph).

## VIII. PUBLICATIONS

Use additional sheet if necessary.

TITLE OF TECHNICAL PAPER	TITLE OF PUBLICATION	DATE PUBLISHED	NATURE OF INVOLVEMENT

## IX. AWARDS AND RECOGNITION RECEIVED

TITLE OF AWARD	AWARD GIVING BODY	YEAR OF AWARD

**X. TRUTHFULNESS OF DATA/DATA PRIVACY**

I hereby certify to the truthfulness and completeness of the information provided. Any misinformation or withholding of information will automatically disqualify me from the CBPSME **Part-Time Scholarship for Science and Mathematics Education**. I am willing to refund all the financial benefits received plus appropriate interest if such misinformation is discovered.

Moreover, I hereby express my consent for DOST-SEI to collect, record, organize, update or modify, retrieve, consult, use, consolidate, block, erase or destruct my personal data as part of my information. I hereby affirm my right to be informed, object to processing, access and rectify, suspend or withdraw my personal data, and be indemnified in case of damages pursuant to the provisions of the Republic Act No. 10173 of the Philippines, Data Privacy Act of 2012 and its corresponding Implementing Rules and Regulations.

\_\_\_\_\_  
Signature over Printed Name of Applicant

\_\_\_\_\_  
Date

**Form 2. MEDICAL CERTIFICATE**

\_\_\_\_\_  
Date

TO WHOM IT MAY CONCERN:

This is to certify that I have examined \_\_\_\_\_ and found  
(Name of Applicant)  
him/her to be physically and mentally fit to undergo graduate studies.

This certification is issued in connection with his/her application for the CBPSME **Part-Time Scholarship for Science and Mathematics Education**.

\_\_\_\_\_  
Name (Print) and Signature of Licensed Physician  
PRC License No. \_\_\_\_\_

Health Agency \_\_\_\_\_  
Address \_\_\_\_\_

Application No. \_\_\_\_\_

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**Annex A**

Name of Applicant \_\_\_\_\_

Date \_\_\_\_\_

**CAREER PLANS**

In not more than 250 words, discuss your career plan after graduation from your master's degree.

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**Annex B**

Name of Applicant \_\_\_\_\_

Date \_\_\_\_\_

**RESEARCH PLANS**

In not more than 250 words, discuss your proposed topic/research area/s of interest for your thesis.

**CHECKLIST OF DOCUMENTS TO BE SUBMITTED**

	Accomplished Application Form (Form 1)
	Medical Certificate (Form 2)
	Birth Certificate (Photocopy)
	Certified Copy of the Official Transcript of Records (TOR)
	Certified True Copy of Service Record/Certificate of Employment, if employed
	Notice of Admission to Graduate School in any of the NCGSME/STRAND member-universities
	Career Plan (Annex A)
	Research Plan (Annex B)
	Endorsement from Former Professor 1
	Endorsement from Former Professor 2
	Commitment to Complete the Degree
	Valid NBI Clearance
	Letter of Nomination/Recommendation from the Head of the School/University