



APPLICATION FOR ADMISSION

Privacy Policy

This Privacy Policy describes Philippine Women's University practices regarding the collection, use, disclosure and disposal of data we collect from you through this application form.

In compliance with the Data Privacy Act of 2012 and its Implementing Rules and Regulations, the University shall collect the following information, such as but not limited to: name, photograph, address, telephone number, academic history and other information necessary for the declared purpose(s) herein.

All information obtained herein shall be solely used by the University or its respective department or offices for purposes of scheduling your entrance exam and admission evaluation.

Any information contained in this form shall be processed, stored and disposed primarily by the Admission Office, without prejudice to the right of the University to share it with its other departments or offices for purposes of announcement or communication.

Agree . Sign over Printed Name _____ Date _____

Date of Application: _____

Application ID No. _____

Category: Freshman Short program Graduate Studies MA PhD
Transferee 2nd Course/Major Foreign student

Course: 1st Choice Academic Year 20-
2nd Choice 1st Trimester 2nd Trimester 3rd Trimester

Name Please Print LAST FIRST MIDDLE

Nickname Contact #

Home Address

Email Address Citizenship Gender

Date of Birth Place of Birth Age Civil Status

Name of School last attended

Address of School last attended

Public Private LOCATON: Metro Manila Outside Metro Manila International

Name of Parent/Guardian Relation

Address of Parent/Guardian

Parent/Guardian's Occupation

Working: Abroad Locally Contact # or Email:

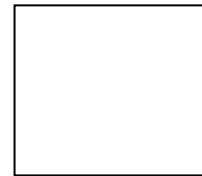
How did you know about PWU? Online Newspaper/Radio/TV Career Fair/Talk Others:

Why do you want to study at PWU?

APPLICATION ID No. _____

NAME _____

COURSE _____



Please present this slip at the :

- 1. _____ for evaluation of credentials. (school/department)

Assessed by: _____ (signature over printed name)

Date/Time _____

Recommended exam : Regular Scholarship

- 2. Cashier's Window for the payment of the application fee.
3. Guidance and Testing Office to take the exam.

Exam Date: _____

Exam Time: _____

Exam administered by: _____ (psychometrician's signature over printed name)