

University of the Philippines Visayas										RSU Form No. 02		
OFFICE OF STUDENT AFFAIRS												
Miagao, Iloilo												
APPLICATION FOR ADMISSION TO UPV DORMITORIES												
(UPPERCLASS AND GRADUATE STUDENTS)												
Midyear, AY 20__ to 20__												
(2x2 Photo)												
(To be filled-up by the Dormitory Manager):												
Applicant No.				Date received:				Received by:				
A. Applicant's Information												
Name of Applicant		(Family Name)			(Given Name)			(Middle Name)				
Student Number					Please indicate no. of units to be enrolled this sem:							
Course/Degree Program					Graduating?		<input type="checkbox"/> Yes		<input type="checkbox"/> No			
Year Level					Sex		<input type="checkbox"/> Male		<input type="checkbox"/> Female			
Permanent Address												
Present Address												
Mobile Number					Birthday							
Landline Number					Facebook:							
Email Address												
B. Family/Household Information												
Name of Father		(Family Name)			(Given Name)			(Middle Name)				
Address												
Occupation					Status of Father							
Agency / Company												
Landline Number					Mobile Number							
Name of Mother		(Family Name)			(Given Name)			(Middle Name)				
Address												
Occupation					Status of Mother							
Agency / Company												
Landline Number					Mobile Number							
Are you a UP-dependent?		<input type="checkbox"/> Yes			<input type="checkbox"/> No							
Who among the following family members are co-residing with you?												
		<input type="checkbox"/> Father / Stepfather			<input type="checkbox"/> Brothers / Stepbrothers,			No.:				
		<input type="checkbox"/> Mother / Stepmother			<input type="checkbox"/> Sister / Stepsisters,			No.:				
		<input type="checkbox"/> Legal Guardian			<input type="checkbox"/> Others,			No.:				
Total members of your family co-residing with you: _____												
C. Guardian's Information												
Note: The designated guardian shall be able to come <b>WITHIN ONE HOUR</b> upon notice especially in emergency cases. The name of the legal guardian must be the same with the one submitted to the Health Services Unit (HSU) and the Office of the University Registrar												
Name of designated guardian while studying at UPV		(Family Name)			(Given Name)			(Middle Name)				
Relation with the student-applicant												
Address of Designated Guardian												
Landline Number					Mobile Number							
D. Financial Assistance and Scholarships												
1. Who contribute/s in meeting the family expenses?												
		<input type="checkbox"/> Parents		Annual Gross Income of Father:		Php						
				Annual Gross Income of Mother:		Php						
		<input type="checkbox"/> Siblings		Amount they contribute annually:		Php						
		<input type="checkbox"/> Relatives		Amount they contribute annually:		Php						
		<input type="checkbox"/> Self		Amount		Php						
		<input type="checkbox"/> Scholarship/sponsor, other than SLAS, please specify:										
		How much do you receive as support annually?				Php						
		<input type="checkbox"/> Others, please specify:										
		How much do you receive as support annually?				Php						

2. What are the sources of income of your household? (select all that apply)									
<input type="checkbox"/> Salary or wages		<input type="checkbox"/> Real Estate Rental		<input type="checkbox"/> Pensions		<input type="checkbox"/> Others			
<input type="checkbox"/> Business		<input type="checkbox"/> Remittances from abroad		<input type="checkbox"/> Farm/haciendas/fishponds					
3. Have you applied for the UP Student Learning Assistance System (SLAS) online (for undergraduate students)?									
<input type="checkbox"/> Yes, indicate the latest bracket assignment					<input type="checkbox"/> No				
E. Others									
1. Are you a Person with Disability?		<input type="checkbox"/> Yes (please submit scanned PWD ID or medical certification)				<input type="checkbox"/> No			
2. Where did you stay during the last semester (____ Sem, AY 20____ - 20____)?									
3. Have you stayed in any UPV Dormitory prior to this application?		<input type="checkbox"/> Yes, please indicate number of semester(s): _____				<input type="checkbox"/> No			
Name of dormitory(ies)					Period (First/Second Semester, Academic Year)				
F. References									
Name					Contact Number				
G. For graduate students, please indicate your preferred type of room accommodation according to priority (granting of slots is subject to availability of space):									
Room type		Monthly Rate		Choice					
				1st	2nd	3rd			
Regular room (four-person occupancy)		P800/person + appliance fees		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Regular room (double occupancy)		P1,500/person + appliance fees		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Aircon room (single occupancy; priority for foreign students )		P2,500/person + appliance fees + electricity charges for aircon		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
I. Certification and Consent									
This consent enables the Residential Services Unit (RSU) to comply with R.A. 10173, otherwise known as the Data Privacy Act of 2012. (Put a check mark on the chosen responses).									
I am giving consent to the processing of my personal and sensitive personal information contained in this form and in documents submitted for my dormitory application to enable the University of the Philippines Visayas to:									
a) verify my identity, prevent fraud, process my application, and determine whether I am qualified to avail of its residential services;									
					<input type="checkbox"/> Yes		<input type="checkbox"/> No		
b) conduct research using non identifiable information in order to study the effectiveness of the University's student services and assess how to improve the systems for the selection and accommodation of students in the University dormitories.									
					<input type="checkbox"/> Yes		<input type="checkbox"/> No		
I certify that the information provided in this form is true and correct. I understand that any misinformation and/or withholding of information will automatically disqualify my application.									
Signature over printed name of the applicant					Date				
Please attach applicable requirements:									
• 2x2 ID picture (colored)									
• 1 long cream folder									
Upon admission, please submit the following									
• Midyear Registration Form (Form 5) - to be submitted after enrollment									
• Certificate of Guardianship (Notarized and photocopy) **									
• Undertaking and Waiver (Notarized and photocopy) **									
• Official Receipt for payment of fees									
** Forms can be downloaded at <a href="https://crs.upv.edu.ph/">https://crs.upv.edu.ph/</a>									
REMINDERS:									
1) Only applications with complete requirements and submitted on the <u>prescribed cut-off date</u> shall be processed. Applicants who are dependents of UPV and those covered with MOA which binds UPV to provide accommodation shall be given a priority slot only for the First Semester or Second Semester but should comply with the application requirements and process (application form, interview, etc.). However, just like the other residents, eligibility for accommodation for the succeeding semesters shall be subject to the retention policy of the Dormitory.									
2) Applications of those who have been subjected to disciplinary action from previous dorm accommodations will be referred for further evaluation.									
3) Take note that cooking, laundry, and ironing are prohibited in the dormitories. Tricycle fare (current student rate) within the UPV Miagao campus is Php13.00 per person, for five (5) passengers per trip.									