



**MFI**  
**Polytechnic**  
**Institute**  
**Inc.**  
[www.mfi.org.ph](http://www.mfi.org.ph)

### APPLICATION FORM

**Ortigas Campus:** MFI Building, Ortigas Ave. 1605 Pasig City  
Tel. Nos. 632 0756 632 0758 to 67 Fax Nos. 631 3838 631 1294

**Pasay Campus:** 2240 Taft Ave. Brgy. 058, Pasay City  
Tel No. 846 5142 Telefax 846 5143

**De La Salle Araneta Campus:** 7th Flr. Life Sciences Bldg. DLSAU, Malabon  
Tel No. 697 3312

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Date Effective :

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2 x 2 ID PHOTO

**Choose the program you wish to apply for. Programs of study are grouped based on the specific campus they are offered.**

#### I. Ortigas Campus

##### SENIOR HIGH SCHOOL

##### A. Technical-Vocational-Livelihood (TVL) Track

##### 1. Industrial Arts Strand

- Automotive Servicing NC I
- Mechatronics Servicing NCII

##### 2. Information & Communications Technology (ICT)

- Computer System Servicing NCII
- Computer Programming

(Please choose 2)

##### INDUSTRIAL TECHNICIAN PROGRAM

- Automotive Technology
- Industrial Automation Technology
- Industrial Electrical Technology
- Information Technology
- Semiconductor Manufacturing Technology

(Please choose 2)

#### II. Pasay Campus

##### SENIOR HIGH SCHOOL

##### 1. Industrial Arts Strand

- Electronic Products Assembly and Servicing NCII
- Electrical Installation & Maintenance NCII
- Mechatronics Servicing NCII

##### 2. Information & Communications Technology (ICT)

- Computer Programming

##### INDUSTRIAL TECHNICIAN PROGRAM

- Industrial Mechatronics Technology
- Master Electrician Course

Entry status for Senior High School Applicants:

Grade 11       Grade 12

NAME OF APPLICANT

(PLEASE PRINT LEGIBLY)

Last Name	First Name	Middle Name	Extension Name (Jr./II/III)

BIRTHDATE  
(MM / DD / YYYY)

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AGE

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SEX

- Male  
 Female

CIVIL STATUS

- Single       Separated  
 Married       Widow /er

BIRTHPLACE  
(City, Town, Province)


NATIONALITY


RELIGION


##### CITY ADDRESS

Number & Street	Barangay	District	City / Town & Province	Postal / Zip Code

##### PERMANENT ADDRESS

Number & Street	Barangay	District	City / Town & Province	Postal / Zip Code

**CONTACT INFORMATION** which the applicant may be reached or contacted. Indicate contact person in case the number is not personally owned by applicant.

Name	Telephone / Mobile No.	Email

##### SCHOOLS ATTENDED (FROM GRADE 10 OR HIGH SCHOOL WHERE YOU GRADUATED TO POST-SECONDARY SCHOOLS, IF APPLICABLE)

School (do not abbreviate)	Course	Public or Private	Year Graduated	Location / Place

##### WORK EXPERIENCE (FORMAL AND INFORMAL, IF ANY)

Company / Employer	Position Held	Inclusive Dates	Salary	Reason for Leaving

##### FAMILY BACKGROUND

Name of Parents	Age	Occupation	Employer	Annual Gross Income	Telephone Number

**IF APPLICANT IS NOT LIVING WITH HIS / HER PARENTS OR IS MARRIED, STATE THE FOLLOWING**

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Guardian's/Spouse's Name	Relationship	Telephone No.	Address

**BROTHERS AND SISTERS IF NOT MARRIED (please list from eldest to youngest and include yourself) OR CHILDREN IF MARRIED / SINGLE PARENT**

Name	Age	Civil Status	Company / School	Name	Age	Civil Status	Company / School
1.				6.			
2.				7.			
3.				8.			
4.				9.			
5.				10.			

**APPLICANT'S HEALTH INFORMATION**

1. Has the applicant ever been hospitalized?     YES     NO    If YES, please provide details on the space provided.

\_\_\_\_\_

\_\_\_\_\_

2. Has the applicant been diagnosed with any of the following? Please check and specify.

Speech and language delay \_\_\_\_\_

Learning disability \_\_\_\_\_

Vision impairment \_\_\_\_\_

Hearing impairment \_\_\_\_\_

Behavioral disorder \_\_\_\_\_

Pulmonary/heart disease \_\_\_\_\_

3. Please state other concerns with the applicant's health.

\_\_\_\_\_

\_\_\_\_\_

**IN CASE OF EMERGENCY AND MFI IS UNABLE TO CONTACT THE PARENTS OR GUARDIAN, PLEASE CONTACT**

Name	Relationship	Telephone No.	Address

I hereby affirm that I fully understand all the foregoing questions and that my answers thereto and all the data I gave in this application are true, complete, and correct to the best of my knowledge and belief. I understand that my filing of this application does not entitle me to any required right whatsoever. In case this application is disapproved, MFI may dispose of this document in any manner it so desires. I also authorize MFI to inquire as to my record with no liability arising there from.

I further acknowledge that any misrepresentation or material omission that may be found in the foregoing answers and data shall be a sufficient cause for the cancellation of this application, or for my dismissal if already enrolled.

**Applicant's Signature** \_\_\_\_\_ **Date of Application** \_\_\_\_\_

**GENERAL QUALIFICATIONS:**

- For **Senior High School Programs**, applicant must have completed Grade 10.
- For **Industrial Technician Programs or Degree Programs**, applicant must have completed high school on or before School Year 2014-2015.
- Applicant must be willing to undergo the entrance exam and interview.

**SUBMIT THIS FORM WITH THE FOLLOWING:**

- Two (2) pieces 2x2 ID Photo (white background)
- For **Senior High School Programs applicant** : Certification of enrollment for Grade 10 and photocopy of Grade 10 Report Card indicating the applicant's grades for the first quarter
- For **Industrial Technician Programs or Degree Programs applicant** :
  - If high school graduate in formal schools, photocopy of Secondary Report Card (Form 137) and high school diploma
  - If graduate of DepEd's Alternative Learning System (ALS), copy of the Certificate of Completion
  - If transferee, school records or transfer credentials from last school attended
  - If graduate of any post-secondary course, photocopy of the diploma

**HOW DID YOU LEARN ABOUT OUR PROGRAM?**

- Career Talk in High School     Radio / TV announcement     Orientation in MFI     MFI Website     Newspaper Ad at \_\_\_\_\_
- Relatives / Friends     Tarpaulin / Brochure     Google search     Facebook Ads

**TO BE FILLED IN ONLY BY MFI PERSONNEL AUTHORIZED TO RECEIVE AND / OR PROCESS APPLICATIONS**

Date of Exam \_\_\_\_\_ Time of Exam \_\_\_\_\_

Received by \_\_\_\_\_ Date Received \_\_\_\_\_