Higher Education Unit
Admissions Office
Miriam College

KATIPUNAN AVENUE, LOYOLA HEIGHTS, QUEZON CITY 1106
www.mc.edu.ph

NAME OF APPLICANT _____
(Name in Birth Certificate) LAST NAME FIRST NAME M.I.

SCHOOL _____ Tel. No._____

SCHOOL ADDRESS_____

YEAR OF GRADUATION: _____

SECONDARY SCHOOL RECORD

INSTRUCTION:
To the Applicant: Write your name and give this form to your high school Principal. Supply him/her with an envelope.
To the Principal: The person above is an applicant of Miriam College. Please fill-out the form accurately and completely. Type or print all information legibly. Countersign erasures and corrections made. You may delegate the filling out of the form to the School Registrar. After filling out the form, please seal it in an envelope, sign the flap and return to the applicant. All information will be kept confidential. Thank you for your assistance.

SUBJECTS	FINAL GRADES			1ST QUARTER GRADE 4TH YEAR 20__ - 20__
	1ST YEAR 20__ - 20__	2ND YEAR 20__ - 20__	3RD YEAR 20__ - 20__	
FILIPINO				
ENGLISH				
MATHEMATICS				
SCIENCE				
SOCIAL STUDIES				
YEARLY AVERAGE				

AVERAGE: _____

Note: Please attach a copy of the grading system. For letter grade/s, please indicate the numerical equivalent.

PREPARED BY: _____ _____ _____
Signature Over Printed Name Designation Date

_____ _____ _____
Name of Principal / Registrar Principal / Registrar's Signature Date

School Seal