



University of Southeastern Philippines

Foreign Student's Application Form

Academic Year: 20__ - 20__	<input type="checkbox"/> 1 st Sem	<input type="checkbox"/> 2 nd Sem	<input type="checkbox"/> Off Sem
	<input type="checkbox"/> New Student	<input type="checkbox"/> Transferee	<input type="checkbox"/> Exchange Student

INSTRUCTIONS:

1. Fill out this form clearly and completely (in BLOCK letters).
2. Write "NA" if not applicable.
3. Use additional sheets for extra details if space provided is not sufficient.
4. The correctness of all information will be verified. Incomplete and any deliberate omission or distortion of facts will be a sufficient cause for the disapproval of the application.
5. Only application forms with signatures of the applicant will be processed.

Colored 2 in x 2 in photograph with white background taken not more than 6 months

NAME (as it appears in your passport)			
FAMILY NAME		SUFFIX:	
FIRST NAME			
MIDDLE NAME			
NAME (as written in your native language alphabet)			
FAMILY NAME		SUFFIX:	
FIRST NAME			
MIDDLE NAME			
Other Names			
PASSPORT DETAILS			
Passport Number		Place of Issue	
Date Issued		Expiry Date	
PERSONAL DATA			
Nationality		Date of Birth	Age
Place of Birth		Civil Status	
Sex		Religion	
Height (cm)		Weight (kg)	Built
Eye Color		Hair Color	
Complexion		Visible marks / tattoos	
Physical Handicap or Disability (if any)			

WE BUILD DREAMS WITHOUT LIMITS

Address: University of Southeastern Philippines
Iñigo St., Bo. Obrero, Davao City
Philippines 8000

Telephone: (082) 227-8192 Local 226
Website: www.usep.edu.ph
E-mail: international@usep.edu.ph



MEDICAL HISTORY (Please list any illness (physical/mental) which you had in the last five (5) years.)

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Languag(es) Spoken

Language	Proficiency

CONTACT DETAILS IN THE HOME COUNTRY

Address:

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Telephone Number (s):

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CONTACT DETAILS IN THE PHILIPPINES

Address:

--

Telephone Number (s):

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EMAIL ADDRESS(ES)

1.

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2.

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FAMILY BACKGROUND

	Occupation	Contact Number	Address
Father's Name			
Mother's Name			
Spouse's Name (if married)			
Children (if applicable)		Siblings (brothers / sisters)	
Name	Age	Name	Age

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EDUCATIONAL BACKGROUND			
	Name of School (Do not abbreviate)	Address	Years Attended
Elementary			
Secondary			
Vocational			
College Course:			
Post Graduate College Course:			

Is this your first time to seek admission to a Philippine university? ____ YES ____ NO
If NO, what happened to your application?

- Accepted and enrolled at _____
(Name of school)
- Accepted but did not enroll at _____
(Name of school)
- Application was not approved

Is this your first time to seek admission to the University of Southeastern Philippines? ____ YES ____ NO

If NO, when was your first application? _____

How will your Education be supported?

- Parents
- Scholarship, state the name of the scholarship _____
- Others, specify: _____

What are your sources of information about University of Southeastern Philippines?

- | | | |
|--|---|---|
| <input type="checkbox"/> Parents | <input type="checkbox"/> Teacher in College | <input type="checkbox"/> Own effort |
| <input type="checkbox"/> Family friends | <input type="checkbox"/> Newspaper Ad | <input type="checkbox"/> Others, specify: _____ |
| <input type="checkbox"/> Friends who are students here | <input type="checkbox"/> Convocation | |
| <input type="checkbox"/> Brother / Sister | <input type="checkbox"/> Internet | |

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If you will be studying here in Davao City, where will you most likely be staying?

<input type="checkbox"/>	At home, with parents
<input type="checkbox"/>	At a boarding house / dormitory
<input type="checkbox"/>	At an apartment with relatives
<input type="checkbox"/>	At the house of relatives

Others, specify: _____

CHARACTER REFERENCE			
Name	Institution	Position	Contact Number

I certify that the foregoing entries are true and correct to the best of my knowledge and belief.

Student's Signature / Date

<i>Left thumb mark</i>	<i>Right thumb mark</i>
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Send this application to: **INTERNATIONAL AFFAIRS DIVISION**
 University of Southeastern Philippines
 Iñigo St. Bo. Obrero, Davao City
 8000 Philippines

- Submit this application together with the following:
- a. Original Scholastic Records duly translated and authenticated by the Philippine Foreign Service Post located in the foreign student applicant's home country or legal residence;
 - b. Five (5) copies of [Personal History Statement](#) in English and in the national alphabet of the foreign student applicant;
 - c. [Recommendation](#) from any two of the following to be placed in a sealed envelope:
 - i. Principal or Dean
 - ii. Student Affairs Director or Guidance Director
 - iii. Research/Thesis Adviser
 - iv. Immediate Supervisor (if working)
 - d. Notarized affidavit of support including bank statements or notarized notice of grant for institutional scholars to cover expenses for foreign student's accommodation and subsistence, as well as school dues and other incidental expenses;
 - e. Original Medical Certificate issued by an authorized physician including, but not limited to, standardized chest x-ray and Hepatitis B clearance;
 - f. Photocopy of the data page of passport with name, photo, birthdate and birthplace duly authenticated by the Philippine Foreign Service Post located in the foreign student applicant's home country or legal residence;
 - g. Original Birth Certificate duly authenticated by the Philippine Foreign Service Post located in the foreign student applicant's home country or legal residence;
 - h. Police Clearance issued by the National Police Authorities in the foreign student applicant's home country or legal residence, authenticated by the Philippine Foreign Service Post having consular jurisdiction over the place;
 - i. Six (6) recent passport-size (4.5 cm x 3.5 cm) colored pictures with white background;
 - j. IELTS with a total band score not lower than 6 in all areas and/or TOEFL score of 60-78 taken within the last two years; and
 - k. Proof of payment of the processing fee.

NOTE TO APPLICANT: All communications pertaining to this application will be sent to you at the home address and email address you provided. Please notify us for any change of address as soon as possible.





University of Southeastern Philippines

DATA PRIVACY PROVISION and CONFIDENTIALITY and NON-DISCLOSURE STATEMENT

It is expressly understood by the Undersigned that in the process of my admission to the University of Southeastern Philippines (USEP), the latter may collect data and information of students it deemed needed for the latter's admission to the University.

In view of this, the Undersigned agrees to allow, authorize, or give permission to USEP to gather, collect, handle, keep and manage such data or information, as provided to them by the Undersigned while being a student in the instant University.

Further, it is also expressly understood by the Undersigned that while enrolled in the University, the Undersigned may be exposed to data or information which may be deemed as classified by USEP. It is therefore imperative for the Undersigned to hold in confidence any such data or information and shall undertake to prevent its disclosure to transfer, consciously or unconsciously, to any party outside of this agreement without the knowledge and written consent of USEP.

By affixing my signature the Undersigned hereby agrees with the foregoing conditions and subscribe to USEP's virtue of upholding the fundamental human right to privacy, in compliance to Republic Act 10173 or Data Privacy Act of 2020.

Signed this _____ day of _____, 2020.

Signature over Printed Name

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