

13. Education:

School Attended

Address

School Year

1. Primary: to

2. Intermediate: to

3. Secondary :

1st Year: to

2nd Year: to

3rd Year: to

4th Year: to

Other collegiate courses taken (degree if any), where and when taken (School years)

14. List College / High School honors and membership in Scholarship societies:

15. List extra-curricular college / High School activities in which you have participated:

16. Special talent/s:

17. How do you plan to finance your Physical Therapy education?

PERCENTAGE (%)

Your resources: Your family Other relatives:

PVA-period of benefits: Other sources, scholarship, Aid, funds, etc.

18. Combined annual income of parents:

19. Have you applied for admission to any other Physical Therapy school/s?

20. State any additional information concerning yourself which you believe might be useful to the COMMITTEE ON ADMISSIONS in evaluating your application. (College Honors, Athletics, College Publications, Students Government, School Organization and any extra-curricular activities in school):.....

21. Give the names and addresses of two persons (not relatives) who have known you and can be character references, with whom the Committee on Admissions can correspond. At least one of the above should be someone who has known you as a student in High School and who had handled you in class:

I HEREBY PLEDGE that if admitted to the College of Physical Therapy, UERMMMCM, I shall comply with the rules of the College now in effect or which hereinafter may be formulated.

I further pledge that I shall not join any campus organization not recognized by the school.

My enrollment will be automatically cancelled if I have enrolled under FALSE PRETENCES, such as the use of irregular credentials, being debarred from re-admission for reason of poor scholastic standing or for disciplinary action and may graduate in due time depending on the completion of academic requirements, as required by the Commission on Higher Education and the UERMMMCM, College of Physical Therapy.

.....
Print Name of Applicant

Date Accomplished:

.....
Signature of Applicant