

GUIDANCE & TESTING DIVISION OFFICE OF STUDENT SERVICES SILLIMAN UNIVERSITY Building Competence, Character & Faith

DATA PRIVACY CONSENT FORM

Please choose one of the following by checking (1) one box:

- □ I am a student who is at least 18 years old.
- □ I am a parent of a student who is less than 18 years old.
- I am the legal guardian of a student who is less than 18 years old. Complete name of student:

I have read and agree with the Silliman University Data Privacy Policy and Guidelines, by affixing my signature below, I:

1. Agree that Republic Act No. 10173 or the Data Privacy Act 2012 applies to the collection and processing of my/my child's/my ward's personal data;

2. Consent to the collection, use, processing of my/my child's/my ward's personal data to the extent that it is necessary to achieve the educational, institutional, and other legitimate interests of Silliman University, including for guidance and counseling purposes in relation to the subject student;

3. Warrant the accuracy and truthfulness of the personal information I am providing to Silliman University, provided that I will respect any revision of an act or decision of the university based on information I provided that is found to be false or inaccurate;

4. Agree to finding an amicable settlement of any issue arising from my/my child's/my ward's personal information before resorting to arbitration or litigation before the regular courts of the Philippines.

Printed Name and Signature

Date



GUIDANCE & TESTING DIVISION Office of Student Services SBE – Junior High School Department Silliman University, Dumaguete City Tel no: (035) 422-6002 loc. 422 email add: jhscounseling@su.edu.ph

Picture

INDIVIDUAL INVENTORY RECORD

Year & Section:	
E-mail address:	

_____ S.Y. _____ Mobile no: ______ ____ Telephone no: ______

PERSONAL INFORMATION

Name:							
Name:(Last)		(Trist)		(Middle Name)			
Present Address:							
				Province	Zip Code		
Home Address: _	No. & Street	Barangay	Town/City	Province	Zip Code		
Date of Birth:			irth:		·		
Sex:	Citizenshi	Citizenship: Religion:					
		EDUCATIO	NAL BACKGROUNI	D			
Please check the a	ppropriate sta	atus: ()new stu	dent ()trans	sferee ()continuing		
Pre-school:			Ye	ear graduated:			
Elementary:			Ye	ar graduated:			
With honors? ()	Yes ())No Rank	:	Yea	r:		
		FAMILY	BACKGROUND				
Father:			Mother:				
Home Address:			Home Address:	Home Address:			
Occupation:			Occupation:	Occupation:			
Office Address:			Office Address:	Office Address:			
Landline/Mobile no:			Landline/Mobil	Landline/Mobile no:			
Guardian(if any)	:		Relatio	onship:			
Complete Address	5:		Landlin	ne/Mobile no:			

At present, where are you staying?

- () with parents
 () with father
 () with mother
 () in a boarding house
 () in an apartment
 () with guardian () with friends
- () in a dormitory [please specify]
- () with relatives [please specify]

Parents are: () Living together () Separated

() Others [Please specify below]

Mother	Father
() Single parent	() Single parent
() Re-married	() Re-married
() Parent/s with another partner	() Parent/s with another partner
() Deceased	() Deceased

Siblings:

Brothers/Sisters	Age	Alive?		Alive?		Alive?		Alive?		Alive?		Alive?		Alive?		Alive?		Alive?		Alive?		Alive?		Alive?		Alive?		Alive?		Alive?		Alive?		Alive?		Alive?		Alive?		Alive?		Alive?		Educational Attainment
(list down according to birth rank)		Yes	No																																									

SPECIAL INTERESTS/ OTHER PERSONAL INFORMATION

Sports: _____

Hobbies: _____

Skills/Talents:

Languages/Dialects spoken:

Study habits schedule (ex. every day from 6:00-8:00pm) :

Why did you choose Silliman University?:

Person to contact IN CASE OF EMERGENCY:

Name:	Contact no:		
Relationship: Addre	SS:		