

SPIRITAN MISSIONARY SEMINARY

For official use:

	OR	PH	RC	Community	□□
BC				Reg. No.	□□□□
SLC				Last Sem.	□□□□
TRS					

REGISTRATION FORM
(Please use capital letters)

Surname:

Name(s):

Date of birth: Day: Month: Year:

Place of birth

Ethnic group

Nationality

Religious Community

**GLUE
PHOTO
HERE**

PRIMARY SCHOOL

Years		Class		Name of the school – village / town / district / country (if different from above)
from	to	from	to	

SECONDARY SCHOOL

Years		Form		Name of the school – village / town / district / country (if different from above)
from	to	from	to	

RESULTS QUALIFYING ENTRY INTO UNIVERSITY

Name of the Certificate

	Year		
Identification Number (if applicable)			<input style="width: 100%; height: 20px;" type="text"/>
Aggregate (if applicable) - Points		Division (if applicable):	<input style="width: 100%; height: 20px;" type="text"/>
Subjects:	Grade:	Subjects:	Grade:

OTHER DIPLOMAS – CERTIFICATES - COURSES:

1.

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From		To		Name of the school – village / town / district / country
Month	Year	Month	Year	

2.

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From		To		Name of the school – village / town / district / country
Month	Year	Month	Year	

3.

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From		To		Name of the school – village / town / district / country
Month	Year	Month	Year	

4.

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From		To		Name of the school – village / town / district / country
Month	Year	Month	Year	

5.

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From		To		Name of the school – village / town / district / country
Month	Year	Month	Year	

ADDITIONAL INFORMATION (at your discretion)

Date: _____

Student’s signature