SDF-TEC-353-004-02

Republic of the Philippines
Cebu Normal University
TESTING CENTER
Telephone No.: (+63 32) 254 1452 local 150
Website: www.cnu.edu.ph

Testing Center Copy

COLLEGE ADMISSION FORM (CTE)

Reminders:
1. Write NA/none for not applicable inquiry
2. Do not leave any spaces blank/unanswered

Recent 2X2 colored picture with name & signature

(For walk-in applicants, please do not staple your picture. Use paste/glue.)

Application No. (To be filled out by the Testing Center) ___________ **Date of Application** ___________

Remarks/Signature (from the College/Department/Campus) ___________________________

DEGREE PROGRAM APPLIED FOR: (Check (/) one)

____ BEEd   _____ BECEd   _____ BSNEd   _____ BCAEd   _____ BTLEd   _____ BPEd

BSEd major in: _____ English   _____ Filipino   _____ Values
_____ Mathematics   _____ Science   _____ Social Studies

(Please print all the entries)

Name: ____
(Family Name)   (Given Name)   (Middle Name)

Sex: _____ Age: ______ Nationality: _________________ Birth Date: ___________________

Home Address: ______________________________ Telephone Number: _________________ Zip Code: _________

Present Address: ______________________________ Mobile Number: _____________________ Email Address: ____________________________

Disablity (if applicable) : ______________________

Senior High School / School Last Attended (if transferee) : _____________________________ Year Graduated: __________________________

Senior HighTrack : ___________________ Strand : ___________________________ LRN: ____________________________GPA : ___________

Sector, please check one: _____ Public _____ Private   If private school, please check one: _____ Sectarian _____ Non-Sectarian

____
Applicant's Signature

(To be filled out by the Testing Center)

Examination Date: ______________________________ **Time:** _________________ **Attended by:** _______________

Test Result (Check (/) one): Qualified for Interview: _______   **Not Qualified for Interview:** _______

____
Printed Name and Signature of the Testing Director

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Applicant's Copy

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ADMISSION SLIP

Application No. (To be filled out by the Testing Center) ___________ **Date of Application** ___________

DEGREE PROGRAM APPLIED FOR: (Check (/) one)

____ BEEd   _____ BECEd   _____ BSNEd   _____ BCAEd   _____ BTLEd   _____ BPEd

BSEd major in: _____ English   _____ Filipino   _____ Values
_____ Mathematics   _____ Science   _____ Social Studies

(Please print all the entries)

Name: ____
(Family Name)   (Given Name)   (Middle Name)

Sex: ____ Age: ______ Civil Status: ____________ Birth Date: _________________ Contact Number: ______________

Name of School Last Attended (IN FULL): ____LRN: __________________Track: _______________ Strand: _______________

(To be filled out by the Testing Center)

Examination Date: _________________ **Time:** _________________ **Venue:** _________________

Date of Posting of Qualifiers: ______________________ **Attended by:** _________________________

REQUIREMENTS **DURING** THE COLLEGE ADMISSION TEST (CAT)

1. **Admission Slip**
2. **Plastic (transparent) Envelope**
3. **Valid identification (ID)**
4. **Pencils, sharpener, eraser**

Guidelines: **(PLEASE READ)**

1. Report on time to the designated room/venue as scheduled (late comers will not be entertained). Take a full meal prior to the exam. Only water, biscuits and candies are allowed to be taken. No bags allowed, use the plastic envelope.
2. Proper dress code must be observed. (Slippers, Shorts and Sleeveless shirts are not allowed).
3. An undergraduate applicant can take an admission/entrance test, **only once** whether in Main Campus or any External Campuses. Violation of such instruction is a **forfeiture of all his/her admission/entrance test results.**
4. Qualifiers will be posted according to the given date of posting. Results will be QUALIFIED and NOT QUALIFIED only. **Those who will be posted as "QUALIFIERS FOR INTERVIEW" are considered as "Qualified" and those not included in the said list are understood to be "Not Qualified." Hence, test results will just be a description of "QUALIFIED" and "NOT QUALIFIED." There shall be no scores given.** You may call in our office to inquire if you are qualified or not. Qualifiers should follow the assigned schedule for interview.

Please be guided accordingly. Thank you!

____
Printed Name and Signature of the Testing Director