



April 10, 2018

DIVISION MEMORANDUM
No. 27, s. 2018

**ANNOUNCEMENT OF THE CONDUCT OF THE ADMISSION TEST
FOR ANTIPOLO CITY NATIONAL SCIENCE AND TECHNOLOGY SCHOOL
FOR SENIOR HIGH SCHOOL**

TO: OIC, Assistant Schools Division Superintendent
OIC, CID Chief
Education Program Supervisors
Division Senior High School Coordinator
Public Schools District Supervisors
Public and Private Secondary School Heads

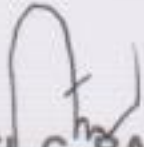
1. This is to announce the conduct of Admission Test for Senior High School Students of Antipolo City National Science and Technology School for SY 2018-2019 on Friday, April 27, 2018 at Antipolo City National Science and Technology School from 8:00 A.M. to 12:00 noon.
2. To qualify, applicants must be:
 - a resident of Antipolo City
 - a Grade 10 completer from public/private Science High School or Science oriented class/school
 - has no grade lower than 85% in all learning areas and with a general weighted average of not lower than 85%
 - has special aptitude in Science, English and Mathematics
 - is physically fit and of good moral character
3. The applicants must submit the following:
 - Duly accomplished Application Form with two (2) pieces of recent identical pictures. Application form is attached as Enclosure No. 1 and should be submitted on or before April 24, 2018 at Antipolo City National Science & Technology High School at Sitio Cabading, Brgy. San Jose, Antipolo City
 - Photocopy of School Form No. 10 (Form 137) duly certified by the school head
 - Photocopy of School Form No. 9 (Form 138) duly certified by the school head
 - Barangay Certificate of Residency
4. The applicants who will qualify in the admission test and interview should undergo physical/medical examination from any public physician. Results of which should be submitted upon enrolment together with the NSO/PSA Birth Certificate.
5. The top 20 among the test takers will qualify to be enlisted and enroll in ACNSTHS. This is to fill the 100 slots for the two (2) classes to be opened for Senior HS.
6. The School Selection Committee shall be headed by the school head of ACNSTHS and selected teachers shall serve as members who will administer and check and conduct the interview. Results shall be forwarded to the Division Office, Attention: **MRS. DOLORES J. AGONG**, (EPS - Science) and copy furnished to **MRS. CRISTINA C. SALAZAR** (Div. Senior HS Coordinator)



Republic of the Philippines
Department of Education
Region IV-A CALABARZON
CITY SCHOOLS DIVISION OF ANTIPOLO



7. Results of the test will be uploaded to DepEd Antipolo City website
www.deped.antipolocity.com
8. Immediate and wide dissemination of this memorandum is desired.


DR. ROMMEL C. BAUTISTA, CESO V
Schools Division Superintendent



ANTIPOLO CITY NATIONAL SCIENCE AND TECHNOLOGY HIGH SCHOOL
QUALIFYING EXAMINATION APPLICATION FORM

TO BE FILLED OUT BY THE APPLICANT

I. PERSONAL DATA

Name of Applicant

1 X 1 PHOTO

Last Name _____

First Name _____

Middle Name _____

Birthday: (Month, Day, Year) _____

Age as of June 1, 2018: _____

Sex: _____

Contact Nos.: _____

Email Address: _____

Complete Home Address: _____

I certify that the above information is true and correct. I understand that any false or misleading information will result to the disapproval of application / admission.

Applicant's Signature over Printed Name

TO BE FILLED OUT BY THE PARENT

- Does your child have pending application in other Science High Schools? YES _____ NO _____
- Are you willing to adhere with conditions of ACN5THS in terms of maintaining grades, etc., should he/she qualify in the admission test? YES _____ NO _____

I certify that the above information is true and correct. I understand that any false or misleading information will result to the disapproval of application / admission.

Parent / Guardian's Signature over Printed Name

TO BE FILLED OUT BY THE SCHOOL AUTHORITY CONCERNED

Name of School (Do not abbreviate): _____

Complete School Address: _____

School Type: Government: _____

Private: _____

School Contact Nos. _____

Pupil's General Average (From 1st to 3rd quarter): _____

(Pls. attached certified photocopy of FORM 138)

Pupil's RANK in the BATCH: _____

Number of pupils in the BATCH: _____

I certify that the above information is true and correct. I understand that any false or misleading information will result to the disapproval of application / admission.

I hereby certify that the pupil-applicant is of good's moral character and behavior.

Guidance Counselor's / Adviser's
Signature over Printed Name

School Head's Signature over Printed Name

Reminders for the applicants:

Name of Applicant: _____

- Be at your testing center, Antipolo City National Science and Technology High School on Saturday, February 17, 2018, 7:00 AM.
- Present this Application form and your school ID to the proctor / Room examination.
- Bring at least two sharpened #2 pencil, a good eraser and eraser.