

Rock Hill School of Leadership, Inc.

School ID: 408610

Purok Kamunggay, Dapdap, Brgy. Catarman, Lilo-an, Cebu, Philippines 6002 Contact No. +63-917-626-7544 / (032) 424-0293 information@rhsli.org / www.rhsli.com

		School Year:
Student Na	me:	LRN:
	REQUIREMENTS FOR ENROLLLMENT (NEW S	
1.	Documents	TO BE FILLED OUT BY THE
	☐ Copy of Birth Certificate*	PRINCIPAL ONLY:
	□ Copy of Most Recent Report Card (Form 138)	For entry in:
2.	Forms	(Learning Center/ Level)
	☐ Student Application	(2001)
	☐ Standard of Conduct	
	☐ Parent Agreement	Signature/Date:
	☐ Financial Agreement	
	☐ Character Recommendation	TO BE FILLED OUT BY THE
	☐ Graduation Requirement Agreement	REGISTRAR ONLY:
	☐ Medical History	☐ COMPLETE RECORDS
	☐ Anti-Bullying Statement	☐ COMPLETE RECORDS ☐ INCOMPLETE RECORDS
	☐ Child Protection Policy	(Please see the checklist)
3.	Pictures	ASSIGNED ID#:
	☐ 2 pcs. − 1" x 1" ID picture	
	☐ 2 pcs. − 2" x 2" ID picture	Signature/Date:
4.	Records Assessment	
5.	Payment of Enrollment Fees	4
6.	Interview with Principal	TO BE FILLED OUT BY THE CASHIER ONLY:
For For	eign Students:	Data officially, assembled /OD #4
	Original Birth Certificate from the Office of the Civil Registry of the respective country of birth translated into English, or Embassy Certification of Birth Details;	Date officially enrolled/OR #:
	Authenticated School Records translated into English	Cashier's Signature/Date:
	Copy of Visa/Passport	
	ACR Number or ACRI Card (Alien Certificate of Registration Identity)	
	Student Visa / Special Study Permit	
	Clearance form Bureau of Immigration and National Intelligence	

*For Students with Dual Citizenship

Coordinating Agency (NICA)

Identification Certificate as Filipino Citizen issued by Bureau of Immigration

Medical Certificate from Bureau of Quarantine



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STUDENT INFORMATION

(Last)	(First)	(Middle)	(Extension
		·	
Idress:	Inhana # :	ZIP Code Email Ad:	
Condor	Pirth Data	Pirthaloo	
ge: Gender:	_ birth Date:	Birthplace:	
hool Last Attended:			
ldress:			
st Grade Completed:			
	FAMILY INFORMAT	ION	
Father's Name:			
Employment:			
		_	
Business Phone:		Email Address:	
Mother's Name:			
Employment:			
		_	
Business Phone:		Email Address:	
Emergency Telephone number, o	ther than those already listed:	:	
Marital Status: Married	Widow Divorced	□ Separated □ Other (pls specify)	
Children in the family: Name		Age	
Legal Guardian:(If applicable) Name:			
Employment:			
Position:			