



List all the children in your family including yourself starting with the eldest. Put an x opposite to your name. (if married list your own children)

<u>Name</u>	<u>Sex</u>	<u>Age</u>	<u>Civil Status</u>	<u>School/ Occupation</u>	<u>Grade or Year Company or Firm</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

**EDUCATIONAL BACKGROUND**

Name the schools you have ever attended. (Include grade school, high school and other colleges)

<u>School</u>	<u>Date of Attendance</u>	<u>Grade/Year Level</u>	<u>Honors/Award Received</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

<u>H.S. Subjects Liked</u>	<u>Grade</u>	<u>Subjects Disliked</u>	<u>Grade</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Approximate high school average \_\_\_\_\_ Rank in class \_\_\_\_\_  
 Course presently enrolled in \_\_\_\_\_ Major \_\_\_\_\_  
 Other course previously enrolled in \_\_\_\_\_  
 Reason for shifting/ Transferring \_\_\_\_\_

Present Educational and Vocational Plans

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

How did you make this choice?

- \_\_\_\_\_ family suggestion      \_\_\_\_\_ teacher's choice
- \_\_\_\_\_ family tradition      \_\_\_\_\_ following vocation of someone I admire
- \_\_\_\_\_ personal choice      Others (pls. specify) \_\_\_\_\_
- \_\_\_\_\_ friend's choice      \_\_\_\_\_

If choice was not your own, what course would you rather take up? \_\_\_\_\_

How did you come to this school?

- \_\_\_\_\_ personal choice      \_\_\_\_\_ friend's recommendation
- \_\_\_\_\_ parent's choice      \_\_\_\_\_ Others (pls. specify) \_\_\_\_\_

How much information do you have about the requirements of the course you are taking-up:

- \_\_\_\_ very much    \_\_\_\_ much    \_\_\_\_ enough    \_\_\_\_ very little    \_\_\_\_ none

Where did you get this information? (Specify) \_\_\_\_\_



<input type="checkbox"/> tolerant	<input type="checkbox"/> jealous	<input type="checkbox"/> irritable
<input type="checkbox"/> calm	<input type="checkbox"/> talented	<input type="checkbox"/> poor health
<input type="checkbox"/> anxious	<input type="checkbox"/> quick-tempered	<input type="checkbox"/> frequent daydreaming
<input type="checkbox"/> depressed	<input type="checkbox"/> cynical	<input type="checkbox"/> sarcastic
<input type="checkbox"/> nervous	<input type="checkbox"/> tactful	<input type="checkbox"/> lovable
<input type="checkbox"/> easily exhausted	<input type="checkbox"/> conscientious	<input type="checkbox"/> aloof
<input type="checkbox"/> quiet	<input type="checkbox"/> talkative	Others _____

Significant Events in Your Life: Explain briefly.

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What things have caused you most humiliation or sense of failure?

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Have you had any counseling previously?  Yes  No

When? \_\_\_\_\_ With Whom? \_\_\_\_\_

Briefly write what seem to be your particular problems in any area of your life.

List three names of persons connected in this university or community, who know you personally.

NAME	OCCUPATION	ADDRESS
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**GUIDANCE AND COUNSELING ASSISTANCE**

What help do you want to obtain from the Guidance and Counseling Center?

GUIDANCE COUNSELOR/ COORDINATOR