



SCHOOLS DIVISION OF NEGROS ORIENTAL

Division Office - Negros Oriental, P.O. Box 500, Marikina City, Negros Oriental

Telephone: (035) 421-1000, 421-1001, 421-1002, 421-1003, 421-1004, 421-1005, 421-1006, 421-1007, 421-1008, 421-1009, 421-1010, 421-1011, 421-1012, 421-1013, 421-1014, 421-1015, 421-1016, 421-1017, 421-1018, 421-1019, 421-1020, 421-1021, 421-1022, 421-1023, 421-1024, 421-1025, 421-1026, 421-1027, 421-1028, 421-1029, 421-1030, 421-1031, 421-1032, 421-1033, 421-1034, 421-1035, 421-1036, 421-1037, 421-1038, 421-1039, 421-1040, 421-1041, 421-1042, 421-1043, 421-1044, 421-1045, 421-1046, 421-1047, 421-1048, 421-1049, 421-1050, 421-1051, 421-1052, 421-1053, 421-1054, 421-1055, 421-1056, 421-1057, 421-1058, 421-1059, 421-1060, 421-1061, 421-1062, 421-1063, 421-1064, 421-1065, 421-1066, 421-1067, 421-1068, 421-1069, 421-1070, 421-1071, 421-1072, 421-1073, 421-1074, 421-1075, 421-1076, 421-1077, 421-1078, 421-1079, 421-1080, 421-1081, 421-1082, 421-1083, 421-1084, 421-1085, 421-1086, 421-1087, 421-1088, 421-1089, 421-1090, 421-1091, 421-1092, 421-1093, 421-1094, 421-1095, 421-1096, 421-1097, 421-1098, 421-1099, 421-1100

November 8, 2017

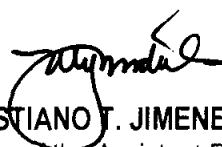
DIVISION MEMORANDUM

No. 643 s. 2017

SCHOLARSHIP GRANTS OF VISCAL FOUNDATION, INCORPORATED

TO : Chiefs, CID & SGOD
DEPS/SEPS/EPS/Coordinators
Public Schools District Supervisors
Public Elementary and Secondary School Heads
All Others Concerned

1. Attached is **Regional Memorandum No. 812, s. 2017** inviting applicants for the **Scholarship Grants offered by Viscal Foundation, Incorporated.**
2. Herewith, is a scholarship application form.
3. For other requirements and instruction, please see attached memorandum..
4. For the information and guidance of all concerned.


SALUSTIANO T. JIMENEZ, CESO VI
OIC-Office of the Assistant Regional Director
Concurrent, Schools Division Superintendent

NOV 8 2017



MA'AM RACHEL



REPUBLIKA NG PILIPINAS
REPUBLIC OF THE PHILIPPINES
KAGAWARAN NG EDUKASYON
DEPARTMENT OF EDUCATION
REHIYON VII, GITNANG VISAYAS
REGION VII, CENTRAL VISAYAS
Sudlon, Lahug, Cebu City



REGIONAL MEMORANDUM
No. 0812, s.2017

D: 11/6/17
8.

NOV 03 2017

SCHOLARSHIP GRANTS OF VISCAL FOUNDATION, INCORPORATED

To : Schools Division Superintendents/OICs

1. Enclosed is a Scholarship Application Form of Viscal Foundation, Incorporated relative to the scholarship grants to Senior High School graduating students.
2. For interested applicants, kindly secure the application form and other requirements from Viscal Foundation, Inc. Office (at the back of CICC Mandaue City), Metro Gaisano Retail Stores- Customer Service Center, WealthBank (Pacific Mall), Taft Property Venture Dev't. Corp., Pacific Mall-Customer Service, Metro Fresh 'n Easy (Tita Gwapa Superlinda Stores), or from Scholarship Offices of USC, USJR, CIT-U and CNU or call 236-8390 loc. 248 and look for Ms. Lielzel Lupina or Ms. Joyce Momo and submit the accomplished forms and other supporting documents to the said offices on or before February 2, 2018.
2. For more information, refer to the back portion of the application form of Viscal Foundation, Incorporated scholarship application form.
3. For the information of all concerned.

Juliet A. Jeruta
JULIET A. JERUTA, PhD., CESO V
Director III
Officer-in-Charge

JAJ/STJ/LBA/srb

Office of the Director (ORDi), Tel. Nos.: (032) 231-1433; 231-1309; 414-7399; 414-7325; Office of the Assistant Director, Tel. No.: (032) 255-4542
Field Technical Assistance Division (FIAD), Tel. Nos.: (032) 414-7324 Curriculum Learning Management Division (CLMD), Tel. Nos.: (032) 414-7322
Quality Assurance Division (QAD), Tel. Nos.: (032) 231-1071 Human Resource Development Division (HRDD), Tel. No.: (032) 255-5239
Education Support Services Division (ESSD), Tel. No.: (032) 254-7062 Planning, Policy and Research Division (PPRD), Tel. Nos.: (032) 233-9030;
414-7065 Administrative Division, Tel. Nos.: (032) 414-7326; 414-4367; 414-7366; 414-7322; 414-4367
Finance Division, Tel. Nos.: (032) 256-2373; 253-8061; 414-7321

" ESK 2015: Karapatan ng Lahat, Pananagutan ng Lahat "



VICSAL FOUNDATION, INCORPORATED

CD Seno & WO Seno St., Guizo, Mandae City
Tel No. (6332) 2368390 loc. 248

SCHOLARSHIP APPLICATION FORM							
Instructions: 1. Please fill-out in CAPITAL LETTERS.							
2. Do not leave any item blank. Write N.A. if information needed does not apply to you.							
I. PERSONAL INFORMATION							
SURNAME		GIVEN		MIDDLE NAME			
CITY ADDRESS							
PROVINCIAL ADDRESS							
AGE		SEX		CIVIL STATUS			
DATE OF BIRTH		PLACE OF BIRTH		RELIGION			
LANDLINE #		MOBILE #/s		EMAIL ADDRESS			
II. EDUCATIONAL BACKGROUND							
LEVEL	SCHOOL	ADDRESS	INCLUSIVE YEARS	HONORS/AWARDS			
ELEMENTARY							
HIGH SCHOOL							
Senior High School	*TRACKS:	<input type="checkbox"/> HUMSS	<input type="checkbox"/> STEM	<input type="checkbox"/> GAS	<input type="checkbox"/> ABM		
		<input type="checkbox"/> SPORTS	<input type="checkbox"/> ARTS & DESIGN	<input type="checkbox"/> TVL, specify:			
TERTIARY EDUCATION							
SCHOOL INTENDED TO ENROLL		SCHOOL NAME			COURSE		
FIRST CHOICE							
SECOND CHOICE							
THIRD CHOICE							
FACTOR(S) THAT MOTIVATED YOU TO CHOOSE YOUR COURSE:							
III. FAMILY BACKGROUND							
NAME & AGE		FATHER		MOTHER		CONTACT PERSON IN CASE OF EMERGENCY	
						Name	
EDUCATIONAL ATTAINMENT						Relationship	
SCHOOL LAST ATTENDED						Address	
OCCUPATION						Contact #	
MONTHLY INCOME							
BROTHERS & SISTERS (eldest to youngest)							
NAME	RELATIONSHIP	AGE	SEX	CIVIL STATUS	EDUCATIONAL ATTAINMENT	SCHOOL LAST ATTENDED	OCCUPATION & MONTHLY INCOME
BROTHERS/SISTERS ENJOYING SCHOLARSHIPS (IF ANY)							
NAME	SCHOLARSHIP	SCHOOL	ADDRESS	COURSE & YEAR			
IV. CHARACTER REFERENCES (name at least 3 persons other than your family who can vouch for your moral integrity)							
NAME	1	2	3				
ADDRESS							
COMPANY							
POSITION							
CONTACT #/s							

This is to certify that the foregoing information and statements are true and correct to the best of my knowledge and that I am fully aware that any false information that I have intentionally or negligently written can cause the disapproval/cancellation of my scholarship.

Signature over printed name of the Applicant _____ Date Signed _____

