DOST-PHILIPPINE SCIENCE HIGH SCHOOL SYSTEM
NATIONAL COMPETITIVE EXAMINATION (NCE)
APPLICATION FORM FOR INCOMING GRADE 7, SY 2026-2027

THIS MATERIAL IS NOT FOR SALE. IT MAY BE PHOTOCOPIED AND MAY BE DOWNLOADED FROM https://pshs.edu.ph

Instructions:
Please accomplish this form in two copies. TYPE OR PRINT LEGIBLY ALL INFORMATION NEEDED and carefully read the REMINDER TO EXAMINEES. DO NOT ABBREVIATE. DO NOT LEAVE ANY ITEM BLANK. Countersign all erasures and corrections made.

Staple Only

1" x 1" Photo

PERSONAL DATA:

1) NAME OF PUPIL-APPLICANT: (*Last Name, First Name, Middle Name)*

2) BIRTH DATE: M M D D Y Y Y Y

3) SEX: ☐ MALE ☐ FEMALE

4) CONTACT NUMBERS : (pls. include all possible contact numbers)

5) PRIMARY EMAIL ADDRESS:

SECONDARY EMAIL ADDRESS:

6) COMPLETE HOME/ PERMANENT ADDRESS: (pls. include your zip code)

NAME OF CITY/MUNICIPALITY (of your residence): _____ **LEARNER'S REFERENCE NO.:** _____

7) NAME OF GRADE 5 SCHOOL (Write full name of school):

8) COMPLETE SCHOOL ADDRESS:

9) SCHOOL CONTACT NOS.:

10) SCHOOL TYPE: ☐ Public ☐ Private

11) Pupil-Applicant's FINAL GRADE in Grade 5: **MATH** _____ **SCIENCE** _____

PLS. NOTE: If final grade in Science and/or Math is below 85, submit a certification from the principal that the child belongs to the upper 10% of the batch.

TO BE FILLED OUT BY THE PARENTS:

	YES	NO
1. Is your child a Filipino citizen?	☐	☐
2. Does your child have a pending or approved application as immigrant in any foreign country?	☐	☐
3. Has your child previously applied for admission in PSHS?	☐	☐
4. If admitted to PSHS next school year, will it be the first time that your child is to enroll in Grade 7?	☐	☐

5. Which campus are you seeking admission to? (You will only be considered for admission in the campus of choice. The top 240 applicants nationwide will be offered a slot in the Main Campus (MC). Those who choose MC and fail to land in the top 240 will be ranked in the MC waiting list as possible alternate qualifiers.)

Please check the preferred PSHS campus. (Choose only ONE; Change of campus choice will NOT be entertained after the release of NCE results.)

- ☐ **MAIN –** Agham Road, Diliman, Quezon City
- ☐ **ILOCOS REGION –** San Ildefonso, Ilocos Sur
- ☐ **CAGAYAN VALLEY –** Bayombong, Nueva Vizcaya
- ☐ **CENTRAL LUZON –** Clark Freeport Zone
- ☐ **CALABARZON –** Brgy. Sampaga, Batangas City
- ☐ **MIMAROPA –** Odiongan, Romblon
- ☐ **BICOL REGION –** Goa, Camarines Sur
- ☐ **WESTERN VISAYAS –** Jaro, Iloilo City
- ☐ **CENTRAL VISAYAS –** Argao, Cebu
- ☐ **EASTERN VISAYAS –** Palo, Leyte
- ☐ **ZAMBOANGA PENINSULA –** Brgy. Cogon, Dipolog City
- ☐ **CENTRAL MINDANAO –** Balo-i, Lanao del Norte
- ☐ **SOUTHERN MINDANAO –** Tugbok, Davao City
- ☐ **SOCCSKSARGEN –** Paraiso, Koronadal City
- ☐ **CARAGA –** Ampayon, Butuan City
- ☐ **CORDILLERA ADMINISTRATIVE REGION** – Irisan, Baguio City

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/enrollment/scholarship. Furthermore, I hereby authorize PSHS the publication of my child's name in the application process.

Signature over Printed Name of Parents _____

(PLEASE DO NOT DETACH)

This serves as a proof of application. IMPORTANT: This DOES NOT serve as the test permit.

NAME OF PUPIL-APPLICANT: _____

NAME OF SCHOOL: _____

Submit the following upon filing of application:

- Fully accomplished Application Form in two (2) copies
- Two (2) identical recent 1 x 1 pictures
- Non-refundable processing fee for private school students, based on Grade 5 (to be paid to the PSHS Cashier's Office)/**Free for public school students**
- Certified true copy of Grade 5 report card
- If final grade in Science and/ or Math is below 85, submit a certification from the principal or proof that the child belongs to the upper 10% of the batch

Recommendation of the PSHS Registrar/DOST or PSTO Coordinator:

As per data above:
Approved: [ ]
Disapproved: [ ]

Reason/s for Disapproval: _____

Processed by: [ ] DOST _____ Date: _____
Name & Signature

[ ] PSHS _____
Name & Signature

To be accomplished by the PSHS Cashier:

Mode of Payment: **Cash only**

Payment Received by:

_____
Name & Signature

Date: _____

REMINDER TO THE EXAMINEE:

If you do not receive an email notification that your application has been processed, you may visit or call the nearest PSHS Campus or call PSHSS-Admissions Office at telephone no. (02) 8939-PSHS (89397747) or check at https://pshs.edu.ph. For queries or clarifications, you may call (02) 89397747 or email admissions@pshssystem.edu.ph.

PSHSS-Admissions Office