福 音 真 理 基 金 會
Christian Gospel Truth Foundation, Inc.

25 Doña Hemady Ave. cor. 3rd St., New Manila
Quezon City, Philippines
Tel. 8294-0853 to 55 loc. 110

EDUCATIONAL GRANT APPLICATION FORM (EG-SHS)
ACADEMIC YEAR _____
SENIOR HIGH SCHOOL

_____
SURNAME FIRST NAME MIDDLE NAME

PICTURE
2" X 2"

_____
BIRTHDATE / AGE

CONTACT DETAILS:
Landline: _____
Mobile: _____
Email Add: _____

Home Address
_____
_____

_____ _____
FATHER'S / GUARDIAN'S FULL NAME MOTHER'S / GUARDIAN'S FULL NAME

_____ _____
Work / Monthly Income Work / Monthly Income

Name / s of Siblings	Age	School / Grade Level

_____ _____
UNIVERSITY / COLLEGE TO ENROLL IN INTENDED COURSE

☐ SEMESTRAL ☐ TRIMESTRAL

REQUIRED DOCUMENTS TO BE ATTACHED TO APPLICATION FORM

_____ Photocopy of G10 Report Card, Original To Be presented
_____ Certificate of Good Moral Character issued by the Guidance Counselor of last School Attended
_____ Certificate of Employment with Salary for Employed Parents
_____ Letter of Recommendation from Principal of School last attended
_____ Registration Card _____ Service Invoice for Paid school fees

Received By CGTFI _____
Kristylle Mae D. Pascual / Date

Meeting and Signing of Memorandum of Agreement DATE _____ TIME _____
PLACE CGTFI OFFICE: 118 4TH St., New Manila, Q.C

APPROVED BY: _____
EXECUTIVE DIRECTOR / DATE

July 13, 2026