



# University of the Philippines Los Baños Alumni Association, Inc.

UPLB Alumni Center, Narra Rd., UPLB, College, Laguna

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## UPLB ALUMNI INFORMATION SHEET

Please print or type all answers.

### PERSONAL

Mr./Mrs./Miss \_\_\_\_\_

Family Name                  First Name                  Middle Name

**NOTE:** Use name registered with the University. If you are an alumna and you subsequently get married, please indicate also your maiden name in parenthesis. e.g. (nee: Miss Cruz)

STUDENT I.D. NO. \_\_\_\_\_

Title Preferred: \_\_\_\_\_ (e.g. Dr., Engr., etc.) Sex: \_\_\_\_\_ Civil Status: \_\_\_\_\_ Citizenship: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_ Religious Affiliation: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

Tel. no./ Mobile no. \_\_\_\_\_

Business Address: \_\_\_\_\_

Tel. no. / Mobile no. \_\_\_\_\_

Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

**NOTE:** Please check address where you prefer to be contacted by mail for correspondences.

### EDUCATIONAL BACKGROUND

A. Obtained from U.P.

Degree/Diploma/Certificate/Title	College/Unit	Date of Graduation

B. Obtained from non-U.P. institutions

Degree/Diploma/Certificate/Title	College/Unit	Date of Graduation

### CIVIL SERVICE ELIGIBILITY/BOARD/BAR

Name of Examination	Place of Examination	Date	Rating

### EMPLOYMENT RECORD (start from most current)

Name of Employer	Position/ Designation

Please attach  
your picture  
here  
(2x2)

**FAMILY RECORD**

	Name	Degree	School Attended	Inclusive Dates	Home Address
Spouse:	_____				
Children:	_____				
	_____				
Father:	_____				
Mother:	_____				
Brother (s):	_____				
	_____				
Sister(s):	_____				
	_____				

**OTHER INFORMATION**

Area(s) of specialization / Expertise / Industry

<ul style="list-style-type: none"> <li><input type="checkbox"/> Agriculture, Fishery and Forestry</li> <li><input type="checkbox"/> Banking and Finance</li> <li><input type="checkbox"/> Business and Management</li> <li><input type="checkbox"/> Community, Social and Personal Services</li> <li><input type="checkbox"/> Construction</li> <li><input type="checkbox"/> Education</li> <li><input type="checkbox"/> Health</li> <li><input type="checkbox"/> Humanities and Arts</li> <li><input type="checkbox"/> Information and Technology</li> <li><input type="checkbox"/> Insurance</li> <li><input type="checkbox"/> Law</li> <li><input type="checkbox"/> Manufacturing</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Media and Communication</li> <li><input type="checkbox"/> Military</li> <li><input type="checkbox"/> Mining and Quarrying</li> <li><input type="checkbox"/> Politics and Government</li> <li><input type="checkbox"/> Public Utilities (Electricity, Gas, Water)</li> <li><input type="checkbox"/> Real Estate</li> <li><input type="checkbox"/> Science and Technology</li> <li><input type="checkbox"/> Telecommunication</li> <li><input type="checkbox"/> Transportation, Freight and Mail Services</li> <li><input type="checkbox"/> Wholesale and Retail</li> <li><input type="checkbox"/> Others _____ <i>(please specify)</i></li> </ul>
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Languages Spoken: \_\_\_\_\_

Training & other Qualifications: \_\_\_\_\_

Researches / Papers Written: \_\_\_\_\_

Awards/ Honors Received: \_\_\_\_\_

Membership / affiliation in Professional Organization(s) (Including Boards, Clubs, Fraternities, Sororities, etc.)

**CHARACTER REFERENCES:**

Name	Position	Addresses	Tel. No.
_____	_____	_____	_____
_____	_____	_____	_____

**DATE ACCOMPLISHED** \_\_\_\_\_ **SIGNATURE:** \_\_\_\_\_

Preferences: Preferred Mailing Address: \_\_\_\_\_Residence \_\_\_\_\_Business  
 Preferred E-mail Address: \_\_\_\_\_Residence \_\_\_\_\_Business

Name:

Student Number:

Course/ Class:

Permanent Address:

Signature: must be at the center