



Far Eastern University
DR. NICANOR REYES MEDICAL FOUNDATION
 INSTITUTE OF MEDICINE
 Tel. No.: 427-0213 Loc. 1144 Website: www.feu-nrmf.ph

APPLICATION FORM FOR ADMISSION

SY 20 - 20

Local International

Please Print all Information Legibly

Application No. _____

Surname

First Name

Middle Name

Gender (put an X mark) Male Female

Date of Birth mm dd yy

Age Civil Status

Height Citizenship

Weight Religion

Place of Birth

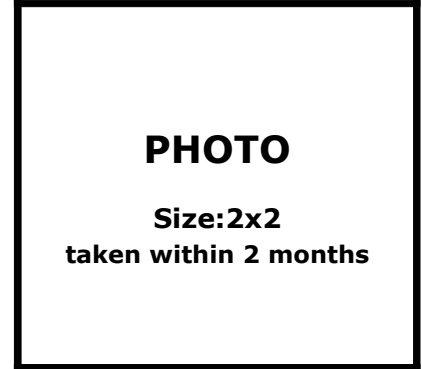
Permanent Address

No. (Include Bldg Name) Street

Subdivision Barangay

District/Municipality City/Province

Zip Code



Tel. No.

Cell. No.

Email Add.

Father's Name

Occupation

Mother's Name

Occupation

College

Name of School/University

Degree/Course

20

Year Grad.

School Location

Honors Received

Date NMAT Taken mm dd yy

Percentile Rank

Have you applied for admission to the Institute of Medicine, FEU-NRMF before?

No Yes When?

Have you been admitted into any medical school before?

No Yes When?

Where?

How do you intend to finance your medical studies?



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Applicant's Copy

Date Application No.

Name

Surname First Name M.I.

Amount Paid : _____

Receipt No. : _____

Date of Receipt : _____

School of Medicine Admission Office

Received by: _____ Date _____



Important Reminders

NON-REFUNDABLE & NON-TRANSFERABLE APPLICATION FEES
THIS FORM IS NOT FOR SALE
THIS FORM CAN BE REPRODUCED

FEU-NRMF Application Procedure for School of Medicine

- 1** Secure list of requirements at the Medicine Admission Office, UG3, IM Bldg. or at the FEU-NRMF Website.
- 2** Pay the application and processing fee to any RCBC Commercial Bank nationwide, Monday-Friday, 9:00-3:00pm, using the Bills Collection Slip or at the FEU-NRMF IM Bldg. Accounting Office, LG7, Monday-Friday, 8:00-4:00pm
- 3** Submit requirements for admission together with the accomplished application form with picture. Present receipt of application fee payment to the Medicine Admission Office

FEU-NRMF Checklist of Submitted Requirements

- Original Transcript or Scholasti Records (two (2) photocopies)
- Two (2) Certificates of Good Moral Character from two (2) former professors
- Certified True Copy of Birth Certificate from the National Statistics Office
- Marriage Certificate, when applicable
- Alien Certificate of Registration (ACR) for international students
- Three 2x2 photographs taken within the last six (6) months of application.
- One Long Brown Envelope

All information and documents asked for in this form should be submitted in order for this application to be processed. False information will invalidate this application and will result to immediate rejection of the applicant.

I hereby certify that I have read carefully all the foregoing and that all information given and documents submitted are true and correct to the best of my knowledge. If admitted, I shall abide by all the regulations and policies formally promulgated by the FEU-Dr. Nicanor Reyes Medical Foundation.

Signature of Applicant above Printed Name

Date

All announcements shall be posted on the Bulletin Board, first floor lobby, Institute of Medicine and at the FEU-NRMF website. Applicants are expected to report for interview on the scheduled date and time.

Selection is based on GWA from Bachelor's Degree. NMAT Percentile and Personal Interview.

Qualified applicants will be notified by e-mail or cellphone and may enroll after undergoing a complete Physical Examination.

All inquiries should be directed to the Chairman of the Admission Committee, FEU-NRMF School of Medicine