



UNIVERSITY OF THE PHILIPPINES IN THE VISAYAS
MASTER OF MARINE AFFAIRS PROGRAM
College of Fisheries
Miag-ao, Iloilo
Philippines

Please Attach
Recent 2" x 2" Photo
Here

APPLICATION FOR ADMISSION

Please type or print in English.

1. **MR./MS:** _____
(Family Name) (First Name) (Middle Name)
2. **PLACE OF BIRTH:** _____ **DATE OF BIRTH:** _____
(Month) (Day) (Year)
3. **CITIZENSHIP:** _____ **SEX:** _____ **CIVIL STATUS:** _____
4. **TEL. NO.** _____ **FAX NO.** _____ **E-MAIL:** _____
5. **MAILING ADDRESS:** _____
(No./Street) (City or Town)

(Province or State) (Postal Code or Zip Code) (Country)
6. **PRESENT OCCUPATION:** _____ **YEARS IN SERVICE:** _____
7. **JOB DESCRIPTION (In brief):** _____

8. **EMPLOYER/ADDRESS:** _____

9. ACADEMIC BACKGROUND (From secondary to highest college education)

Name of Institution	Inclusive Dates	Degree Obtained

10. SPECIAL TRAININGS AND SEMINARS/WORKSHOPS ATTENDED (Use additional sheet if necessary.)

Title of Seminar/Training	Inclusive Dates

11. PREVIOUS POSITIONS/OCCUPATIONS HELD (Use additional sheet if necessary.)

Position/Occupation	Institution	Inclusive Dates

12. WRITTEN PAPERS (Published and unpublished)

12. EXPECTED SOURCE OF FINANCIAL SUPPORT:

13. FUTURE PLANS AFTER COMPLETION OF THE DEGREE OF MASTER OF MARINE AFFAIRS.

I hereby certify upon my honor that everything written in this application form is true and correct. Any falsification in this document shall mean denial of my application to the Master of Marine Affairs Program.

Signature

Date

TO PROCESS THE APPLICATION, THE FOLLOWING MUST BE SUBMITTED:

1. Two copies of accomplished application forms with attached pictures (2" x 2");
2. Two copies of official transcript of records from all tertiary schools attended (bearing the seal of the college/university and the signature of the Registrar);
3. Two letters of recommendation from former professors or employers (forms are available);
4. Certificate of English proficiency for foreign students from countries where English is not the medium of instruction;

SUBMIT THE ABOVE DOCUMENTS TO:

**The Director
Institute of Fisheries Policy and Development Studies
College of Fisheries, U.P. in the Visayas
Miag-ao, Iloilo, Philippines 5023**

FOR INQUIRIES, YOU MAY CONTACT US AT:

Telephone Number: (63-33) 315-9030
Fax Number: (63-33)315-8353, (63-33) 338-1534
E-mail address: ifpds@iloilo.net

Note: The letters of recommendation should come from two different persons who can either be the supervisor, colleague or former employer



UNIVERSITY OF THE PHILIPPINES IN THE VISAYAS
MASTER OF MARINE AFFAIRS PROGRAM
College of Fisheries
Miag-ao, Iloilo
Philippines

RECOMMENDATION

NAME OF APPLICANT: _____
Family Name
First Name
Middle Name

NAME OF RECOMMENDING PERSON:	SIGNATURE:	DATE:
POSITION/TITLE:	INSTITUTION:	
MAILING ADDRESS:		
TELEPHONE NO.	FAX NO.	E-MAIL ADDRESS:

1. I have known the applicant as:

- Undergraduate student
 Community Worker
 Others, pls. specify
 Research assistant
 Work Subordinate

2. I have known the applicant for a period of _____.

3. Evaluation of the applicant's character (*Please check one*):

Characteristic	No basis	Poor	Average	Good	Outstanding
Intellectual Capacity					
Emotional Maturity					
Honesty and Integrity					
Resourcefulness					
Ability to Work With Others					
Managerial Skills					
Leadership Qualities					
Oral Communication Skills					
Written Communication Skills					

4. What do you consider as the applicant's talents or strengths in relation to graduate study?

5. What do you consider as the applicant's weaknesses or deficiencies in relation to graduate study?

6. Do you feel that the applicant is ready and qualified for graduate study at this time? Why?

**PLEASE DO NOT RETURN COMPLETED FORM TO THE APPLICANT.
MAIL DIRECTLY TO:**

**The Director
Institute of Fisheries Policy and Development Studies
College of Fisheries, U.P. in the Visayas
Miag-ao, Iloilo, Philippines 5023**