



2027 DOST-SEI SCIENCE AND TECHNOLOGY
UNDERGRADUATE SCHOLARSHIP APPLICATION FORM

FORM E4 – PRINCIPAL'S CERTIFICATION *(For Applicant under ALS)*

TO WHOM IT MAY CONCERN:

This is to certify that _____ has
(Name of Applicant)
completed/completing high school from _____
(Name of School)
_____ in SY _____ under the
(School Address)
Alternative Learning System (ALS) program.

Certified by (must be Principal):

Full Name: _____
Designation: _____
Signature: _____
Date Signed: _____

NOTE: Failure to properly complete the form (including applicant's name, name of school, school address, school year, principal's name, designation, signature, and date signed) will result in the disqualification of the application for the scholarship.