



2027 DOST-SEI SCIENCE AND TECHNOLOGY
UNDERGRADUATE SCHOLARSHIP APPLICATION FORM

FORM F – CERTIFICATE OF RESIDENCY

TO WHOM IT MAY CONCERN:

This is to certify that _____ is a **bonafide** resident
(Name of Applicant)

of _____ for ☐ **less than 4 years.**
(House No./Unit No./Lot/Block/Bldg., Compound/Street/Phase/Purok, Village/Subdivision, Barangay, City/Municipality, Province) ☐ **4 years or more.**
(Check appropriate box)

Certified by (must be Barangay Official/Principal):

Full Name: _____

Designation: _____

Signature: _____

Date Signed: _____

NOTE: The declared address above must be the same as the permanent address that the applicant indicated in the E-Application system.

Failure to properly complete the form (including the applicant's name and address, box for years of residency, principal's/barangay official's names, designation, signature, and date signed)) will result in the disqualification of the application for the scholarship.