UNIVERSITY OF SANTO TOMAS

The Graduate School

Office for Graduate Research (OGR),
Center for Continuing Professional Education and Development (CCPED)
and
Office of the Vice Rector for Research and Innovation (OVRRI)

"ETHICS IN RESEARCH INVOLVING HUMAN PARTICIPANTS FOR GRADUATE STUDENTS"
14 April 2018

REGISTRATION FORM

2x2 PHOTO

INSTRUCTIONS:

1. Fill out this form carefully and answer all information requested. Please write legibly. Please use a BLACK INK pen.
2. Attach a 2x2 current picture on the space provided at the right-hand corner of this form.

LEGAL NAME _____

Last Name | First Name | Middle Name

PERSONAL INFORMATION

Permanent Address

Street _____ Barangay _____ City _____

Province _____ Country _____

Telephone No. _____ Mobile No. _____

E-mail address _____

Date of Birth _____ Age _____ Place of Birth _____

Gender ☐ Male ☐ Female Citizenship _____ Religion _____

Civil Status ☐ Single ☐ Married ☐ Separated ☐ Widowed

If **Married**, Name of Spouse _____ Contact No. _____

Person to Contact in Case of Emergency _____ Contact No. _____

EDUCATIONAL BACKGROUND

	Name of School	Degree Earned	Year Obtained
Post Graduate			
College			

UST GRADUATE SCHOOL DETAILS

Year of Entry _____

Degree Program ☐ Master's ☐ Doctoral

Field of Specialization _____ (e.g. Business & Management, Humanities & Liberal Arts, Natural Science, Health Science, Social Science, etc.)

Area of Specialization _____ (e.g. Nursing, Commerce, Architecture, Chemistry, etc.)