

Ministry of Basic, Higher and Technical Education

Access to Higher and Modern Education  
Scholarship Program (AHME-SP)

Application Form

Attach here  
2x2 Picture  
with  
Name tag

INSTRUCTIONS: All fields with asterisk (\*) are required.

I. Eligibility Check.

* Are you a resident of Bangsamoro Autonomous Region in Muslim Mindanao (BARMM)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	* Do you belong to an underprivileged, disadvantaged, marginalized, poor or low- income sector or group?
* Are you a Senior High School (SHS) or Alternative Learning System (ALS) graduate?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	<input type="checkbox"/> Combined gross annual income of parents or guardian does not exceed Php 400,000.00
* Are you enrolled or enrolling in a BARMM Regional Priority Program?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	<input type="checkbox"/> An orphan
If yes, Please select your preferred program/course:			<input type="checkbox"/> A child of a solo parent
			<input type="checkbox"/> A person with disability (PWD) or child of a (PWD)
			<input type="checkbox"/> A member of Indigenous People (IP) or child of a (IP)
* Are you a recipient of any scholarship, grant, or program that offers financial benefits?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	<input type="checkbox"/> Guardian is a senior citizen
			<input type="checkbox"/> An Internally Displaced Person (IDP)

II. Personal Information.

* First Name	Middle Name	* Last Name	Suffix
* Date of Birth	* Citizenship	* Ethnic Affiliation	
* Place of Birth	* Gender	Male <input type="checkbox"/>	Female <input type="checkbox"/>
		* Civil Status	

III. Contact Information.

* Mobile Number	Alternative Number	E-mail Address	* Facebook Account
* Current Address	Region	Barangay	
	Province	Street	
	Municipality/City	Zip Code	
*Permanent Address	Region	Barangay	
	Province	Street	
	Municipality/City	Zip Code	

IV. Family Information.

* Father	Living <input type="checkbox"/>	Deceased <input type="checkbox"/>	* First Name	Middle Name	* Last Name	* Mobile Number
Birth Date		Birth Place		* Occupation	* Monthly Income	* Highest Educational Attainment
* Current Address						
* Mother	Living <input type="checkbox"/>	Deceased <input type="checkbox"/>	* First Name	Middle Name	* Last Name	* Mobile Number
Birth Date		Birth Place		* Occupation	* Monthly Income	* Highest Educational Attainment
* Current Address						

Note: In case of deceased parents or absence of parents.

* Guardian	* Relationship to Guardian	* First Name	Middle Name	* Last Name	* Mobile Number
Birth Date		Birth Place	* Occupation	* Monthly Income	* Highest Educational Attainment
* Current Address					

V. Basic Education Information.

<input type="checkbox"/>	Senior High School Graduate	* Name of school last attended:	
<input type="checkbox"/>	Alternative Learning System Graduate		
* School Type	<input type="checkbox"/> Private <input type="checkbox"/> Public	* School Address:	
* Year Graduation			
* Senior Higher School Track	<input type="checkbox"/> Art Design <input type="checkbox"/> Sport <input type="checkbox"/> Tech-Voc-Livelihood <input type="checkbox"/> Academic		
* Tech-Voc-Livelihood Strand	<input type="checkbox"/> Agri-Fishery Arts <input type="checkbox"/> Industrial Arts		
	<input type="checkbox"/> Home Economics <input type="checkbox"/> Information and Communications Technology		
* Academic Track	<input type="checkbox"/> Accountancy, Business, and Management (ABM) <input type="checkbox"/> Science, Technology, Engineering, and Mathematics (STEM)		
	<input type="checkbox"/> Humanities and Social Sciences (HUMSS) <input type="checkbox"/> General Academic Strand (GAS)		

VI. Higher Education Institution (HEI) Information.

* Name of school enrolled in or intended to enroll:		* Types of school	<input type="checkbox"/> Private
			<input type="checkbox"/> Public
* School address:		* Have you taken an admission test / exam in this school?	<input type="checkbox"/> Yes <input type="checkbox"/> No
* Preferred Degree Complete Program Course Example: (Bachelor of Science in _____)			

VII. Special Eligibility.

Do you belong to any of the following? Please select atleast one.

<input type="checkbox"/>	Combatant	<input type="checkbox"/>	Orphan of a Combatant	<input type="checkbox"/>	Other: Please specify:
<input type="checkbox"/>	Child of a Combatant	<input type="checkbox"/>	Surviving Spouse of a Combatant		

VIII. Documentary Requirements.

* Citizenship Document	* Financial Documents
<input type="checkbox"/> Philippine Statistics Authority (PSA) Birth Certificate.	<input type="checkbox"/> Latest Income Tax Return (ITR) of parents or guardian.
<input type="checkbox"/> Certificate of Residency from the Barangay with Applicant's Name.	<input type="checkbox"/> Certificate of Tax Exemption from the Bureau of Internal Revenue (BIR).
* Academic Documents	<input type="checkbox"/> Certificate of Indigency of both parents either from his/her Barangay or Department of Social Welfare and Development (DSWD).
<input type="checkbox"/> Form 138 for senior high school graduates before or in S.Y. 2024-2025.	<input type="checkbox"/> Case Study report from DSWD.
<input type="checkbox"/> Accreditation and Equivalency Test Passer Certificate for an Alternative Learning System (ALS) graduate before or in S.Y. 2024-2025.	<input type="checkbox"/> Latest copy of contract or proof of income (for children of Overseas Filipino Worker (OFW) and seafarers)
* Documents For Underprivileged, Disadvantaged, Marginalized, Poor and Low-income Sector or Group	
<input type="checkbox"/>	Single Parent ID from the Municipal or City Social Welfare and Development Office.
<input type="checkbox"/>	Certification of IP Parents from the Ministry of Indigenous People's Affairs (MIPA)
<input type="checkbox"/>	Person with Disability (PWD) ID from the Municipal or City Social Welfare and Development Office.
<input type="checkbox"/>	Senior Citizen ID of Parent/s or Guardian from the Municipal or City Office of the Senior Citizens Affairs (OSCA).
<input type="checkbox"/>	Certifications of Death of Parents or Certification of Being an Orphan from the Barangay or Municipality/City.
<input type="checkbox"/>	Certification of Being an IDP from the Barangay or Municipality/City.
* Documents for the Combatants, Their Children, Orphans, or Surviving Spouses	
<input type="checkbox"/>	Certification from the MILF and MNLF Peace Mechanisms that the applicant is a former combatant or his/her children.
<input type="checkbox"/>	Certification from MILF and MNLF Peace Mechanisms that the applicant is an orphan, his/her parent is a widow/widower due to the armed conflict, or is a surviving spouse.

IX. Declaration Form.

I hereby certify that foregoing statements are true and correct. Any misinformation or withholding of information will automatically disqualify me from the AHME Scholarship Program. I am willing to refund the financial benefits received if such information is discovered after the acceptance of the award.

I hereby express my consent for the MBHTE- Higher Education to collect, record, organize, update or modify, retrieve, consult, use, consolidate, block, erase or destruct my personal data as part of my information. I hereby affirm my right to be informed, object to processing, access and rectify, suspend or withdraw my personal data and be indemnified in case of damages pursuant to the Republic Act No. 10173 of the Philippines, Data Privacy Act of 2012 and its corresponding Implement Rules and Regulations.

Signature over Printed Name of Applicant

Date Accomplished

Checklist of required documents submitted (For AHME-SP staff use only)

Original	Photocopy	
<input type="checkbox"/>	<input type="checkbox"/>	Citizenship Documents.
<input type="checkbox"/>	<input type="checkbox"/>	Barangay Residency Certificate
<input type="checkbox"/>	<input type="checkbox"/>	Academic Documents.
<input type="checkbox"/>	<input type="checkbox"/>	Financial Documents.
<input type="checkbox"/>	<input type="checkbox"/>	Other Documents.
<input type="checkbox"/>	<input type="checkbox"/>	Special Eligibility Documents.