



**Ateneo de Zamboanga University**  
Senior High School Student Data Updating Form

Name of Student: \_\_\_\_\_ Grade & Section: \_\_\_\_\_

Religion: \_\_\_\_\_ Citizenship: \_\_\_\_\_

Address: \_\_\_\_\_

Contact No/s Student: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Contact No/s Parents: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Landline No/s: \_\_\_\_\_

Other Family/Household Members (aside from the parents) Authorized to Transact for the Student for S.Y. \_\_\_\_\_:

Name:	Relations to the Child (eg. Brother, Aunt, etc.)

**NOTE:** Those not in the list must present a Special Power of Attorney (SPA) when transacting for the student in ADZU SHS.

\_\_\_\_\_  
Parent/Official Guardian Name and Signature