



MARITIME ACADEMY OF ASIA AND THE PACIFIC–KAMAYA POINT  
**BOARD OF ADMISSIONS**  
Associated Marine Officers’ and Seamen’s Union of the Philippines – PTGWO - ITF  
Kamaya Pt., Brgy. Alas-asin, Mariveles, Bataan

2 X 2  
RECENT  
COLORED  
PICTURE

MIDSHIPMAN APPLICATION FORM

PERSONAL

Application No.		<input type="checkbox"/> AMOSUP Dependent, if yes kindly indicate the AMOSUP I.D. No. below.				Preferred Program	
		<input type="checkbox"/> Senior High School Graduating/Graduate <input type="checkbox"/> College Level/Graduate				<input type="checkbox"/> BSMT <input type="checkbox"/> BSMarE <input type="checkbox"/> BSMEET	
Last Name		Given Name		Middle Name		Middle Initial	
Home Address					ZIP Code	Region	
E-Mail Address			Contact Number			Gender	
						<input type="checkbox"/> Male <input type="checkbox"/> Female	
Birth date (ex. January 01, 2001)	Age	Status	Place of Birth	Religion	Height (cms/ ft)	Weight (lbs/ kg)	

FAMILY

Parents' Name	Age	AMOSUP I.D. No.	Occupation	Living/ Deceased
(Father)				
(Mother)				
Do you have any relatives abroad? Name?		Relationship	Rank/ Position	Company/ Location

EDUCATION

		Inclusive Date	Public School	Private School	Honors/ Awards Received	Gen. Ave.
		from	to			
Name of School: (SHS or College)						
Senior High School	Please check your corresponding track and indicate the strand/specialization:					
	<input type="checkbox"/> Academic / Strand: _____					
	<input type="checkbox"/> Technical-Vocational-Livelihood / Specialization _____					
	<input type="checkbox"/> Sports					
	<input type="checkbox"/> Arts and Design					
College	Degree Program/Course:					

I hereby certify that the above information are true and correct.

NOTE: The MAAP-Board of Admissions recognizes their responsibilities under the Republic Act No. 10173 (Act), also known as the Data Privacy Act of 2012, with respect of the data they collect, record, use, and consolidate from the applicant. The personal data to be obtained is for the purpose of admission and selection processing of MAAP and respective sponsoring companies.

By affixing your signature on this application form, you expressly give your consent to MAAP-Board of Admissions to collect, record, use, process and consolidate the personal data you voluntarily indicated herein for purposes above-mentioned.

Applicant's Signature / Date

DO NOT FILL - IN THIS PART  
(MAAP Use Only)

Application Status	Evaluator
<input type="checkbox"/> Accepted <input type="checkbox"/> Denied	
Place of Testing Center	Examination Date

FOR PROFILING, PLEASE SCAN THE QR CODE OR USE THE LINK BELOW TO FILL OUT THE FORM (FOR WALK-IN APPLICANTS ONLY)

LINK:  
<https://tinyurl.com/MAAP2030PROFILING>

SCAN ME



CAN BE PHOTOCOPIED. NOT FOR SALE.



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ENTRANCE EXAMINATION PERMIT

Name of Applicant		Preferred Program	
		<input type="checkbox"/> BSMT <input type="checkbox"/> BSMarE	
Place of Testing Center		Examination Date/ Time	
Evaluator's Remarks		Test Permit No.	Evaluator
<input type="checkbox"/> Paid <input type="checkbox"/> For Payment of Processing Fee			

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BRING THE FOLLOWING ON THE SCHEDULED EXAMINATION:

1. Test permit

2. Valid School ID

3. Black Ball Pen

4. Pencil (Mongol No. 2)

NOTE :

1. Calculator is not allowed during the examination.

2. Failure to submit application requirements may be a ground for disqualification.