



ENTRY FORM

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Thank you for
your interest in
joining
ArchiNEXT.

Kindly fill-up
the required
fields in this
entry form and
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with your
contest entry.

Full Name _____

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Year Level _____ Course _____

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Did you also apply as an ArchiNEXT Scholar? Yes _____ No _____

I hereby certify that the above details are true and correct and have understood and agree with the guidelines in joining the contest. Likewise, I also understand that any form of plagiarism will disqualify me from the contest.

Kindly send this entry
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Name Of Contestant / Signature

Date

Approved By:

Chair Of The Department Of Architecture
/ Dean Of The College Of Architecture

Uapsa Chapter President

**CHALLENGES NEVER END.
JOIN ARCHINEXT 2021.**

