



UNIVERSITY OF SANTO TOMAS

Application for Graduation



Student Number: _____

(PRINT IN FULL) Last Name First Name Middle Name Auxiliary Names
(e.g., Sr., Jr., I, II, etc.)

Candidate for the Degree of _____ Major: _____ As of _____

Mailing Address: _____ Zip code _____

Telephone No.: _____ Cell phone No.: _____ E-mail Address: _____

Sex: _____ Birth Date: _____ Birth Place: _____ Citizenship: _____

Father: _____ Occupation: _____

Mother: _____ Occupation: _____

Primary (Grades I – IV) Completed at _____, 20____

Intermediate (Grades V – VI) Completed at _____, 20____

Secondary Yr. 1/Junior HS Grade 7 Completed at _____, 20____

Secondary Yr. 2/Junior HS Grade 8 Completed at _____, 20____

Secondary Yr. 3/Junior HS Grade 9 Completed at _____, 20____

Secondary Yr. 4/Junior HS Grade 10 Completed at _____, 20____

Senior HS Grade 11 Completed at _____, 20____

Senior HS Grade 12 Completed at _____, 20____

ADMISSION STATUS/COLLEGE ATTENDANCE:

☐ Shifter from _____

☐ Transferee from _____

☐ Second Degree from _____

CROSS – ENROLLMENT RECORDS (Outside the University)

Course (Subject)	College/University	Term/Special Term
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

(Continued at the back)

IMPORTANT: Every candidate for graduation in a given academic year is required to accomplish this Form 24 and submit it to the Office of the Registrar in the month of SEPTEMBER.

I understand: (1) that in due time, I have to inquire from the clerk in charge at the Office of the Registrar the status of this application; (2) that unless my Form 137-A and other credentials are received by the Office of the Registrar and (3) that unless I have been cleared of financial and property obligations to the University not later than the last week of classes before the final examinations for graduating students, I will not be allowed to join the graduation ceremonies.

Authorization for the Office of the Registrar

In consonance with the Data Privacy Act of 2012, I authorize the Office of the Registrar of the University, to issue necessary certification on the authenticity of my records to a third party that may be interested in the verification of my completed degree. Such authorization is valid until I provide a written notice of revocation. Hence, all other verifications thereon shall then require my written authorization.

Signature of Candidate over Printed Name

Date: _____

Note:

The personal information/data provided at first enrollment are part of the permanent record. As such they must be in conformity with the data in the Birth Certificate. In case the data provided do not conform with the Birth Certificate, said data cannot be corrected through this application for graduation. Instead, the student should file a request for correction at the Office of the Registrar. The request must be supported with a copy of the Birth Certificate issued by the Philippine Statistics Authority.