

SENIOR HIGH SCHOOL STUDENT PERMANENT RECORD

LEARNER'S INFORMATION

LAST NAME: **ASPIRAS** FIRST NAME: **PATTY** MIDDLE NAME: _____
 LRN: **02-1818-01509** Date of Birth (MM/DD/YYYY): _____ Sex: _____ Date of SHS Admission (MM/DD/YYYY): _____

ELIGIBILITY FOR SHS ENROLMENT

☐ High School Completer* Gen. Ave: _____
 Date of Graduation/Completion (MM/DD/YYYY): _____

☐ Junior High School Completer Gen. Ave: _____
 Name of School: _____ School Address: _____

☐ PEPT Passer** Rating: _____
 Date of Examination/Assessment (MM/DD/YYYY): _____

☐ ALS A&E Passer*** Rating: _____
 Name and Address of Community Learning Center: _____

☐ Others (Pls. Specify): _____

**High School Completers are students who graduated from secondary school under the old curriculum*

***ALS A&E - Alternative Learning System Accreditation and Equivalency Test for JHS

****PEPT - Philippine Educational Placement Test for JHS**

SCHOLASTIC RECORD

SCHOOL: _____ SCHOOL ID: _____ GRADE LEVEL: _____ SY: _____ SEM: _____
TRACK/STRAND: _____ SECTION: _____

Indicate if Subject is CORE, APPLIED, or SPECIALIZED	SUBJECTS	Quarter		SEM FINAL GRADE	ACTION TAKEN
General Ave. for the Semester:					

REMARKS:

Prepared by: _____ Certified True and Correct: _____ Date Checked (MM/DD/YYYY): _____

Signature of Adviser over Printed Name

REMEDIAL CLASSES Conducted from (MM/DD/YYYY): _____ to (MM/DD/YYYY): _____ SCHOOL: _____ SCHOOL ID: _____

Indicate if Subject is CORE, APPLIED, or SPECIALIZED	SUBJECTS	SEM FINAL GRADE	REMEDIAL CLASS MARK	RECOMPUTED FINAL GRADE	ACTION TAKEN

Name of Teacher/Adviser: _____ Signature: _____

SCHOOL: _____ SCHOOL ID: _____ GRADE LEVEL: _____ SY: _____ SEM: _____

TRACK/STRAND: _____ SECTION: _____

Indicate if Subject is CORE, APPLIED, or SPECIALIZED	SUBJECTS	Quarter		SEM FINAL GRADE	ACTION TAKEN
General Ave. for the Semester:					

REMARKS

Prepared by: _____ Certified True and Correct: _____ Date Checked (MM/DD/YYYY): _____

Signature of Adviser over Printed Name

REMEDIAL CLASSES Conducted from (MM/DD/YYYY): _____ to (MM/DD/YYYY): _____ SCHOOL: _____ SCHOOL ID: _____

Indicate if Subject is CORE, APPLIED, or SPECIALIZED	SUBJECTS	SEM FINAL GRADE	REMEDIAL CLASS MARK	RECOMPUTED FINAL GRADE	ACTION TAKEN

Name of Teacher/Adviser: _____ Signature: _____