

CLEARANCE FOR GRADUATING STUDENT

<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>
----------------------	----------------------	---	----------------------	----------------------	----------------------	---	----------------------	----------------------

STUDENT IDENTIFICATION NUMBER

ACADEMIC YEAR	TERM
---------------	------

STI CAMPUS	PROGRAM CODE	YEAR LEVEL	STUDENT TYPE <input type="checkbox"/> REGULAR <input type="checkbox"/> IRREGULAR	CONTROL NUMBER
LAST NAME		FIRST NAME		MI
Signature of Student	Date Signed	Parent or Guardian (Name & Signature)		DATE SIGNED
DEPARTMENT	SPECIFIC ACCOUNTABILITIES			CLEARED BY/ DATE SIGNED
COMPUTER LABORATORY				
LIBRARY				
CASHIER				
GUIDANCE COUNSELOR				
DEAN				

Received by:	Date
Registrar's signature over printed name	

SCHOOL'S COPY

CLEARANCE FOR GRADUATING STUDENT

<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>
----------------------	----------------------	---	----------------------	----------------------	----------------------	---	----------------------	----------------------

STUDENT IDENTIFICATION NUMBER

ACADEMIC YEAR	TERM
---------------	------

STI CAMPUS	PROGRAM CODE	YEAR LEVEL	STUDENT TYPE <input type="checkbox"/> REGULAR <input type="checkbox"/> IRREGULAR	CONTROL NUMBER
LAST NAME		FIRST NAME		MI
Signature of Student	Date Signed	Parent or Guardian (Name & Signature)		DATE SIGNED
DEPARTMENT	SPECIFIC ACCOUNTABILITIES			CLEARED BY/ DATE SIGNED
COMPUTER LABORATORY				
LIBRARY				
CASHIER				
GUIDANCE COUNSELOR				
DEAN				

Received by:	Date
Registrar's signature over printed name	

STUDENT'S COPY