

UNIVERSITY OF SANTO TOMAS OFFICE OF THE REGISTRAR



LETTER OF AUTHORIZATION

1	
to execute and perform all or any acts, deeds, matters and thing application, processing, and receiving from the OFFICE OF THE DOF SANTO TOMAS, to wit:	•
HEREBY GIVING AND GRANTING unto my representative full por all and every act requisite or necessary to carry into effect the forego purposes as I might or could lawfully do if personally present, revocation, and hereby ratifying and confirming all that he/she shall virtue hereof. With this is a photocopy of my valid identification care	ing powers, as fully to all intents ar with full power of substitution ar I lawfully do or cause to be done by
IN WITNESS WHEREOF, I have hereunto set my hand this	day of 20 , i
Conforme:	
Signature over Printed Name	

UST:S033-00F067