

	TECHNOLOGICAL UNIVERSITY OF THE PHILIPPINES CAVITE CAMPUS Carlos Q. Trinidad Avenue, Salawag, Dasmariñas City, Cavite, Philippines Telefax: (046) 416-4920 Email: cavite@tup.edu.ph Website: www.tup.edu.ph	
OCR	STUDENTS' CLEARANCE FORM	Page 1/1

NAME: _____ (Print) <i>Surname</i> <i>First</i> <i>M.I</i>		Date Filed: _____
PRESENT ADDRESS: _____		
Date Admitted in TUPC: _____	Amount Paid: _____	
Course & Major: _____	Official Receipt No.: _____	
High School where graduated: _____	Have you requested for the checked items below previously: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Did you graduate at TUPC? : <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please indicate the date before its respective item(s): _____	
If yes, please indicate the date: _____	Last Term in TUPC: _____	
Number of Terms in TUPC: Sem./Sum.: _____	Purpose of Request: _____	

<input type="checkbox"/> Honorable Dismissal	<input type="checkbox"/> Diploma	<input type="checkbox"/> Others (please specify): _____
<input type="checkbox"/> Transcript of Records	<input type="checkbox"/> Certification	

1. ACCOUNTANT: _____	3. COURSE/SHOP ADVISER: _____
2. DEPARTMENT HEADS	4. CAMPUS LIBRARIAN: _____
a. LIBERAL ARTS: _____	5. GUIDANCE COUNSELOR: _____
b. MATH & SCIENCES: _____	6. HEAD OF STUDENT AFFAIRS: _____
c. DPECS: _____	7. ASST. DIR. FOR ACADEMIC AFFAIRS: _____
d. INDUSTRIAL TECHNOLOGY/ INDUSTRIAL EDUCATION/ENGINEERING: (Please underline the appropriate department)	Note: 1. This clearance form should be accomplished within the semester it was initially requested. 2. Not valid with alteration.
