

	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: <u>AYALA, QUYN ALI VASQUEZ</u>		Date Filed: <u>2022-11-24</u>
(Print) Surname	First	M.I
PRESENT ADDRESS: <u>VENIAM LABORIOSAM IPSA EXERCITATIONEM NIHIL CONSEQUAT AUT APERIAM CONSEQUAT BEATAE EX CONSECTET</u>		
Date Admitted in TUPC: <u>2022-11-09</u>		<div>Amount Paid: _____</div> <div>Official Receipt No.: _____</div> <div>Have you requested for the checked items below previously: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</div> <div>If yes, please indicate the date before its respective item(s): _____</div> <div>Last Term in TUPC: _____</div> <div>Purpose of Request: _____</div>
Course & Major: <u>BET-Power Plant Technology</u>		
High School where graduated: <u>WEWEWEWFEW</u>		
Did you graduate at TUPC? : <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
If yes, please indicate the date: _____		
Number of Terms in TUPC: Sem./Sum.: _____		

<input checked="" 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: <u>[Signature]</u>	3. COURSE/SHOP ADVISER: <u>[Signature]</u>
2. DEPARTMENT HEADS	
4. CAMPUS LIBRARIAN: <u>ANTHONY, GERALDINE NICHOLE CORTEZ</u> <small>APPROVED *Required Live Signature</small>	
a. LIBERAL ARTS: <u>CROSBY, KIRESTIN IAN MERCER</u> <small>APPROVED *Required Live Signature</small>	5. GUIDANCE COUNSELOR: <u>[Signature]</u>
b. MATH & SCIENCES: <u>MCLEAN, JOHN MALCOLM THOMPSON</u> <small>APPROVED *Required Live Signature</small>	6. HEAD OF STUDENT AFFAIRS: <u>STEPHENSON, KNOX ROGAN PATRICK</u> <small>APPROVED *Required Live Signature</small>
c. DPECS: <u>MCKEE, BRANDON RINAH SAMPSON</u> <small>APPROVED *Required Live Signature</small>	7. ASST. DIR. FOR ACADEMIC AFFAIRS: <u>LEVY, LESLIE LILLIAN PATEL</u> <small>APPROVED *Required Live Signature</small>
d. INDUSTRIAL TECHNOLOGY/ INDUSTRIAL EDUCATION/ENGINEERING: (Please underline the appropriate department)	<div>Note: 1. This clearance form should be accomplished within the semester it was initially requested. 2. Not valid with alteration.</div>
<u>[Signature]</u>	