



Republic of the Philippines
Taguig City University
Gen. Santos Avenue, Central Bicutan Taguig City



Office of the University Registrar

PERSONAL INFORMATION

Last Name:	Sex: () Male () Female
First Name:	Birthdate:
Middle Name:	Birthplace:
Address:	
Contact No. _____	Email address: _____

ACADEMIC INFORMATION

Student No. _____	Course/Title/Degree: _____
Did you graduate from TCU? () Yes, I graduated on _____	() No, my last enrolment was on A.Y _____ - () 1 st sem. / () 2 nd sem./ () Summer

DOCUMENT TYPE

(Undergraduate and Graduate School)

- () Grades () Unit Earned () Graduation/Honors () Candidate for Graduation () CAV
() COR () GWA () ADMISSION () English is a medium of Instruction
() Honorable Dismissal

Purpose: _____

DO NOT FILL OUT THIS COLUMN

TO BE ASSESSED BY THE OFFICE OF THE UNIVERSITY REGISTRAR

REQUIREMENTS	SIGNATURE OVER PRINTED NAME	RECEIVED		REMARKS
		Date	Time	
() Form 137				
() ALS Certificate (if applicable)				
() TOR (if transferee)				
() Honorable Dismissal (if applicable)				
() NSO/PSA Birth Cert.				
() Photocopy of marriage certificate (for married women)				
Others: _____				

CONDITIONS AND REMINDERS

- Only the owner of the records is allowed to request and claim documents relative to his/her school records. However, request and/or claim of documents have representative/Posey can only allow upon presentation of the following:
 - *if representative is an immediate family member
formal authorization letter daily sign by the owner of the credential/s and
2 valid ID's of both the owner of the credential/s and the representative.
 - *if representative is not an immediate family member
notarize special power of attorney from the owner of the credential/s and
1 valid ID's of both the owner of the credential/s and the representative.
- Fill out the request form legibly and completely. Only forms with complete data shall be processed
- The university reserves the right to withhold, deny or cancel any request for issuance of documents pending submission of all credentials and academic requirements.
- The registrar's staff will inform you through call or text should there be any deficiency in requirements/credentials. You may also call our office phone no. 0961 887 2644
- Documents not claimed after sixty (60) days shall be destroyed.

CONFORME

I have read and understood all the condition and reminders in connection with this request and agreed to comply with them.

Signature Over Printed Name

Date



Taguig City University
OFFICE OF THE UNIVERSITY REGISTRAR
Gen. Santos Avenue, Central Bicutan Taguig City
Phone: 8635 8300 Local: 7202/ 0961-887-2644



DOCUMENTS CLAIM STUB

Requested Document/s: _____ Students Name: _____ Course/Title/Degree: _____ Student No.: _____	Request Date: _____ Release Date: _____ Issued by: _____
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