

SCHOOL CREDENTIAL REQUEST AND CLEARANCE SLIP

PERSONAL DATA (pls. fill out completely)

Student #: _____
Name of Student: _____

Date filled: _____

This Section is to be filled-out by the Registrar's staff only

For Good Moral Certificate Request:

Semester & SY started: _____
Semester & SY graduated/stopped: _____
Status: _____

CLEARANCE CERTIFICATION

(To be filled-out by concerned offices)

This is to certify that the student whose name appeared here is cleared of any financial obligation from offices below.

FSUU Bookstore:

Signature over Printed Name

Office of Admission & Scholarships:

Signature over Printed Name

For Board Exam Purposes:

Signature over Printed Name

Thesis Clearance:

Signature over Printed Name

Data Administration Office:

Old Account (OPIS) Amount ₱ _____

Signature over Printed Name

Cashier:

OR#: _____
Amount Paid: _____
Date Paid: _____
(attach O.R.)

Signature over Printed Name

