

UNIVERSITY OF MAKATI

JP Rizal Ext. West Rembo, Makati City

ACCOUNTING OFFICE

RESIDENCY VERIFICATION FORM

RVF No. 2016-01-

To be filled up by the student

Date: _____

Name: _____

Age: _____

Address: _____

Voter of Makati

☐ YES

☐ NO

REQUIREMENTS:

Voter of Makati:

■ For 18 years old and above

☐ Voter's ID or Latest Voter's Certificate (COMELEC)

■ For 17 years old and below

☐ SK Voter's ID / Certificate (COMELEC)

☐ Birth Certificate

OR

☐ Voter's ID or latest Voter's Certificate (COMELEC) of qualified guardian (parents, brother or sister)

☐ Birth Certificate of the student and his / her sibling (brother / sister)

☐ Marriage contract of his / her sister (if married)

Non-Voter of Makati:

NONE

Verified By:

Name: _____

Date: _____

Time: _____

Noted:

AURORA F. SERRANO

Concurrent Head, Accounting Office

Umak-AO-QF-2, Rev. 2

01 April, 2015