



UNIVERSITY OF SANTO TOMAS
COLLEGE OF INFORMATION AND COMPUTING SCIENCES



WAIVER

This is to signify my consent to include my name with my contact details indicated below, in the list of the senior class of AY 2025 to 2026 of the College of Information and Computing Sciences. It is to my knowledge that this list is intended for distribution by the College of Information and Computing Sciences' Technology Program Coordinator to the interested companies that are collaborating with the University for our OJT recruitment and employment purposes.

NAME (in print) Feliciano, Chrizelle C.

: _____

STUDENT NO. : 2022166417

SIGNATURE :

DATE SIGNED : January 11, 2025

