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|  | | Reference No.: SPC-FO-REG-11 | | Effectivity Date: January 05, 2025 | | | | | | Revision No.: 01 |
| **REQUEST AND CLAIM SLIP FORM** | | | | | | | | | | |
| Name of Student: | | |  | | | | | | | |
| Program: | | |  | | | | Year Graduated: | |  | |
| Date of Filing: | | |  | | | | Claim Date: | |  | |
| Official Receipt No.: | | |  | | | | Contact Number: | |  | |
| **REQUESTED DOCUMENT/S** | | | | | | **NUMBER OF PIECES** | | **UNIT COST**  **(in Php)** | | **AMOUNT** |
|  | Diploma | | | | |  | | 400.00 | |  |
|  | Certificate of Transfer Credentials | | | | |  | | 100.00 | |  |
|  | Form 137 | | | | |  | | 100.00 | |  |
|  | Certification | | | | |  | | 30.00 | |  |
|  | Transcript of Records | | | | |  | | 50.00 per page | |  |
|  | Authentication | | | | |  | | 20.00 per page | |  |
|  | Second Copy of Registration Form | | | | |  | | 15.00 | |  |
|  | Graduation Fee | | | | |  | | 1,000.00 | |  |
|  | Others, please specify: | | | | |  | |  | |  |
| **TOTAL AMOUNT TO BE PAID** | | | | | | | | | |  |
| Purpose/s: | | |  | | | | | | | |
| Requested by:  Signature over Printed Name of Student Date Signed: | | | | | Checked by:  Signature over Printed Name of Registrar’s Staff Date Signed: | | | | | |

Claim Slip

|  |  |  |  |  |  |
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| Name of Student: |  | | | | |
| Program: |  | | Year Graduated: | |  |
| Date of Filing: |  | | Claim Date: | |  |
| Requested Document/s: |  | | Number of Copies: | |  |
| REMINDERS:   * In claiming a document through a representative, Authorization Letter and Valid IDs of Claimants and Requestor are required. * Provide 2 pieces of documentary stamps for each copy of requested documents EXCEPT for authentication. | | Contact Numbers: | | | |
| (+63) 9171090015 | | spc.admin@sanpablocolleges.edu.ph | |
| Checked by:  Signature over Printed Name of Registrar’s Staff Date Signed: | | | | | |