Subject: **List of Expenses, Payments, and Budget for the Upcoming Graduation**

I, hereby give my consent for my child,

, to attend the meeting scheduled on **SEPTEMBER 29, 2025, at 1:00 PM, in CEBU TECHNOLOGICAL UNIVERSITY NAGA - EXTENSION CAMPUS**

**2nd FLOOR HALLWAY**. I authorize him/her to participate fully in the meeting, including engaging in selections, voting, and discussions. I agree to honor and abide by the decisions made by him/her as if I had made them myself.

Please feel free to contact me at should you require any additional information or have any concerns.

Thank you for your understanding and cooperation. Sincerely,

PARENT’S SIGNATURE OVER PRINTED NAME

Note: Parents, please attach a photocopy of your ID (with Signature) to validate the signature in the waiver.

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