CENTRO ESCOLAR UNIVERSITY Manila * Makati * Malolos EXIT CLEARANCE				
NAME: Last Nam	e First Name	Middle Name	Signature:	Date Requested:
OBREGON	MAXINE ANN EUGENIE	SIMPAS	MSO(SGD)	2023-03-30
School Nursing Department	Student No: 2018-20355	Email Add.: maxinesobregon@gmail.com	Contact No.:	Due Date:
Course / Degree		Year Graduated / Year Level:		
Bachelor of Science in Nursing (Stem)		2023		
	TO BE	SIGNED BY		
RECOMMENDED FOR ACCOUNTING DEPT.	/SECTION		Accountant in-charge We ry B. Mercado University Registrar/Registrar	
Remarks:				
Copy to: OUR/Registrar, St	udent			
ROF 033 Rev 1				
VEAI				