

representative with this claim slip.)

## PAMANTASAN NG LUNGSOD NG MAYNILA



(University of the City of Manila) General Luna cor. Muralla Sts., Intramuros, Manila

APPLICATION FOR: (Please check)	<ul> <li>□ CERTIFICATE OF GRADUATION</li> <li>□ CERTIFIED COPY OF DIPLOMA (No. of Copies:)</li> <li>□ DIPLOMA CORRECTION OR CHANGE OF NAME</li> </ul>	
Note that your signature below must be notarized		
Name:		Date Applied:
Address:		
Telephone/Mobile:		E-mail Address:
Degree and Date of Graduation:		
College:		
Name on Diploma:		Male: Female:
Supporting Documents (if applicable):		
Reason for the Request:		
I hereby certify that the above statements are true. I understand that the Pamantasan ng Lungsod ng Maynila reserves the right to institute any appropriate legal or other proceedings for misrepresentation of the information stated above, or in the case of fraud.		
Signature Over Printed Name:		
Date:		
I hereby certify that this applicant has shown proof of identity sufficient to establish that he or she is the person named above.		
NOTARY PUBLIC		
Doc. No,: Page No: Book No,: Series of		
CLAIM SLIP		
This part shall be filled-out by Pl	LM personnel.	
Received by:		Date:
Releasing Date:		