



Republic of the Philippines
CAVITE STATE UNIVERSITY
Imus Campus
 Imus, Cavite

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APPLICATION FOR GRADUATION

Student No. 202110211

Personal Information

Name: KIMBERLY LOUISE MANZANO RAVALO Sex: FEMALE Age: 24
 (First Name) (Middle Name) (Family Name)
 Date of Birth: FEBRUARY 1, 2001 Phone No.: 09083144520
 Place of Birth: DASMARIÑAS, CAVITE
 Permanent Address: BLOCK 25 LOT 17 PHASE 2 WINDWARD HILLS SUBDIVISION DASMARIÑAS, CAVITE

Educational Background

High School: DASMARIÑAS INTEGRATED HIGHSCHOOL – SPECIAL SCIENCE CLASS Year Attended: 2015-2019
 Address: CONGRESSIONAL SOUTH AVE., BUROL I, DASMARIÑAS CITY, CAVITE
 Senior High School: STI COLLEGE DASMARIÑAS Year Attended: 2019-2021
 Address: N. GUEVARRA STREET, ZONE 1, DASMARIÑAS, 4114 CAVITE
 School/College attended other than Cavite State University-Imus Campus
N/A Year Attended: N/A
 Address: N/A

Date of Admission to CvSU: FIRST SEMESTER 2021-2022

Semester and Academic Year Attended

First Semester	<u>2021-2022</u>	Second Semester	<u>2022-2022</u>	Summer	<u></u>
First Semester	<u>2022-2023</u>	Second Semester	<u>2023-2023</u>	Summer	<u>2023-2023</u>
First Semester	<u>2023-2024</u>	Second Semester	<u>2024-2024</u>	Summer	<u></u>
First Semester	<u>2024-2025</u>	Second Semester	<u>2025-2025</u>	Summer	<u></u>

Subjects Currently Enrolled:

<u>ITEC 199</u>	Unit
<u>Total</u>	<u>6</u>

Applying for Latin Honors? ☒ Yes ☐ No

If Yes, please indicate the lowest grade obtained in CvSU. 2.50

For transferee, kindly indicate the lowest grade obtained from previous school. N/A

I have the honor to apply for graduation in the course leading to the degree of BACHELOR OF SCIENCE IN INFORMATION TECHNOLOGY major in this Graduation 2025.

It is understood that I shall be entitled to a diploma / certificate / award if and after I have satisfactorily completed all the requirements for graduation including but not limited to the submission of my bound manuscript / special problem / narrative reports and clearance for my graduation in this University.

KIMBERLY LOUISE MANZANO RAVALO

Printed name and Signature of Applicant

Noted:

JOSE LERIO V. BATULA, MIT
 Registration Adviser

ZARA JANE S. CAMARCE
 Campus Registrar

Recommending Approval:

GRACE S. IBAÑEZ, MSCS
 Department Chairperson

Date:

ARMY GRACE B. DESINGAÑO, PHD.
 OIC, Office of the Campus Administrator

Date: