

## LEYTE NORMAL UNIVERSITY Tacloban City OFFICE OF THE VICE PRESIDENT FOR STUDENT DEVELOPMENT AND AUXILIARY SERVICES vpsdas@lnu.edu.ph

053 888 0855 local 260



Management System ISO 9001:2015



## PARENTS'/GUARDIANS' PERMIT FORM

1st Semester.

PLEASE TAKE NOTE OF THE FOLLOWING:	
Please fill out this form in BLOCK LETTERS and in triplicate.	
ALL sections MUST BE FILLED OUT COMPLETELY.	
3. Permits for Educational Tour/Field Trip purposes and for a pa	rticipant who is a minor should be notarized.
4. If the student involved is a MINOR, BOTH parents MUST sign to	the permission form.
To Whom This May Concern:	V. 40-17
I'WE ARMENIO D- POHLANGE	College of ARTS & UCIEN OF
CHENTER P. PON 5116, a student under the	College of ARTS & UCIENCES
(Student's Name) with Student Number 19019 (O , hereby give/s permission to my	y/our daughter/son/ward to participate/to attend the
in LEXT	HORBAL UNIVERSITY on 19 00 121
(Event/Activity)	(Place/Venue) (Date)
I/We was/were made aware that the faculty member/s listed below	
recautionary measures are undertaken to ensure the safety of my/our chi	
Printed Name of Faculty	Faculty Signature
1	
2.	
3.	
4.	
5	
Further, I/we fully understand that I/we cannot hold the university neidents beyond our control.	administrators and instructors liable for any unforeseen/untoward
IN WITNESS WHEREOF, I'We have hereunto set my/our hand.	today DET 1 n 2000 in
IN WITNESS WHEREOF I we have hereunto set my/our hand	(Date) (Place)
hilippines.	(Trace)
ARY ENTO D. BONDAHE	
Name and Signature of Parent/Guardian #1	Name and Signature of Parent/Guardian #2
pro1.39 7 141110.12.	
Complete Address	Complete Address
70010000	
Contact Number	Contact Number
ID Tons & Mumber	TO TO A NO. 1
ID Type & Number	ID Type & Number
JU	RAT
SUBSCRIBED AND SWORN TO before me this	1 8 20221 in tAC. CITY
	(Date) (Place)
hilippines, affiant/s exhibiting to me the above-mentioned identification	card/s as competent evidence of identity
OC. No. 417	2009
AGE No. 694	ATTY EDWIN Y. CHUA
OOK No. 3/5	THUA T. BHUA
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G No. 2021-06-62

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