



454 GRC Bldg, Rizal Ave. Ext. Corner 9th Avenue, Caloocan City
Telefax No.: 361-6330

ENROLLMENT CLEARANCE

| Student Name | | Student No.: | Course: | Date |
|--|------------------------------|-------------------|-----------|-------------|
| () 1st () 2nd () Summer School Year: | | Permanent Address | | Contact No |
| DEPARTMENT/OFFICE | NAME OF AUTHORIZED SIGNATORY | | SIGNATURE | DATE SIGNED |
| Students Affairs | | | | |
| General Services | | | | |
| Library | | | | |
| Cashier | | | | |
| Registrar's Office | | | | |

This is to certify that above name has been cleared in all requirements and obligations of this department/office