

INTERNAL CLEARANCE
Dept of Pure & Applied Chemistry

Name: Borinaga, Jhon Lester L.
Purpose: Enrollment Withdrawal & transfer
Effective Date: _____

Faculty:

1. BANDIBAS, KEVIN NICK S. [Signature]
2. BANDIBAS, YHENA L. [Signature]
3. INSIK, MARIA ROBELYN A. [Signature]
4. JANSALIN, JACOB GLENN F. [Signature]
5. LINA, VIVIAN P. [Signature]
6. PURAY, JAILENN JANNARAINA [Signature]
7. RAMAL, ALLAN A. [Signature]
8. SALAS, YSSAKHAR A. [Signature]
9. SALAS, Felix M. [Signature]
10. TRIPOLE, MARK RYAN R. [Signature]
11. VASQUEZ, Atoz A. [Signature]

Administrative Staff:

1. ABAPO, Jane M. [Signature]
2. APAS, THELMA P. [Signature]
3. AGAD, NOREVE JEAN M. [Signature]
4. MECAIRAN, TERESITA T. [Signature]

Approved:

[Signature]
ELIZABETH S. QUEVEDO
Head, DoPAC



CLEARANCE

INSTRUCTION:

A student who is graduating, transferring, leaving the University or applying for employment is required to accomplish this clearance form in six (6) copies.

Student Number	Last Name	First Name	Middle Name	Course and Year
22-1-00293	Borinaga	Jhon Lester	Labajo	BS Chem - 1

Home Address : BRGY - DON POTENCIANO LARRAZABAL, ORMOG CITY, LEYTE

Telephone Number : _____

Cellphone Number : 09317075685

Number of Semester in VSU: 1

[] Graduating [X] Not Graduating

Date Admitted in VSU : _____ Last term enrolled in VSU: _____

Date: February 27, 2023

The University President

Visayas State University
Visca, Baybay City, Leyte

Sir:

I am passing this clearance to find out and settle all my academic, monetary, property responsibilities and administrative/disciplinary cases to this University.

YSSAKHAR A. SALAS

Signature of Academic Adviser
Over Printed Name

JHON LESTER D. BORINAGA

Signature of Student

REASONS FOR CLEARING

- [] Graduating (Specify degree/course) _____
[] Can't get along with students
[] Can't get along with teachers
[] Death of parent or guardian

- [] Financial difficulty
[] Low academic grades
[] Poor/Failing health
[] Find academic work difficult

- [] Accepting an outside job
[X] Other reasons (write below)
stopping this semester
and transfer to nearer
university

WE CERTIFY THAT this student is cleared of academic, monetary, property and administrative/disciplinary cases/responsibilities.

Signature Over Printed Name

1. ELIZABETH S. QUEVEDO
Department Head

4. VICENTE A. GILOS
University Librarian

7. MANOLO B. LORETO, JR.
Dean of Students

2. MA. THERESA P. LORETO
College Dean
(for Undergraduate Students only)

5. NICK FREDDY R. BELLO
OIC University Accountant

8. EDGARDO E. TULIN
University President

3. _____
Graduate School Dean
(for Graduate Students only)

6. MARWEN A. CASTAÑEDA
University Registrar