



APPLICATION FOR GRADUATION FORM

Date _____

The University Registrar
Visayas State University
Visca, Baybay City, Leyte 6521-A

Through: The Dean
College of ARTS AND SCIENCES
/Graduate School Dean

Sir/Madam:

I have the honor to apply for graduation as of _____
for the degree of BACHELOR OF SCIENCE IN CHEMISTRY
major in _____

Very Truly Yours,

AUBREY B. ARCILLAS
Printed Name and Signature of Applicant

19-1-01238
Student Number

09208278347
Cell phone Number

Telephone _____

aubreyarcillas27@gmail.com
Email Address

A. Title of [X] Thesis [] Case Study [] Special Problem [] Field Practice [] Narrative Report

PHYSICO-CHEMICAL PROPERTIES OF WATER FROM
DAQUITAN-MARABONG RIVER DULAG, LEYTE

B. Secure approval from your Thesis/Case Study/Special Problem/
Field Practice/ Narrative Report Adviser.

VIVIAN P. LINA
Printed Name and Signature of Thesis/SC/SP/FP/NR Adviser

C. Subject(s) enrolled this (current) semester:

Course Number and Description	Units	Course Number and Description	Units
CHEM 193 BIOCHEMISTRY C3	1.0		
CHEM 194 ANALYTICAL CHEMISTRY C3	1.0		
CHEM 195 PHYSICAL CHEMISTRY C3	1.0		
CHEM 200a3 THESIS 3 (MANUSCRIPT PREPARATION AND DEFENSE)	1.0		

D. Subjects with INC grades, GNS, not yet taken or to be enrolled next term (to be filled by the course in-charge)

Course Number and Description	Units

Approved:

DR. MA. THERESA P. LORETO
College Dean/Graduate School Dean

E. Secure Approval from your College Dean/Graduate School Dean

PERSONAL DATA SHEET OF APPLICANT FOR GRADUATION

(Please print all entries in capital letter)

Student Number: 19-1-01238

Name: ARCILLAS AUBREY BALBERO
Family Name First Name Middle Name

If you are a married woman, write your maiden name: _____

Age: 12 Sex: FEMALE Religion: ROMAN CATHOLIC Citizenship: FILIPINO

Date of Birth: 08/27/2000 Place of Birth: BRGY. ZONE 1, SOGOD SO. LEYTE Civil Status: SINGLE

Home Address: BARANGAY ZONE 1 SOGOD SOUTHERN LEYTE
Barangay/Street Town/City Province

Name of Father: ARTHUR P. ARCILLAS Citizenship: FILIPINO Occupation: _____

Name of Mother: MA. GINA B. ARCILLAS Citizenship: FILIPINO Occupation: HOUSEWIFE

Parent's Address: BRGY. ZONE 1, SOGOD SOUTHERN LEYTE

If Married, Spouse(husband/wife) Name: _____ Occupation: _____

Spouse Address: _____

SCHOOL RECORDS

	Name of School	Address of School	School Year	Honors or Distinctions Received
Intermediate	<u>SOGOD CENTRAL SCHOOL</u>	<u>BRGY. ZONE 1, SOGOD SO. LEYTE</u>	<u>2018</u>	
Secondary	<u>SOUTHERN LEYTE STATE UNIVERSITY</u>	<u>BRGY. ZONE 1, SOGOD SO. LEYTE</u>	<u>2019</u>	<u>WITH HONOR</u>
Tertiary: 1 st Year	<u>VISAYAS STATE UNIVERSITY</u>	<u>VISCA, BAYBAY CITY, LEYTE</u>	<u>2019-2020</u>	
2 nd Year	<u>VISAYAS STATE UNIVERSITY</u>	<u>VISCA, BAYBAY CITY, LEYTE</u>	<u>2020-2021</u>	
3 rd Year	<u>VISAYAS STATE UNIVERSITY</u>	<u>VISCA, BAYBAY CITY, LEYTE</u>	<u>2021-2022</u>	
4 th Year	<u>VISAYAS STATE UNIVERSITY</u>	<u>VISCA, BAYBAY CITY, LEYTE</u>	<u>2022-2023</u>	
5 th Year				
6 th Year				
Graduate Education (for Graduate Students only)				

Membership in Organizations: _____

I swear that all entries contained in this application for graduation are true and correct to the best of my knowledge and belief.

Signature of Applicant

Date

Distribution of copies: 1-College Dean and 1-University Registrar

Vision:
Mission:

A globally competitive university for science, technology, and environmental conservation.
Development of a highly competitive human resource, cutting-edge scientific knowledge and innovative technologies for sustainable communities and environment.

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v1 06-30-2020

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