

Last Name

## OFFICE OF THE UNIVERSITY REGISTRAR

1/F Administration Building Visca, Baybay City, Leyte, 6521-A PHILIPPINES Telefax: +63 53 563 7067 or 565 0600; Local 1010

Middle Name

Course and Year

Email: registrar@vsu.edu.ph Website: www.vsu.edu.ph

## **CLEARANCE**

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Student Number

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

First Name

18-1-01020	PEPITO	MARRIAN MAE	NGOHO	10 JES-4			
Home Address : N/A  Telephone Number : N/A  Cellphone Number : 0944111 2391  Number of Semester in VSU:   August 2018  Last term enrolled in VSU: Ay. WW.							
The University President Visayas State University Visca, Baybay City, Leyte Sir:							
I am pa administrative/	assing this clearance to find disciplinary cases to this Un JIMMY OFFICE A unature of Academic Advise Over Printed Name		Signatuse of Stude	nsibilities and			
☐ Graduating(Specify degree/ course)		[ ] Accepting an outside job [ ] Other reasons (write below)					
1. EU 2A		Signature Over Printed N  VICENTE A GILOS  OIC, University Librarian	7. MANOLO E	tive/disciplinary  B. LORETO Students			
	I P PEQUE 5.  Ilege Dean  aduate Students only)	QUEEN-EVER Y. ATUPAN Cashier		DE. TULIN President			
	e School Dean uate Students only)	MARWEN A. CASTAÑEDA University Registrar					
Distribution of copie	es: 1-Registrar, 1-Student,1-Dean	of Students, 2-Cashier, 1-College Dea	n				

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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