

Telefax: +63 53 563 7067 or 565 0600; Local 1010 Email: registrar@vsu.edu.ph Website: www.vsu.edu.ph

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
12-1-0200) LIMBRE	UNKE	SILAO	B&C-9
Home Address Telephone Number Cellphone Number Number of Semester in VSU: 14 Date Admitted in VSU: 14	30	[/] Graduating [] led in VSU: _ ひゃり 1010-	
The University President Visayas State University Visca, Baybay City, Leyte		Date: 1-17-22	
Sir: I am passing this clearance to find out and settle all my academic, madministrative/disciplinary cases to this University. Signature of Academic Adviser Over Printed Name REASONS FOR CLEARING		Signature of Studer	
course) b& - 4 [[] Can't get along with students [egree/ [] Financial difficulty [] Accepting an outside job [] Low academic grades [] Other reasons (write below) tudents [] Poor/Failing health eachers [] Find academic work difficult		
WE CERTIFY THAT this student is cleared of academic, monetary, property and administrative/disciplinary cases/responsibilities.			
	Signature Over Printed N	ame	
MANUEL D. GACUTAN, JR. Department Head	OIC, University Librarian	7. MANOLO B	3. LORETO Students
2. VICTOR B. ASIO 5 College Dean (for Undergraduate Students only)	QUEEN-EVER Y. ATUPAN Cashier		DE. TULIN President
3. <u>n/a</u> 6 Graduate School Dean (for Graduate Students only)	MARWEN A. CASTAÑEDA University Registrar		

Distribution of copies: 1-Registrar, 1-Student,1-Dean of Students, 2-Cashier, 1-College Dean

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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