OFFICE OF THE REGISTRAR
UNIVERSITY OF THE PHILPPINES VISAYAS
MIAG-AO, ILOILO

STUDENT'S UNIVERSITY CLEARANCE

PRINT IN BLOCK LETTERS _____

Date

NAME: _____
(Family) (First) (Middle)

First enrollment in the Univ._____
(Term/Sem/Summer) (Academic Year) (College)

Graduated _____Diploma Fee Paid on OR# _____Dated_____
(Degree) (Year)

If not graduated, semester/trimester and year last enrolled_____

1. No Obligation _____ Dean By:	4. No Obligation _____ Head, Health Services By:
2. No Obligation (OSPS) _____ Dean of Students By:	5. No Obligation _____ Residence Head By:
3. No Obligation _____ Librarian By:	6. No Student Loan Obligation _____ Chief, Accounting Services By:
7. Entrance Credential_____ Deposit of_____ Paid on OR#_____ Dated_____ _____ Registrar By:	

After all boxes above have been signed:

1. Submit two (2) copies to the Office of the Registrar
   - 1 copy to be attached when requesting for transcript of records
   - 1 copy to be attached when requesting for honorable dismissal/refund of deposit fee
2. Submit one (1) copy to the Accounting Office
3. Retain one (1) copy

/joj/3:21:07