UP Mla Form No. Revised 11/05/04/jtm

University of the Philippines Manila OFFICE OF THE UNIVERSITY REGISTRAR The Health Sciences Center Padre Faura, Manila

UNIVERSITY STUDENT CLEARANCE

NAME	Purpose		
SURNAME FIRST	MAIDEN/MIDDLE		
irst enrollment in the University: Te	nd. Year College		
ast enrollment in the University: Term	. Year Degree (If graduat	Degree (If graduated)	
. College	4. University Librarian		
// College Clearance Accompli	// No C	bligation	
Dean Date	University Libraria	n Date	
. Office of Student Affairs	5. UPM Health Service		
// No Obligation 2.1 Pending Case 2.2 Student Loan	// No obligation		
O.R. NoDate	Director	Date	
	6. Accounting Office		
Director Date	// No Obligation		
. Learning Resource Center (For und			
// No Obligation	Chief Accountant	Date	
// No Obligation	7. Office of the University Registrar		
	7.1 Entrance Credentials _		
Director Date	7.2 Deposit	OR	
	7.3 Underassessment		
	7.4 Graduation fee	OR	

Note: Always present your copy in requesting for Transcript of Records and Honorable Dismissal.