Republic of the Philippines
CAGAYAN STATE UNIVERSITY
Carig, Tuguegarao City, Cagayan
Email: csuregistrar@yahoo.com
Ph: (078)846-7470 loc. 231; (078)844-0102

OFFICE OF THE UNIVERSITY REGISTRAR

STUDENT CLEARANCE
(Undergraduate)

This is certify that Mr/Ms. _____ _____ is free from money and property responsibility in my section department.

_____ Accountant

_____ Librarian

_____ Adviser

_____ Laboratory Technician

_____ Department Chairman

_____ Director of Student Services

_____ Dean

The Registrar:

I have the honor to request that I be granted complete clearance from the University. Indicated below is my reason or cause of leaving. Above certification have satisfactorily attested me free from all money and property responsibilities in this University.

_____
Signature of student over printed name

I.D. No._____
Course:_____
First Enrolment in the University: _____
Semester School Year College

Last Enrolment in the University_____
Semester School Year College

( ) Employment: _____, _____, _____
(Nature of Job) (Name of Firm/Institution) (Address)

( ) Transfer: _____, _____
(Name of School) (Address)

( ) Others, please specify _____

Important:

No certification of grades and transfer credential/honorable dismissal be issued unless the student is completely cleared of his money and/or property responsibilities.

Approved:

_____
University Registrar

Regis/SEG/erm/07/09/08