



**LPU**  
 LYCEUM OF THE PHILIPPINES UNIVERSITY  
 MANILA · MAKATI · BATANGAS · LAGUNA · CAVITE

FM-LPU-REGO-10/08

Office of the University Registrar  
 Tel +63 43 723 0706 loc. 157-159  
 Telefax +63 43 723 2038

**CLEARANCE FORM**

Student Number: \_\_\_\_\_ Course \_\_\_\_\_ Last Term of Attendance \_\_\_\_\_  
 Name \_\_\_\_\_ Contact Number \_\_\_\_\_  
 Permanent Address \_\_\_\_\_

Please check credential/s being requested from the Registrar's Office.

_____ Transcript of Records	Certification:
_____ Transfer Credential	_____ Medium of Instruction
_____ Diploma	_____ SO Number / Completion
	_____ Enrolment
	_____ Honor Graduate
	_____ Weighted Average
	_____ Units Earned / Grades
	_____ Course Description

Reason for the request \_\_\_\_\_

Signature \_\_\_\_\_

SHL Learning Resource Center (Main-SHL Bldg. 3<sup>rd</sup> Floor / LIMA- 4<sup>th</sup> Floor) \_\_\_\_\_  
 Dean (respective College Dept. Office) \_\_\_\_\_  
 Counseling and Testing Center (Main-SHL Bldg, Rm 102 / LIMA-4<sup>th</sup> Floor) \_\_\_\_\_  
 Office of the Student Affairs (Main-JPL Bldg., 2<sup>nd</sup> Floor / LIMA-2nd Floor) \_\_\_\_\_  
 Accounting Office (Main-JPL Bldg., Ground Floor / LIMA-Ground Floor) \_\_\_\_\_  
 Registrar's Office (Main-JPL Bldg., Ground Floor / LIMA-Ground Floor) \_\_\_\_\_

Date of Filing \_\_\_\_\_ OR #: \_\_\_\_\_  
 Date of Issuance \_\_\_\_\_

**Note: Documents not claimed after 90 days from the date of release will be disposed of.**



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