



PATEROS TECHNOLOGICAL COLLEGE
College St., Sto. Rosario-Kanluran, Pateros Metro Manila

APPLICATION FOR GRADUATION

Date: _____, 20____

The Registrar
Pateros Technological College
Pateros Metro Manila

Madam:

I have the honor to apply for graduation. I expected to finish my program in _____
_____ on the _____ Semester/Summer of the School year _____.

Please print legibly

STUDENT NUMBER		
LAST NAME	FIRST NAME	MIDDLE NAME
PERMANENT ADDRESS:	GENDER:	CONTACT NOS.
PROVINCIAL ADDRESS:	OFFICE NAME & ADDRESS (IF EMPLOYED)	
BIRTHDATE:	BIRTHPLACE:	
PRIMARY SCHOOL	YEAR GRADUATED	
SECONDARY SCHOOL	YEAR GRADUATED	
SCHOOL NAME & ADDRESS LAST ATTENDED (IF TRANSFEREE)		
SEMESTER/SCHOOL YEAR ADMITTED IN PTC		
LAST SEMESTER/SCHOOL YEAR ATTENDED IN PTC		

Note: Fill-up presently enrolled subjects only. Please indicate the course/section of irregular subjects enrolled, if any.

SUBJECT CODE	SUBJECT DESCRIPTION	UNITS	DAY	TIME	INSTRUCTOR

I hereby certify that I am currently enrolled in the following above-mentioned subject/s for _____ Semester,
School Year _____.

IMPORTANT: It is understood that should this application be approved, I MUST JOIN THE COMMENCEMENT EXERCISES ON THE DATE SET FOR THE PROGRAM.

Very Truly yours,

Student signature over printed name

Accepted and Noted by:

College Registrar