

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

OFFICE OF THE COLLEGE REGISTRAR

REQUEST FORM

REQUESTING FOR:

- () Transcript of Record
- () Honorable Dismissal
- () Certification

PURPOSE:

- () Employment
- () Evaluation
- () Scholarship
- () Others, Specify _____

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

ADDRESS: _____

CONTACT NUMBER: _____

DATE OF BIRTH: _____ PLACE OF BIRTH: _____

SH/JH SCHOOL: _____ YEAR GRADUATED: _____

PREVIOUS SCHOOL(IF TRANSFEREE) _____ LAST YEAR ATTENDED _____

DATE OF ADMISSION: _____ PROGRAM TAKEN: _____

DATE OF LAST SCHOOL YEAR ATTENDED: _____ () GRADUATE () NOT GRADUATE

O.R. # _____ Amount: _____ Date: _____ Release Date: _____ Assisted by: _____

-----Cut Here-----

CLAIM STUB

Amount Paid: _____ Date: _____

O.R.# _____ Release Date: _____

Document Requested: _____

Assisted by: _____

NAME: _____

PROGRAM: _____

Please bring this stub in claiming requested document(s). Kindly bring with you the following:

1. 2 pcs 2 x 2 picture with white background (Formal and Studio taken).
2. Letter of Authority with photocopies of your ID and your representative. (In case representative will claim the document in your behalf).