



MABALACAT CITY COLLEGE

OFFICE OF THE COLLEGE REGISTRAR

_____ Date

CERTIFICATE OF ELIGIBILITY TO TRANSFER

TO WHOM IT MAY CONCERN:

This is to certify that **Mr./Ms.** _____ was enrolled in the Institute of _____ (_____) during the ___ Semester, Academic Year _____ to ___ Semester, Academic Year _____ and is hereby granted this Transfer Credential effective _____.

His/her transcript of records will be forwarded to you upon request.

GLORIA R. POLICARPIO, MPM, LPT

Registrar III



----- RETURN SLIP -----

School

Address

_____ Date

The College Registrar

MABALACAT CITY COLLEGE

Mabalacat City, Pampanga

Madam:

Please send us the Official Transcript of Records for **Mr./Ms.** _____, who has been temporarily admitted to this school upon presentation of his/her Transfer Credential issued on _____.

Name & signature of Registrar

NOT VALID WITHOUT COLLEGE SEAL
OR WITH ERASURE OR ALTERATION

Processed by: _____

Reviewed by: _____