MABALACAT CITY COLLEGE
OFFICE OF THE COLLEGE REGISTRAR

APPLICATION FOR GRADUATION

Passport Size (3.5cm x 4.5cm)

With Name tag and White Background

THE REGISTRAR
Mabalacat City College
Mabalacat City, Pampanga

Madam:

I expect to finish my program this _____ Semester of Academic Year 20___ - 20_____ with the Degree in _____, major in _____.

Personal Data

Name (LN, FN, MN): _____
_____
Student No.: _____ Sex: ( ) Male ( ) Female
Date of Birth: _____ Civil Status _____
Place of Birth: _____
Permanent Address: _____
_____
Father's Name: _____
Mother's Birth Name: _____
Email Address: _____
Contact No.: _____

School Attended
(Keep the Year Graduated blank if did not graduate)

Secondary:
Junior High School
_____
_____
Year Graduated _____

Senior High School
_____
_____
Year Graduated _____

College
_____
_____
Year Graduated _____

I hereby certify that I am currently enrolled for the _____ Semester, AY 20__ - 20__, and that I have complied with all the requirements of the program.

_____
Signature over printed name of Student

Data Privacy Consent
"By signing this form, I give consent to the collection, use, disclosure, and processing of my Application as a Candidate for Graduation"

_____
Signature over printed name of Student
Date Signed _____

For Institute's Evaluators Comment:

Lack Units in: _____
Incomplete Grade/s in: _____
Conditional Grade/s in: _____
Recommendation/s: _____

Recommending Approval

_____   _____
Field of Study Head   Dean

DO NOT FILL OUT THIS PORTION
(For Registrar's Use Only)
As per evaluation:

Received by: _____
Date and Time: _____
Evaluated by: _____
Date and Time: _____

( ) No Deficiency
( ) With Deficiency in:
_____
_____
_____
_____

Application for Graduation is
( ) Confirmed   ( ) Denied

Lack the following entry credentials:
( ) Permanent Record/Form 137A
( ) TOR from previous School
( ) PSA – issued Birth Certificate
( ) Recent passport-size picture (white background w/ name tag)
( ) Others _____