

	Republic of the Philippines <b>Iloilo Science and Technology University</b> <b>Leon Campus</b> F. Cabarles St., Leon, Iloilo	Department:	Office of the University Registrar and Admission
		Document Code:	QF-OURA-31
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<b>CERTIFICATION REQUIRED FOR ADMISSION (BACCALAUREATE DEGREE PROGRAM)</b>			

### I. PERSONAL INFORMATION (To be filled out by the applicant)

Last Name	
First Name	
Middle Name	
Extension Name (Jr., III)	

### II. EDUCATIONAL INFORMATION (To be filled out by the Class Adviser)

School Name	
Address	
Senior High School Track	
Strand	
General Average (Grade 11)	
Name and Signature of Class Adviser	

I hereby declare that all information stated above are true and correct. Any dishonesty and misinformation shall make my application in this University invalid. Likewise, I hereby authorize the University to collect, process, store and disclose my personal information as it may deem necessary for me and for the University.

\_\_\_\_\_  
Applicant's Signature and Date

### III. CERTIFICATION

\_\_\_\_\_  
Date

#### The Registrar

Iloilo Science and Technology University  
Leon Campus  
Leon, Iloilo

Madam:

This is to certify that **Mr./Ms.** \_\_\_\_\_ is a candidate for graduation for School Year \_\_\_\_\_ - \_\_\_\_\_ and manifested good moral character during his/her stay in our school.

\_\_\_\_\_  
School Principal / Registrar / Head