**WESTMEAD INTERNATIONAL SCHOOL**

122 Gulod West, Batangas City

(043) 300-2235 Fax (043) 723-9012

**STUDENT CLEARANCE FORM**

Please tick the purpose of the clearance

END OF SEMESTER (Part A) TRANSFER CREDENTIALS (Part A) GRADUATING STUDENTS (Part A& B)

This is to certify that the records of

NAME COURSE/YR/SEC STUDENT NO.

He/she is cleared as to property, money and other academic accountabilities as of SEM,

AY .

**PART A1**

|  |  |  |  |
| --- | --- | --- | --- |
| **OFFICES** | **NAME OF PERSON**  **IN - CHARGED** | **SIGNATURE** | **COMMENTS** |
| College Registrar |  |  |  |
| College Dean |  |  |  |
| College Accounting |  |  |  |
| College Cashier |  |  |  |
| School Librarian |  |  |  |

**PART A2**

|  |  |  |  |
| --- | --- | --- | --- |
| **ORGANIZATION** | **NAME OF PERSON**  **IN - CHARGED** | **SIGNATURE** | **COMMENTS** |
| Dean of Students Affairs |  |  |  |
| Organization Adviser |  |  |  |
| Organization President |  |  |  |

**PART A3**

|  |  |  |  |
| --- | --- | --- | --- |
| **LABORATORIES** | **NAME OF PERSON**  **IN - CHARGED** | **SIGNATURE** | **COMMENTS** |
| Computer Lab. Custodian |  |  |  |
| Physics/Chem. Lab.  Custodians |  |  |  |
| Speech Lab. Custodian |  |  |  |
| WIS Hotel Custodian |  |  |  |

**PART B. For graduating students only**

|  |  |  |
| --- | --- | --- |
|  | **PARTICULAR** | **NAME OF PERSON IN – CHARGE**  **NAME OF IN - CHARGE** |
| Thesis/PS/FS submitted to the library (signed by librarian) |  |  |
|  |  |
| OJT Director (2 copies of OJT Narrative) |  |  |
|  |  |
| Year Book (Cashier) |  |  |
| PD 2: Career Planning and Development |  |  |
|  |  |
| Photos and Documentation  (Deans Office) |  |  |
|  |  |
| Update Resume (Deans Office) |  |  |

\*Good Moral, TOR, Certificates of Grades, etc.