



Republic of the Philippines
CENTRAL LUZON STATE UNIVERSITY
Science City of Muñoz, Nueva Ecija

OFFICE OF ADMISSIONS

APPLICATION FOR CLEARANCE

(Date)

The Dean of Admissions
Central Luzon State University
Science City of Muñoz, Nueva Ecija

Sir/Madam:

I have the honor to apply for clearance. I am leaving the University for the following reason/s:

(Please check)

- Due to illness
- Academic Deficiency
- Lack of financial support

- To Transfer to another school
- Other reason (specify)

Very truly yours,

(Signature of Student)

Student Academic Classification: _____
Student No. _____ Course _____
College of _____
School year last attended _____

CLEARANCE SLIP

This is to certify that Mr./Ms. _____ is hereby cleared of any property/financial or other responsibility by this Office.

Dean, College of _____

University Librarian

Dean, Office of Student Affairs

Chief Accountant

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**ACTION TAKEN**

( ) APPROVED

( ) DISAPPROVED

Granted Honorable Dismissal/Transfer Credentials effective \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
OAd Dean/Authorized Record-in-Charge  
(Signature over Printed Name)

\_\_\_\_\_  
Date Signed