



## LAGUNA UNIVERSITY

### Registrar's Office

Laguna Sports Complex, Brgy. Bubukal, Santa Cruz, Laguna  
Tel. No. (049) 576-4359

TERMINAL CLEARANCE FOR GRADUATING STUDENTS			
DATE OF FILING:		TERM: <input type="checkbox"/> 1 <sup>st</sup> <input type="checkbox"/> 2 <sup>nd</sup> <input type="checkbox"/> Mid-Year, A.Y.	
PERSONAL INFORMATION		ACADEMIC INFORMATION	
LAST NAME		STUDENT NO.	
FIRST NAME		PROGRAM/TRACK	
MIDDLE NAME		MAJOR/STRAND	
DATE OF BIRTH		FIRST ENROLMENT AT LU	_____ semester, AY _____
GENDER		LAST ENROLMENT AT LU	_____ semester, AY _____
PERMANENT ADDRESS		WILL YOU ATTEND GRADUATION RITES?	<input type="checkbox"/> YES <input type="checkbox"/> NO
CONTACT INFORMATION			
MOBILE NO.		EMAIL ADDRESS	
ACCOUNTABILITY CLEARANCE			
<b>Office of Student Affairs and Services</b> Signature over Printed Name/Date	<b>University Library</b> Signature over Printed Name/Date	<b>Cashier</b> Signature over Printed Name/Date	
<b>Thesis Adviser (if applicable)</b> Signature over Printed Name/Date	<b>Science Laboratory (if applicable)</b> Signature over Printed Name/Date	<b>Computer Laboratory (if applicable)</b> Signature over Printed Name/Date	
<b>University Registrar</b> Signature over Printed Name/Date	<b>Program Chair</b> Signature over Printed Name/Date	<b>Dean/Principal</b> Signature over Printed Name/Date	
DATA PRIVACY CONSENT			
<p><i>I hereby affirm that all information supplied herein is complete and accurate. Withholding or giving false information will make me ineligible for admission or subject to dismissal. If admitted, I agree to abide by the established guidelines of Laguna University</i></p> <p><i>Further, I agree to collection and processing of my data for the purpose of processing my terminal clearance for graduation at Laguna University. I understand that my personal information is protected by RA 10173, Data Privacy Act of 2012, and that I am required provide truthful information. I understand that my personal information shall not be shared or disclosed with other parties without consent unless the disclosure is required by, or in compliance with applicable laws and regulations</i></p>			
<b>Student</b>			
Signature over Printed Name/Date			