



REQUEST FORM

NAME OF STUDENT: _____
(Pls. write the name registered during your enrollment at TSU)

Course/Major: _____

Address: _____

Contact No: _____

Type of Request:	No. of Copies	Pls. check if First Copy
1 Transcript of Records (TOR)	_____	Yes_____ No_____
2 Diploma (Duplicate)	_____	
3 Form 137-A	_____	
4 Certification/s:		
Authentication (CAV)	_____	Pls. fill the information needed correctly Year Graduated _____ For unfinished curriculum: Year of First Attendance _____ Year of Last Attendance _____
Course Description	_____	
English Medium of Instruction	_____	
English Translation Diploma	_____	
Enrollment	_____	
General Weighted Ave.	_____	
Graduation	_____	
Transfer Credentials	_____	
Units Earned	_____	
Others: _____		

Purpose of Request: (pls. check)

- | | |
|---|---|
| <input type="checkbox"/> Board Examination | <input type="checkbox"/> Promotion |
| <input type="checkbox"/> Employment (Local) | <input type="checkbox"/> Ranking |
| <input type="checkbox"/> Employment Abroad | <input type="checkbox"/> Records Purposes |
| <input type="checkbox"/> Evaluation | <input type="checkbox"/> Scholarship |
- Others: _____



CLAIM STUB

NAME: _____

DATE FILED: _____

DUE DATE: _____

Pls. claim your Request at Window _____

Important Reminders:

1. Pls. bring with you this stub in claiming your request
2. In case of a Representative, pls. attach your Authorization letter, your ID and the ID of representative.
3. In case of lost stub, inform the REG office immediately.
4. Release of request/s will only depend if the requirements are complete.
5. The validity of request is 60 days from the date of filing.

SIGNATURE OF REQUESTOR

SIGNATURE OF REPRESENTATIVE