Office of the Associate Dean for Mentoring Academic Progress and Advancement

GRADUATE OFFICE

CERTIFICATE OF ATTENDANCE

Date: _____

DR. MA. THERESA T. PAYONGAYONG
University Registrar, UP Diliman

Thru Channels:

Dear Dr. Payongayong,

This is to certify the attendance of the student below during the ____ Semester of School Year _____

_____ _____ _____
Signature over Printed Name | Degree Program | Student Number

SUBJECT/S	SCHEDULE OF CLASSES	NUMBER OF CLASSES MISSED	NAME AND SIGNATURE CERTIFIED BY INSTRUCTOR

Endorsed:

_____
EIZADORA T. YU, PhD
Associate Dean for Mentoring
Academic Progress and Advancement