

**COLLEGE OF SCIENCE** University of the Philippines *Diliman, Quezon City 1101 Philippines* 



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OFFICE OF THE COLLEGE SECRETARY

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## **CERTIFICATE OF ATTENDANCE**

Date \_\_\_\_\_

**Dr. ROWENA QUINTO-BAILON** University Registrar University of the Philippines Diliman

Through Channels:

Dear Dr. BAILON:

This is to certify the attendance of the student below during the \_\_\_\_\_ Semester, AY 20\_\_\_-

Signature over Printed Name of the Student

Degree Program

Student Number

	COURSE/S	SCHEDULE OF CLASSES	NUMBER OF CLASSES MISSED	NAME AND SIGNATURE CERTIFIED BY INSTRUCTOR
1				
2				
3				
4				
5				
6				
7				

ENDORSED by:

MA. NERISSA MASANGKAY ABARA, Ph.D. College Secretary