

Office of the Associate Dean for Academic Affairs **GRADUATE OFFICE**

CERTIFICATE OF ATTENDANCE

Date:				
DR. ROWENA QUINTO-BA University Registrar, UP D				
Thru Channels:				
Dear Dr. Rowena Quinto-	Bailon,			
This is to certify the attendance of the student below during the Semester of School Year				
Signature over Printed Name D		Degr	ee Program	Student Number
	_			
SUBJECT/S	SCHEDULE OF CLASSES		NUMBER OF CLASSES MISSED	NAME AND SIGNATURE CERTIFIED BY INSTRUCTOR
			IVIISSED	CERTIFIED BY INSTRUCTOR

Address: College of Science Administration Building, National Science Complex, UP Diliman, Quezon City 1101, Philippines

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