Office of the Associate Dean for Academic Affairs

GRADUATE OFFICE

CERTIFICATE OF ATTENDANCE

Date: _____

MA. NERISSA MASANGKAY ABARA, Ph.D.
University Registrar, UP Diliman

Thru Channels:

Dear Dr. Ma. Nerissa Masangkay Abara,

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

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Website: https://science.upd.edu.ph/graduate-student-guide/