



## APPLICATION FOR COMPREHENSIVE EXAMINATION

(To be submitted with accomplished approved curriculum and printed SIS grades)

**PLEASE PRINT ALL ENTRIES LEGIBLY**

LAST NAME:		FIRST NAME:	MIDDLE NAME:
Age:	Sex:	Civil Status: ( ) Single ( ) Married ( ) Others ( pls. Specify ) :	
Permanent Address:			Telephone No.:
Name of Office:			Telephone No.:
Office Address:			Cellphone No.:
Student Number:			E-mail Address:
Program: ( )MC ( )MEM ( )MPA ( )MSCM ( )MIT			Date of Filing:

**Courses Taken in Previous Terms:**

Course Specialist	Course Code	Course Title	Term

**Remaining courses enrolled this term:**

Course Specialist	Course Code	Course Title	Term

\_\_\_\_\_  
Date Submitted

\_\_\_\_\_  
Signature over Printed Name

NOTED BY:

**PLEASE SEE AT THE BACK FOR CLEARANCE**

\_\_\_\_\_  
Program Chair



**POLYTECHNIC UNIVERSITY OF THE PHILIPPINES**  
**OFFICE OF THE VICE PRESIDENT FOR ACADEMIC AFFAIRS**  
**OPEN UNIVERSITY SYSTEM**

<b>LAST NAME:</b>	<b>FIRST NAME:</b>	<b>MIDDLE NAME:</b>
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## CLEARANCE

**THE ABOVE STUDENT IS CLEARED OF ALL MONEY AND PROPERTY RESPONSIBILITIES IN MY OFFICE.**  
*(TO BE SIGNED BY THE DULY AUTHORIZED REPRESENTATIVES OF THE RESPECTIVE OFFICES CONCERNED)*

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|--|---|-------|---|---|-------|
| <b>1. LIBRARY</b><br>(3 <sup>rd</sup> Floor NALLRC Bldg.)                  | : | _____ | <b>4. LEGAL OFFICE</b><br>(3 <sup>rd</sup> Floor South Wing Main Bldg.) | : | _____ |
| <b>2. ACCTG. OFFICE</b><br>(Ground floor Main Bldg.)                       | : | _____ | <b>5. PROGRAM CHAIR</b><br>(4 <sup>th</sup> Floor NALLRC Bldg.)         | : | _____ |
| <b>3. INTERNAL AUDIT:</b><br>(3 <sup>rd</sup> Floor South Wing Main Bldg.) | : | _____ | <b>6. INSTITUTE DIRECTOR</b><br>(4 <sup>th</sup> Floor NALLRC Bldg.)    | : | _____ |

Application fee: ₱ \_\_\_\_\_ O.R. No.: \_\_\_\_\_ Date Paid: \_\_\_\_\_