UREG-QF-18

Republic of the Philippines
CAVITE STATE UNIVERSITY
Silang Campus
Biga I, Silang, Cavite

CERTIFICATE OF READMISSION

THE CAMPUS REGISTRAR

This is to recommend Mr./Ms. _____ (Student. No. _____) to be readmitted in the _____ program in this University this 1st / 2nd / summer semester of AY 20 _____ - 20 _____.

READMISSION COMMITTEE

_____	_____	_____
Registration Adviser	College Guidance Counselor	Dept. Chairperson

_____	_____
Department Registrar	Student Account Section

V01-2019-03-08

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Department Registrar Student Account Section