



Republic of the Philippines  
**CENTRAL LUZON STATE UNIVERSITY**  
Science City of Muñoz, Nueva Ecija

DISTANCE, OPEN, AND TRANSNATIONAL UNIVERSITY

**REQUEST FOR CERTIFICATION OF GRADES**

Date: \_\_\_\_\_

Name of Student: \_\_\_\_\_

Degree Program: \_\_\_\_\_

School Year when courses were taken: \_\_\_\_\_

Pls. check:    \_\_\_\_\_ 1st semester  
                  \_\_\_\_\_ 2nd semester

Purpose: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature

**Note:**

Certification of grades will be released on \_\_\_\_\_; that is,  
five (5) working days after filing the application.