	Republic of the Philippines **POLYTECHNIC COLLEGE OF BOTOLAN** *(Formerly Botolan Community College)*	Doc Ref Code: PCB- RO-FORMS-17 Created/Revised 06/06/2024
		Version No 02 / Revised No 00
		Effectively date 06/06/2024 / Page 1 of 1

APPLICATION FOR SCHOOL RECORDS

DATE FILED:

PERSONAL INFORMATION		CONTACT INFORMATION	
LAST NAME		EMAIL ADDRESS	
FIRST NAME		MOBILE NO.	
MIDDLE NAME		**ACADEMIC INFORMATION**	
SEX	☐Male ☐ Female	STUDENT NUMBER	
CIVIL STATUS	☐Single ☐Married ☐Widow ☐Separated	PROGRAM/DEGREE	
DATE OF BIRTH		**GRADUATION**	
PLACE OF BIRTH		Yes, I graduated on _____ Date	No, I last attended PCB on Term _____ SY_____- _____
CITIZENSHIP	☐Filipino ☐ _____		
ADDRESS			
HIGH SCHOOL EDUCATION			
YEAR GRADUATED			
SIGNATURE			

DOCUMENT TYPE

Transcript of Records

☐ For Employment Purposes ☐ For Board Examination Purposes
☐ Transfer Credential ☐ For Verification Purposes
Copy for _____
(Name of School/Agency)
☐ Others
NUMBER OF COPIES: _____

Certification

☐ Enrollment
☐ Report of Grades
☐ Units Earned
☐ Weighted Average
☐ Candidacy/Completion of Academic Requirements
☐ English as a Medium of Instruction
☐ Others _____
NUMBER OF COPIES: _____

Certification, Authentication & Verification (CAV)

☐ Transcript of Record ☐ Diploma
☐ Others _____
NUMBER OF COPIES: _____

CLEARANCE

OFFICE	*REMARKS*	*SIGNATURE*
LIBRARY		
PROGRAM HEAD		
CASHIER		
REGISTRAR		

CLEARANCE

OFFICE	*REMARKS*	*SIGNATURE*
STUDENT AFFAIRS		
GUIDANCE OFFICE		
ALUMNI ASSOCIATION		

Email: polytechniccollegeofbotolan@gmail.com
Website: pcb.edu.ph
Contact No.: 0968-307-5040 | 0968-371-1398

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C L A I M S L I P

Name: _____ Date Filed: _____
Request for: _____ Date Due: _____
☐Transcript of Records ☐ Certification ☐ CAV
Remarks: _____

CLAIMING TIME: 9:00 a.m. - 11:30 a.m/1:00 p.m.-4:00 p.m. only

NOTES

PLEASE DO NOT LOSE THIS SLIP
Processing of the Application is 3-7 days from date of filing.
Bring 1 documentary stamp per document requested
REQUESTED DOCUMENTS NOT CLAIMED AFTER SIXTY (60) CALENDAR DAYS WILL BE DESTROYED