

UNIVERSITY CLEARANCE

(Please accomplish boxes 1-5, 8, 14, 17 for sick/vacation/maternity/study leave for 30 days or more)
 (Please accomplish 3 original signed form for retirement/resignation/termination of contract/GSIS claims/service record)

NAME	OFFICE/UNIT	POSITION	PURPOSE/ EFF. DATE	APPT. STATUS // Permanent // Temporary // Contractual // Others _____
FAMILY: GIVEN: M.I.:				
1A) UNIT SUPPLY OFFICER	1B) ADM. OFFICER/OFFICE HEAD	2) DEAN/DIRECTOR		
3) PERSONNEL CLEARANCE VL _____ SL _____ Total leave credits _____ as of _____ Contractual Obligations _____ HRDO	4) CIVIL/CRIMINAL/ADM. CHARGES DILIMAN LEGAL OFFICE (for DILIMAN employees ONLY)	5) CIVIL/CRIMINAL/ADM. CHARGES OFFICE OF LEGAL SERVICES (for SYSTEM employees ONLY)		
6) Ofc of the Vice-Chancellor for Research & Development <small>(FOR FACULTY ONLY)</small>	7) SUPPLY & PROPERTY MGT. OFFICE	8) CREDIT UNION		
9) OFF. OF COMMUNITY RELATIONS	10) HOUSING OFFICE	11) UNIVERSITY LIBRARY		
12) OSSS (Student Loan Board)	13) UP HEALTH SERVICE	14) UP PROVIDENT FUND		
15) BUSINESS CONCESSIONS OFFICE	16) CASH OFFICE System	17) ACCOUNTING OFFICE System		
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Attach additional sheet/s for details/computation of accountabilities