

**Office of the University Registrar  
Saint Mary's University  
3700 Bayombong, Nueva Vizcaya**

SMU FORM – 65A

**APPLICATION FORM FOR OFFICIAL TRANSCRIPT OF RECORDS/DIPLOMA**

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

**Please fill out all required information. Required fields are noted with an asterisk (\*)**

\*Name: \_\_\_\_\_ \*Course & Yr. \_\_\_\_\_ ID No.: \_\_\_\_\_

\*First Name   \*Middle Name   \* Family Name   \*Birthdate: \_\_\_\_\_

School Term Last Attended: \_\_\_\_\_ Semester S.Y. 20\_\_\_\_-20\_\_\_\_ Summer \_\_\_\_\_

Email Address: \_\_\_\_\_ C.P #: \_\_\_\_\_

**Follow instructions below:**

- A. Application for the release of the **OFFICIAL TRANSCRIPT OF RECORDS/DIPLOMA** must be filed at the Registrar's Office. **SCHEDULE OF RELEASE: REGULAR: 10 – 20 WORKING DAYS EXPRESS: 8-24 WORKING HOURS.**
- B. **NO OFFICIAL TRANSCRIPT OF RECORDS/DIPLOMA** shall be released unless all *financial obligations*, both money and property, to the school are fully settled.
- C. Present this form for signature to the offices in the order indicated below. **RETURN this form to the Registrar's Office after it has been duly accomplished.**
- D. **Unclaimed Transcript of Records and Diploma** can only be kept by the Registrar's Office for **ONE (1) year**, after which the said documents will be classified as inactive and will be disposed.

**OFFICE OF THE DIRECTOR OF LIBRARIES**

Remarks: \_\_\_\_\_ 1. \_\_\_\_\_

**INVENTORY MANAGEMENT OFFICE**

Remarks: \_\_\_\_\_ 2. \_\_\_\_\_

**OFFICE OF THE ACADEMIC DEAN**

Remarks: \_\_\_\_\_ 3. \_\_\_\_\_

**OFFICE OF THE HEAD, ALUMNI AFFAIRS**

Remarks: \_\_\_\_\_ 4. \_\_\_\_\_

**OFFICE OF THE CESC COORDINATOR**

Remarks: \_\_\_\_\_ 5. \_\_\_\_\_

**GUIDANCE OFFICE & TESTING CENTER**

Remarks: \_\_\_\_\_ 6. \_\_\_\_\_

**OFFICE OF THE STUDENT AFFAIRS & SERVICES**

Remarks: \_\_\_\_\_ 7. \_\_\_\_\_

**OFFICE OF THE UNIVERSITY RESEARCH CENTER**

Remarks: \_\_\_\_\_ 8. \_\_\_\_\_

**OFFICE OF THE UNIVERSITY REGISTRAR**

OTR will be issued for: \_\_\_\_\_ 9. \_\_\_\_\_

Diploma: \_\_\_\_\_

**ACCOUNTING OFFICE:**

Transcript Fee: **REGULAR:** P100.00/page   **EXPRESS:** P200.00/page   P \_\_\_\_\_

No. of Page(s) 1 2 3 4 5 6      No. of Set(s): 1 2 3 4 5.....

Documentary Stamp: P30.00

Diploma Fee: **REGULAR:** P230.00   **EXPRESS:** P430.00      P \_\_\_\_\_

Balance on tuition. . . . . P \_\_\_\_\_

**TOTAL:**..... P \_\_\_\_\_

I have read and understood all the conditions and reminders in connection with this request and I agree to comply with them.

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

Note: Please accomplish the following information sheet before turning over this form to the Registrar's Office.