



CERTIFICATE OF ELIGIBILITY

This is to certify that _____ is a bona fide Grade 12 student of
(Family Name, Frist Name , M.I)

_____ School Year _____ .
(Name and Address of School)

This certification is issued for whatever purpose it may serve him/her best.

Given this _____ day of _____ , 20_____.

_____ (Signature Over Printed Name)
Principal/Registrar