Department of Education

Region III

**DIVISION OF CITY SCHOOLS**

Angeles City

Jesus Street, Pulungbulu, Angeles City

Tel. No. (045) 322-5722; 888-0582 / Fax Nos. (045) 322-4702; 625-9812

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date

**CERTIFICATION**

I hereby certify under oath that I have been actually enrolled in the school or schools listed in the accompanying transcript of records and that I have actually earned the units indicated therein.

 As required, the Department of Education, Culture and Sports has been furnished with authentic copies of the sworn statement and its enclosure.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 ***Signature***

SUBSCRIBED AND SWORN to before me this \_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_, affiant exhibiting his/her Residence Certificate No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ issued at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

 **ENRIQUE D. PANGILINAN**

 Administrative Officer II

fn:form (certification-sworn statement for ERF)