

REPUBLIC OF THE PHILIPPINES DEPARTMENT OF EDUCATION



SENIOR HIGH SCHOOL STUDENT PERMANENT RECORD

LAST NA	LAST NAME : BAJA FIRST NAME : FIONA THERESE MARGARETTE MIDDLE NAME : OLIVAR						
LRN:	111570090	0062 Date of Birth(MM/DD/YYYY): 09/14/2003 SEX: Female	e Date of SH	S Admission(M	M/DD/YYYY):	10/05/2020	
		ELIGIBILITY FOR SHS ENROLMEN		,	,		
High	School Comp	leter* Gen Ave : / Junior High School Completer	Gen Ave :	83			
Date of 0	Graduation/Co		rd College of Calapa	an School	Address : Tib	ag, Calapan City	
_		Rating : ALS A&E Passer*** Rating :		Others/Die Se			
	T Passer**			Others(Pls.Sp	ecity):		
		ssessment(MM/DD/YYYY): Name and Address of Comm students who graduated from secondary school under the old curriulum ***ALS A&E - Alterna	, ,		Equivalency Test for J	ue .	
•	•	al Placement Test for JHS	alive Learning Syste	m Accreditation and	Equivalency restror 5	13	
		SCHOLASTIC RECORD					
SCHOOL	: ORIENTAL	MINDORO NATIONAL HIGH SCHOOL SCHOOL ID: 301800 GRADE	LEVEL:	11 SY:	2020-2021	Sem: First	
TRACK/S	STRAND:	ACADEMIC TRACK-GENERAL ACADEMIC STRAND	SECTION:	G	AS DAUNTLESS		
	Subject is CORE,	011015050	Quarter		SEM FINAL	ACTION	
	PLIED, or ECIALIZED	SUBJECTS	1	2	GRADE	TAKEN	
	Core	Oral Communication in Context	84	86	85	PASSED	
	Core	Komunikasyon at Pananaliksik sa Wika at Kulturang Pilipino	87	95	91	PASSED	
	Core	21st Century Literature from the Philippines and the World	84	87	86	PASSED	
	Core	Media and Information Literacy	92	94	93	PASSED	
	Core	General Mathematics	90	91	93	PASSED	
	Core	Earth and Life Science	77	77	77	PASSED	
	Core	Personal Development	93	95	94	PASSED	
	Core	Introduction to the Philosophy of the Human Person	92	94	93	PASSED	
	Core	Physical Education and Health	80	80	80	PASSED	
	3010	- 1955 - Education and Florida	- 00	00	00	1 / (OCLD	
					 		
			Gonoral Avo	for the Semester	88	PASSED	
REMAR	KS ·		General Ave.	. Ioi the Semester	00	FAGGED	
Prepare		Certified True and Correct:		Г	ate Checked (MN	//DD/YYYY)·	
Toparo	•	EL D.MENDOZA JEZA RIA A. DEL FIERRO, MI	DMG - Registra		ato Griodica (ivii	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
s	Signature of Ad	viser Over Printed Name Signature of Authorized Person Over P	Printed Name, [Designation			
		G	School: School ID:				
	Subject is CORE,						
APF	PLIED, or	SUBJECTS	SEM FINAL GRADE	REMEDIAL CLASS MARK	RECOMPUTED FINAL GRADE	ACTION TAKEN	
SPE	CIALIZED		010.02		1110/12 010/132	7,41211	
Name of	f Teacher/Advis	ser:	Signature:				
SCHOOL	L: ORIENTAL	MINDORO NATIONAL HIGH SCHOOL SCHOOL ID: 301800 GRADE	ELEVEL: 11 SY: 2020-2021 Sem: Second				
TRACK/S	STRAND:	ACADEMIC TRACK-GENERAL ACADEMIC STRAND	SECTION:		AS DAUNTLESS		
Indicate if	Subject is CORE,		Ou	arter	0514511141	AOTION	
AP	PLIÉD, or	SUBJECTS		1	SEM FINAL GRADE	ACTION TAKEN	
SPE	ECIALIZED		3	4			
	Core	Reading and Writing Skills	84	84	84	PASSED	
	Core	Pagbasa at Pagsusuri ng Iba't Ibang Teksto Tungo sa Pananaliksik	88	90	89	PASSED	
	Core	Statistics and Probability	75	75	75	PASSED	
	Core	Physical Science	77	80	79	PASSED	
	Core	Physical Education and Health	75	75	75	PASSED	
	Applied	Empowerment Technologies	77	90	84	PASSED	
Sp	ecialized	Disaster Readiness and Risk Reduction	84	86	85	PASSED	
Sp	ecialized	Political Governance	80	80	80	PASSED	
Sp	ecialized	Introduction to World Religions and Belief System	83	84	84	PASSED	
			General Ave.	for the Semester	82	PASSED	
REMAR		2					
Prepare	•	Certified True and Correct:	DMO 5 1		ate Checked (MI	M/DD/YYYY);	
LORINEL D. MENDOZA JEZA RIA A. DEL FIERRO, MDMG - Registrar I							
Signature of Adviser Over Printed Name Signature of Authorized Person Over Printed Name, Designation							
DEMED	Signature of Ad	viser Over Printed Name Signature of Authorized Person Over F	Printed Name, I	Designation	2		
INCIVILD	Signature of Ad	viser Over Printed Name Signature of Authorized Person Over F		Designation	School ID:		
Indicate if S	Signature of Ad DIAL CLASSES Subject is CORE,	viser Over Printed Name Signature of Authorized Person Over F to (MM/DD/YYYY): to (MM/DD/YYYY):	Printed Name, I	REMEDIAL	RECOMPUTED	ACTION	
Indicate if S	Signature of Ad DIAL CLASSES	viser Over Printed Name Signature of Authorized Person Over F	Printed Name, I				
Indicate if S	Gignature of Ad DIAL CLASSES Subject is CORE, PLIED, or	viser Over Printed Name Signature of Authorized Person Over F to (MM/DD/YYYY): to (MM/DD/YYYY):	Printed Name, I	REMEDIAL	RECOMPUTED	ACTION	
Indicate if S	Gignature of Ad DIAL CLASSES Subject is CORE, PLIED, or	viser Over Printed Name Signature of Authorized Person Over F to (MM/DD/YYYY): to (MM/DD/YYYY):	Printed Name, I	REMEDIAL	RECOMPUTED	ACTION	
Indicate if S	Gignature of Ad DIAL CLASSES Subject is CORE, PLIED, or	viser Over Printed Name Signature of Authorized Person Over F to (MM/DD/YYYY): to (MM/DD/YYYY):	Printed Name, I	REMEDIAL	RECOMPUTED	ACTION	
Indicate if S	Gignature of Ad DIAL CLASSES Subject is CORE, PLIED, or	viser Over Printed Name Signature of Authorized Person Over F to (MM/DD/YYYY): to (MM/DD/YYYY):	Printed Name, I	REMEDIAL	RECOMPUTED	ACTION	

SCHOOL: ORIENTAL	MINDORO NATIONAL HIGH SCHOOL SCHOOL ID: 301800 GRADE	LEVEL:	SY:		Sem:
TRACK/STRAND:		SECTION:			
Indicate if Subject is CORE, APPLIED, or SPECIALIZED	SUBJECTS	Qua	arter 2	SEM FINAL GRADE	ACTION TAKEN
		General Ave.	for the Semester	:	
REMARKS :	Out to LT was and Ourseld			No. (a. Oharada al (NA)	4/00000
Prepared by:	Certified True and Correct: JEZA RIA A. DEL FIERRO, M	IDMG - Regis		ate Checked (MI	W/DD/YYYY);
-	viser Over Printed Name Conducted from(MM/DD/YYYY): Signature of Authorized Person Over F to (MM/DD/YYYY):	Printed Name, D School:	esignation	School ID:	
Indicate if Subject is CORE, APPLIED, or	SUBJECTS	SEM FINAL	REMEDIAL	RECOMPUTED	ACTION
SPECIALIZED	30B3E013	GRADE	CLASS MARK	FINAL GRADE	TAKEN
Name of Teacher/Advis		Signature:			
SCHOOL: ORIENTAL TRACK/STRAND:		ELEVEL: SECTION:	SY: _		Sem:
			arter	0514 511141	AOTION
Indicate if Subject is CORE, APPLIED, or SPECIALIZED	SUBJECTS	3	4	SEM FINAL GRADE	ACTION TAKEN
		General Ave	for the Semester		
REMARKS :		Oerierai Ave.	Tor the demester	1	
Prepared by:	Certified True and Correct:	ADMC Book		Date Checked (M	M/DD/YYYY);
Signature of Ad	viser Over Printed Name JEZA RIA A. DEL FIERRO, N Signature of Authorized Person Over F				
REMEDIAL CLASSES	Conducted from(MM/DD/YYYY):to (MM/DD/YYYY):	School:		School ID	<u> </u>
Indicate if Subject is CORE, APPLIED, or SPECIALIZED	SUBJECTS	SEM FINAL GRADE	REMEDIAL CLASS MARK	RECOMPUTED FINAL GRADE	ACTION TAKEN
Name of Teacher/Advi	ser:	Signature:			
Track/Strand Accompl	ished:		SHS	General Average:	
Awards/Honors Received Ceritfied by:	ved:	I	Date of SHS Gr	aduation:	
-	ANTIGUE PhD				
Signature of School He					
NOTE: This permanent record	or a photocopy of this permanent record that bears the seal of the school ik of the School Head shall be considered valid for all legal purposes. Any				
erasure or alteration made on if the student transfers	this copy should be validated by the School Head. to another school, the originating school should produce one(1) certified true				
copy of this permanent record form.	for safekeeping. The receiving school shall continue filling up the original chool from which the student graduated should keep the original form and				
produce one(1) certified true of					
REMARKS: Date Issued (MM/DD/YY)	M).				