



SENIOR HIGH SCHOOL STUDENT PERMANENT RECORD

LEARNER'S INFORMATION

LAST NAME : BALDONADO FIRST NAME : CAIRA JOYCE MIDDLE NAME : COMILLO
LRN : 111556090006 Date of Birth(MM/DD/YYYY) : 12/20/2003 SEX : Female Date of SHS Admission(MM/DD/YYYY): 10/05/2020

ELIGIBILITY FOR SHS ENROLMENT

☐ High School Completer* Gen Ave : _____ ☒ Junior High School Completer Gen Ave : 95
Date of Graduation/Completion(MM/DD/YYYY) : _____ Name of School : BUCAYAO NHS School Address : BUCAYAO, CALAPAN CITY
☐ PEPT Passer** Rating : _____ ☐ ALS A&E Passer*** Rating : _____ ☐ Others(Pls.Specify): _____
Date of Examination/Assessment(MM/DD/YYYY) : _____ Name and Address of Community Learning Center : _____

*High School Completers are students who graduated from secondary school under the old curriculum

***ALS A&E - Alternative Learning System Accreditation and Equivalency Test for JHS

**PEPT - Philippine Educational Placement Test for JHS

SCHOLASTIC RECORD

SCHOOL: ORIENTAL MINDORO NATIONAL HIGH SCHOOL SCHOOL ID: 301800 GRADE LEVEL: 11 SY : 2020-2021 Sem: First
TRACK/STRAND: ACADEMIC TRACK-SCIENCE, TECHNOLOGY, ENGINEERING AND SECTION: EUCLID

Indicate if Subject is CORE, APPLIED, or SPECIALIZED	SUBJECTS	Quarter		SEM FINAL GRADE	ACTION TAKEN
		1	2		
Core	Earth Science	94	96	95	PASSED
Core	Komunikasyon at Pananaliksik sa Wika at Kulturang Pilipino	94	98	96	PASSED
Core	Oral Communication in Context	95	93	94	PASSED
Core	Physical Education and Health	98	98	98	PASSED
Core	Statistics and Probability	94	95	95	PASSED
Applied	Practical Research 1	93	94	94	PASSED
Specialized	General Chemistry 1	93	93	93	PASSED
Specialized	Pre-Calculus	92	94	93	PASSED
General Ave. for the Semester:				95	PASSED

REMARKS : _____

Prepared by: ANNA MARIA F. TOLENTINO Certified True and Correct: JEZA RIA A. DEL FIERRO, MDMG - Registrar I Date Checked (MM/DD/YYYY): _____
Signature of Adviser Over Printed Name Signature of Authorized Person Over Printed Name, Designation

REMEDIAL CLASSES Conducted from(MM/DD/YYYY): _____ to (MM/DD/YYYY): _____ School: _____ School ID: _____

Indicate if Subject is CORE, APPLIED, or SPECIALIZED	SUBJECTS	SEM FINAL GRADE	REMEDIAL CLASS MARK	RECOMPUTED FINAL GRADE	ACTION TAKEN

Name of Teacher/Adviser: _____ Signature: _____

SCHOOL: ORIENTAL MINDORO NATIONAL HIGH SCHOOL SCHOOL ID: 301800 GRADE LEVEL: 11 SY : 2020-2021 Sem: Second
TRACK/STRAND: ACADEMIC TRACK-SCIENCE, TECHNOLOGY, ENGINEERING AND MATHEMATICS SECTION: EUCLID

Indicate if Subject is CORE, APPLIED, or SPECIALIZED	SUBJECTS	Quarter		SEM FINAL GRADE	ACTION TAKEN
		3	4		
Core	Disaster Readiness and Risk Reduction	90	93	92	PASSED
Core	Introduction to the Philosophy of the Human Person	93	94	94	PASSED
Core	Pagbasa at Pagsusuri ng Iba't Ibang Teksto Tungo sa Pananaliksik	98	98	98	PASSED
Core	Personal Development	98	98	98	PASSED
Core	Physical Education and Health	95	97	96	PASSED
Core	Reading and Writing Skills	93	94	94	PASSED
Applied	Empowerment Technologies	92	98	95	PASSED
Specialized	Basic Calculus	91	94	93	PASSED
Specialized	General Chemistry 2	95	95	95	PASSED
General Ave. for the Semester:				95	PASSED

REMARKS : _____

Prepared by: ANNA MARIA F. TOLENTINO Certified True and Correct: JEZA RIA A. DEL FIERRO, MDMG - Registrar I Date Checked (MM/DD/YYYY): _____
Signature of Adviser Over Printed Name Signature of Authorized Person Over Printed Name, Designation

REMEDIAL CLASSES Conducted from(MM/DD/YYYY): _____ to (MM/DD/YYYY): _____ School: _____ School ID: _____

Indicate if Subject is CORE, APPLIED, or SPECIALIZED	SUBJECTS	SEM FINAL GRADE	REMEDIAL CLASS MARK	RECOMPUTED FINAL GRADE	ACTION TAKEN

Name of Teacher/Adviser: _____ Signature: _____

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	Quarter		SEM FINAL GRADE	ACTION TAKEN
		1	2		
General Ave. for the Semester:					

REMARKS :

Prepared by: Certified True and Correct: Date Checked (MM/DD/YYYY);

Signature of Adviser Over Printed Name Signature of Authorized Person Over Printed Name, Designation

REMEDIAL CLASSES Conducted from(MM/DD/YYYY): to (MM/DD/YYYY): School: School ID:

Indicate if Subject is CORE, APPLIED, or SPECIALIZED	SUBJECTS	SEM FINAL GRADE	REMEDIAL CLASS MARK	RECOMPUTED FINAL GRADE	ACTION TAKEN

Name of Teacher/Adviser: Signature:

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	Quarter		SEM FINAL GRADE	ACTION TAKEN
		3	4		
General Ave. for the Semester:					

REMARKS :

Prepared by: Certified True and Correct: Date Checked (MM/DD/YYYY);

Signature of Adviser Over Printed Name Signature of Authorized Person Over Printed Name, Designation

REMEDIAL CLASSES Conducted from(MM/DD/YYYY): to (MM/DD/YYYY): School: School ID:

Indicate if Subject is CORE, APPLIED, or SPECIALIZED	SUBJECTS	SEM FINAL GRADE	REMEDIAL CLASS MARK	RECOMPUTED FINAL GRADE	ACTION TAKEN

Name of Teacher/Adviser: Signature:

Track/Strand Accomplished: SHS General Average:

Awards/Honors Received: Date of SHS Graduation:

Certified by:

NIMROD F. BANTIGUE PhD

Signature of School Head Over Printed Name

Date

NOTE:

This permanent record or a photocopy of this permanent record that bears the seal of the school and the original signature in ink of the School Head shall be considered valid for all legal purposes. Any erasure or alteration made on this copy should be validated by the School Head.

if the student transfers to another school, the originating school should produce one(1) certified true copy of this permanent record for safekeeping. The receiving school shall continue filling up the original form.

Upon graduation, the school from which the student graduated should keep the original form and produce one(1) certified true copy for the Division Office.

REMARKS:

Date Issued (MM/DD/YYYY):