



SENIOR HIGH SCHOOL STUDENT PERMANENT RECORD

LEARNER'S INFORMATION

LAST NAME : LANDICHO FIRST NAME : ANDREA GAIL MIDDLE NAME : BAUTISTA
LRN : 111538090030 Date of Birth(MM/DD/YYYY) : 03/12/2003 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 : 88
Date of Graduation/Completion(MM/DD/YYYY) : 04/03/2020 Name of School : Oriental Mindoro National High School School Address : San Vicente East, 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
**PEPT - Philippine Educational Placement Test for JHS
***ALS A&E - Alternative Learning System Accreditation and Equivalency 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-HUMANITIES AND SOCIAL SCIENCES SECTION: PLATO

Indicate if Subject is CORE, APPLIED, or SPECIALIZED	SUBJECTS	Quarter		SEM FINAL GRADE	ACTION TAKEN
		1	2		
Core	Oral Communication in Context	89	93	91	PASSED
Core	Komunikasyon at Pananaliksik sa Wika at Kulturang Pilipino	77	94	86	PASSED
Core	Contemporary Philippine Arts from the Regions	92	92	92	PASSED
Core	General Mathematics	94	96	95	PASSED
Core	Earth and Life Science	94	96	95	PASSED
Core	Understanding Culture, Society and Politics	94	81	88	PASSED
Core	Physical Education and Health	82	90	86	PASSED
Applied	English for Academic and Professional Purposes	85	98	92	PASSED
Applied	Empowerment Technologies	83	83	83	PASSED
General Ave. for the Semester				90	PASSED

REMARKS :
Prepared by: LORNA M. ENERO 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-HUMANITIES AND SOCIAL SCIENCES SECTION: PLATO

Indicate if Subject is CORE, APPLIED, or SPECIALIZED	SUBJECTS	Quarter		SEM FINAL GRADE	ACTION TAKEN
		3	4		
Core	Reading and Writing Skills	80	89	85	PASSED
Core	Pagbasa at Pagsusuri ng Iba't Ibang Teksto Tungo sa Pananaliksik	94	95	95	PASSED
Core	21st Century Literature from the Philippines and the World	94	96	95	PASSED
Core	Statistics and Probability	84	91	88	PASSED
Core	Personal Development	91	94	93	PASSED
Core	Physical Education and Health	93	95	94	PASSED
Applied	Filipino sa Piling Larang (Akademik)	95	96	96	PASSED
Specialized	Philippine Politics and Governance	90	93	92	PASSED
Specialized	Discipline and Ideas in Social Sciences	86	89	88	PASSED
General Ave. for the Semester				92	PASSED

REMARKS :
Prepared by: LORNA M. ENERO 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:

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

JEZA RIA A. DEL FIERRO, MDMG - Registrar I

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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:

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

JEZA RIA A. DEL FIERRO, MDMG - Registrar I

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):