

## REPUBLIC OF THE PHILIPPINES DEPARTMENT OF EDUCATION



## SENIOR HIGH SCHOOL STUDENT PERMANENT RECORD

LAST NAME :	MAGADIA FIRST NAME : SARRAH MAE	MIDDLE NAME : LIAGOSO					
LRN: 11052309		<del></del>					
	ELIGIBILITY FOR SHS ENROLMEN	<u> </u>	10/05/2020				
Lligh Cohool Come		Gen Ave : 92					
Date of Graduation/Completion(MM/DD/YYYY):Name of School:AURORA NATIONAL HIGH SCHOOL School Address: AURORA, NAUJAN, OR. MINDORO							
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 curriulum ***ALS A&E - Altern	native Learning System Accreditation and	Equivalency Test for JHS				
**PEPT - Philippine Education							
ODJENITAL	SCHOLASTIC RECORD	- I - F \ / F	2002 2004				
	MINDORO NATIONAL HIGH SCHOOL SCHOOL ID: 301800 GRADE  ACADEMIC TRACK-SCIENCE, TECHNOLOGY, ENGINEERING AND	E LEVEL: <u>11                                   </u>	2020-2021 Sem: First EULER				
TRACK/STRAND:			EULER				
Indicate if Subject is CORE, APPLIED, or	SUBJECTS	Quarter	SEM FINAL ACTION				
SPECIALIZED		1 2	GRADE TAKEN				
Core	Earth Science	85 93	89 PASSED				
Core	Komunikasyon at Pananaliksik sa Wika at Kulturang Pilipino	96 96	96 PASSED				
Core	Oral Communication in Context	91 95	93 PASSED				
Core	Physical Education and Health	98 97	98 PASSED				
Core	Statistics and Probability	90 97	94 PASSED				
Applied	Practical Research 1	94 94	94 PASSED				
Specialized	General Chemistry 1	90 90	90 PASSED				
Specialized	Pre-Calculus	94 94	94 PASSED				
		General Ave. for the Semester	94 PASSED				
REMARKS :							
Prepared by:	Certified True and Correct:	]	Date Checked (MM/DD/YYYY);				
JOBEL	LE G. FAJARDO JEZA RIA A. DEL FIERRO, N	IDMG - Registrar I					
Signature of Ad	dviser 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,		SEM FINAL REMEDIAL	RECOMPUTED ACTION				
APPLIED, or SPECIALIZED	SUBJECTS	SEM FINAL   REMEDIAL   GRADE   CLASS MARK	FINAL GRADE TAKEN				
SPECIALIZED			-				
		<del>                                     </del>					
		<del>                                     </del>					
N. (T. ) (A.)		<u> </u>					
Name of Teacher/Adv	iser:	Signature:					
SCHOOL: ORIENTAL MINDORO NATIONAL HIGH SCHOOL SCHOOL ID: 301800 GRADE LEVEL: 11 SY: 2020-2021 Sem: Second							
TRACK/STRAND:		SECTION:	EULER				
_	MATHEMATICS						
Indicate if Subject is CORE	CLIDIFOTO	Quarter	SEM FINAL ACTION				
APPLIED, or SPECIALIZED	SUBJECTS	3 4	GRADE TAKEN				
Core	Disaster Readiness and Risk Reduction	94 95	95 PASSED				
Core	Introduction to the Philosophy of the Human Person	97 98	98 PASSED				
Core	Pagbasa at Pagsusuri ng Iba't Ibang Teksto Tungo sa Pananaliksik	97 98	98 PASSED				
Core	Personal Development	93 94	94 PASSED				
Core	Physical Education and Health	98 99	99 PASSED				
Core	Reading and Writing Skills	94 95	95 PASSED				
Applied	Empowerment Technologies	94 95	95 PASSED				
Specialized	Basic Calculus	94 95	95 PASSED				
Specialized	General Chemistry 2	95 95	95 PASSED 95 PASSED				
Орестандец	Conordi Onomiony 2	30 90	FASSED				
			<del>                                     </del>				
		<del>                                     </del>	<del>                                     </del>				
		General Ave. for the Semester	: 96 PASSED				
REMARKS:		General Ave. 101 the Semestel	AO PASSED				
Prepared by:	Certified True and Correct:	Г	Date Checked (MM/DD/YYYY);				
JOBELLE G. FAJARDO JEZA RIA A. DEL FIERRO, MDMG - Registrar I							
Signature of Adviser Over Printed Name Signature of Authorized Person Over Printed Name, Designation							
O .	Conducted from(MM/DD/YYYY): to (MM/DD/YYYY):	School:	School ID:				
Indicate if Subject is CORE, APPLIED, or	SUBJECTS	SEM FINAL REMEDIAL GRADE CLASS MARK	RECOMPUTED ACTION				
SPECIALIZED		GRADE CLASS WARK	FINAL GRADE TAKEN				
Name of Teacher/Adv	icor:	Signature:	-				

SCHOOL: ORIENTAL	MINDORO NATIONAL HIGH SCHOOL SCHOOL ID: 301800 GRADE	LEVEL:	SY:		Sem:	
TRACK/STRAND:		SECTION:				
Indicate if Subject is CORE, APPLIED, or	CHD IECTO	Qı	uarter	SEM FINAL	ACTION	
SPECIALIZED	SUBJECTS	1	2	GRADE	TAKEN	
DEMARKS.		General Ave	e. for the Semester	7		
REMARKS : Prepared by:	Certified True and Correct:			Date Checked (MI	//DD/VVVV)·	
Frepared by.	JEZA RIA A. DEL FIERRO, M	1DMG - Reai		die Checkeu (Mi	W/DD/1111),	
Signature of Ad	viser Over Printed Name Signature of Authorized Person Over F	Printed Name,				
REMEDIAL CLASSES	Conducted from(MM/DD/YYYY): to (MM/DD/YYYY):	School:		School ID:		
Indicate if Subject is CORE,	OLID IECTO	SEM FINAL	REMEDIAL	RECOMPUTED	ACTION	
APPLIED, or SPECIALIZED	SUBJECTS	GRADE	CLASS MARK	FINAL GRADE	TAKEN	
N (T ) (A)		<u> </u>				
Name of Teacher/Advis	ser:	Signature	·			
		E LEVEL:	SY:		Sem:	
TRACK/STRAND:		SECTION: _		· · · · · · · · · · · · · · · · · · ·		
Indicate if Subject is CORE, APPLIED, or SPECIALIZED	SUBJECTS	Q	uarter	SEM FINAL	ACTION	
APPLIED, or SPECIALIZED	00202010	3	4	GRADE	TAKEN	
		General Av	e. for the Semeste	r.		
REMARKS :		General AV	o. for the Semeste	"		
Prepared by:	Certified True and Correct:			Date Checked (M	M/DD/YYYY);	
	JEZA RIA A. DEL FIERRO, N		istrar I			
ŭ	lviser Over Printed Name Signature of Authorized Person Over I Conducted from(MM/DD/YYYY): to (MM/DD/YYYY):	Printed Name, School:	Designation	School ID		
	O CONGUESTED ITTELLINE TO (INITIALIZED) TTTT).					
Indicate if Subject is CORE, APPLIED, or	SUBJECTS	SEM FINAL GRADE	REMEDIAL CLASS MARK	RECOMPUTED FINAL GRADE	ACTION TAKEN	
SPECIALIZED				1	1	
Name of Teacher/Advi	ser:	Signature	:			
Track/Strand Accompl	Track/Strand Accomplished: SHS General Average:					
Awards/Honors Recei	Awards/Honors Received: Date of SHS Graduation:					
Ceritfied by:						
	ANTIGUE PhD					
Signature of School He	ead Over Printed Name Date					
	or a photocopy of this permanent record that bears the seal of the school ak of the School Head shall be considered valid for all legal purposes. Any					
erasure or alteration made on	nk of the School Head shall be considered valid for all legal purposes. Any 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.	to another school, the originating school should produce one(1) certified true  I for safekeeping. The receiving school shall continue filling up the original					
	school from which the student graduated should keep the original form and					
REMARKS:	Sept to the Stringer Chief.					
Date Issued (MM/DD/YY)	YY):					