

### Certification of Official Org. Representatives

This is to certify that the

\_\_\_\_\_ is officially represented by: \_\_\_\_\_ (Name of Organization)

Name of Representative	Position	Email Address and Contact Number	Signature

name)

\_\_\_\_\_  
(Signature over printed

Chairperson

Email: \_\_\_\_\_

Contact Number: \_\_\_\_\_

Noted by:

\_\_\_\_\_  
(Signature over printed name)

Faculty Adviser

Email: \_\_\_\_\_

Contact Number: \_\_\_\_\_

Received by: \_\_\_\_\_

Date and Time Received: \_\_\_\_\_

Temporary Password: \_\_\_\_\_