



Office of the
University Registrar

UR-07-202503

[CAV Request Letter]

DATE (dd-mmm-yyyy)

The Legal Education Board

28th Floor, The Upper Class Tower,
Quezon Avenue corner Scout Reyes St.,
Diliman, Quezon City

Dear Sir/Madame:

I, _____
PRINT NAME (FIRST, MIDDLE, LAST)

would like to request your good office for the authentication of my academic records in

_____ issued by De La Salle University.
PRINT DEGREE / PROGRAM / COURSE

In this connection, I am submitting the following records through the Office of the University Registrar:

- ☐ Official Transcript of Records
- ☐ Diploma
- ☐ Certification of Enrollment (for undergraduate student only)

Thank you.

Respectfully yours,

SIGNATURE OVER PRINTED NAME

SUBSCRIBED AND SWORN to before me, this _____ day of _____ in the _____, affiant exhibiting
before me his/her _____, issued at _____ valid until _____.

Doc. No. _____;
Page No. _____;
Book No. _____;
Series of _____.