
	Reference No.: BatStateU-FO-OGC-11	Effectivity Date: July 28, 2017	Revision No.: 01
EXIT INTERVIEW FORM			
Please Check:	<input type="checkbox"/> GPB Main Campus I <input type="checkbox"/> Malvar Campus <input type="checkbox"/> Rosario Campus	<input type="checkbox"/> GPB Main Campus II <input type="checkbox"/> Lipa Campus <input type="checkbox"/> Balayan Campus	<input type="checkbox"/> Nasugbu Campus <input type="checkbox"/> Lemery Campus <input type="checkbox"/> San Juan Campus <input type="checkbox"/> Lobo Campus
<input type="checkbox"/> Shifter	<input type="checkbox"/> Transferee	Last Attendance (Semester & A.Y):	Date Filed:
Last Name:		First Name:	M.I.: SR Code:
Department:		Program:	Year level:
Reason for Shifting/Transferring: _____ _____			
Noted:			Interviewed by:
_____ Parent/Guardian Date: _____	_____ Adviser/Program Chair Date: _____ Remarks: _____	_____ College Dean Date: _____ Remarks: _____	_____ Guidance Counselor/Facilitator Date: _____ Remarks: _____

(OGC's copy)

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_____ Parent/Guardian Date: _____	_____ Adviser/Program Chair Date: _____ Remarks: _____	_____ College Dean Date: _____ Remarks: _____	_____ Guidance Counselor/Facilitator Date: _____ Remarks: _____

(Student's copy)