

TECHNICAL EDUCATION AND SKILLS DEVELOPMENT AUTHORITY

---

(Regional/Provincial/District Office)

Date: \_\_\_\_\_

SPECIAL ORDER (D)

No. \_\_\_\_\_

On the basis of the records submitted by (SCHOOL NAME) pertaining to the eligibility for graduation of the following students, as of (DATE OF GRADUATION), and upon satisfactory completion of the (COURSE/ QUALIFICATION), this Special Order is hereby given and made a matter of record:

**(STUDENT NAME)**

(Valid for number of student only)

The approval of any candidate for graduation is automatically cancelled if he/she does not complete the requirements of the course upon the date specified and is subject to revocation if the records upon which the approval is based are later found not correct.

The approval is valid for     (DATE OF GRADUATION)

(NOT VALID WITHOUT SEAL OR  
WITH ERASURE OR ALTERATION)

Course Status Verified by: \_\_\_\_\_

Enrollment Verified by: \_\_\_\_\_

Evaluated by: \_\_\_\_\_

Reviewed by: \_\_\_\_\_

\_\_\_\_\_  
Regional/Provincial/District Director

APPLICATION FOR CAV ISSUANCE

\_\_\_\_\_  
(Date)

The Provincial Director  
TESDA \_\_\_\_\_  
\_\_\_\_\_

Sir/Madam:

This is to request for the issuance of Certification, Authentication and Verification (CAV) for the following scholastic records:

- \_\_\_\_\_ 1. Transcript of Records (TOR) or Diploma or Certificate of Training
- \_\_\_\_\_ 2. Special Order (SO)
- \_\_\_\_\_ 3. Certification from the Registrar (for Government Institution Only)

Name of Applicant: \_\_\_\_\_  
(Please Print Name)

Course: \_\_\_\_\_ Date of Graduation: \_\_\_\_\_

School issuing the Transcript of Records or Diploma or Certificate of Training: \_\_\_\_\_

Purpose: \_\_\_\_\_  
(Please specify if, for employment abroad, for issuance of seaman's book, study abroad, etc.)

Age of Applicant: \_\_\_\_\_

Tel. No. \_\_\_\_\_

Address of Applicant \_\_\_\_\_  
\_\_\_\_\_

Very truly yours,

If to be filled up by an authorized representative

\_\_\_\_\_  
Signature over printed name of authorized Representative

\_\_\_\_\_  
(Applicant Signature over Printed Name)

Special Order No. \_\_\_\_\_, series \_\_\_\_\_ Date Issued: \_\_\_\_\_

OR Number \_\_\_\_\_

Date Issued \_\_\_\_\_

ENCLOSED REQUIREMENTS:

1. Transcript of Records or Diploma or Certificate of Training (original and one (1) certified photocopy)  
If undergraduate student:
  - Certification from the School Director / Administrator
2. Copy of the Special Order certified by the School Registrar
3. Certification from the Registrar (original and one (1) certified photocopy)
4. If to be filed by authorized representative:
  - Authorization Letter from the Applicant, and
  - Identification Card of applicant and representative (Original and photocopy)