**TITLE OF ACTIVITY:**

**DATE OF ACTIVITY:**

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| **NAME OF STUDENT/S** | **Academic Standing (%)** | **Attendance Record**  **(%)** | **Student Behavior (%)** | **Leadership Skills**  **(%)** | **Financial Capacity (%)** | **Additional Criterion (%)** | **TOTAL SCORE**  **(Ave. %)** | **Remarks** |
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Prepared by:

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Member/s, Screening Committee

Date:

Noted by: Recommending approval: Approved by:

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Head, Screening Committee CID Chief Campus Director

Date: Date: Date: