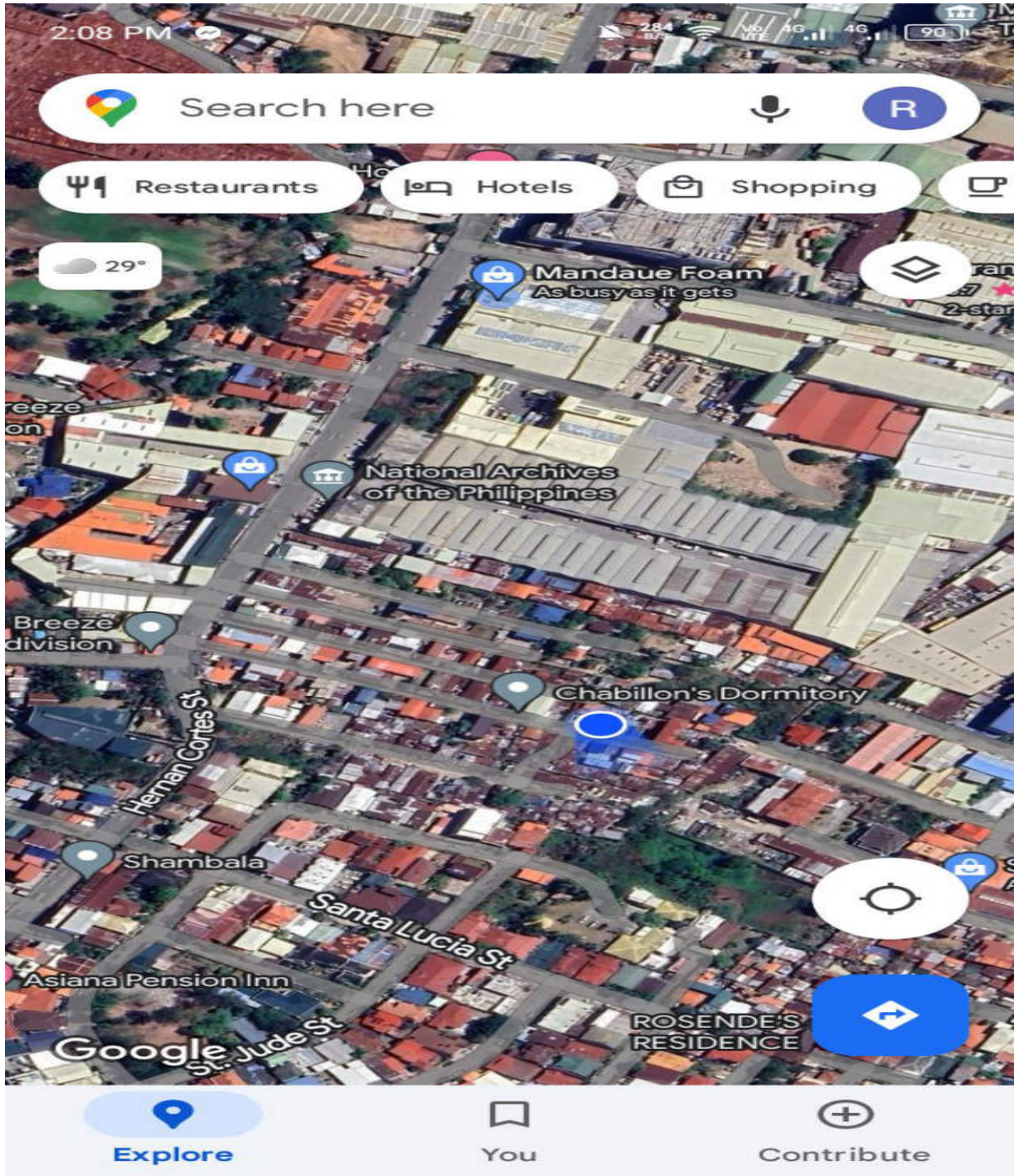


HOUSE / LOCATION VIA GOOGLE MAP



NSO / PSA

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Form 00217-B01PU3-7

Page 1 of 1



Republic of the Philippines  
OFFICE OF THE CIVIL REGISTRAR GENERAL  
CERTIFICATE OF LIVE BIRTH

Province: **CEBU** City/Municipality: **CEBU CITY** Registrar's Office: **2001 20033**

**I. NAME** (First, Middle, Last) **JALILA CIVIL**

**II. SEX**  Male  Female **III. DATE OF BIRTH** **20 JULY 2001**

**IV. PLACE OF BIRTH** (Name of Hospital/Clinic/Institution, City/Municipality, Province) **OSHO PUER. CENTER & MAT. HOUSE INC. CEBU CITY CEBU**

**V. TYPE OF BIRTH**  Single  Twin  Other, Specify: \_\_\_\_\_

**VI. BIRTH ORDER** (This birth and total deaths including those delivered) **FIRST** **VI. WEIGHT AT BIRTH** **2.43** grams

**VII. NAME** (First, Middle, Last) **EVELYN MONTELO JALIFA**

**VIII. CITIZENSHIP** **PH.** **IX. RELIGION** **P.C.**

**X. Total number of children born alive** **1** **XI. No. of children still living (including this birth)** **1** **XII. No. of children born but are now dead** **0**

**XIII. OCCUPATION** **HOUSEWIFE** **XIV. Age at the time of this birth** **21** years

**XV. RESIDENCE** (House No., Street, Barangay, City/Municipality, Province) **Marikio Comp. E. Cortes street Mireless Nandanue City Cebu**

**XVI. NAME** (First, Middle, Last) **RATHONDO FURYES CIVIL**

**XVII. CITIZENSHIP** **PH.** **XVIII. RELIGION** **P.C.**

**XIX. OCCUPATION** **FACTORY WORKER** **XX. Age at the time of marriage** **30** years

**XXI. DATE AND PLACE OF MARRIAGE OF PARENTS** (If not married, accomplish Affidavit of Acknowledgment) (Address of Parents at the time) **FEBRUARY 24, 2001 KAJIT MONTALIN, CEBU**

**XXII. ATTENDANT**  Physician  Nurse  Midwife  Midwife (Traditional/Midwife)  Other, Specify: \_\_\_\_\_

**XXIII. CERTIFICATION OF BIRTH** (I hereby certify that I attended the birth of the child who was born alive at **2:15 p.m.** on/upon or the date given above.)

Signature: *[Signature]* **OSHO PUER. CENTER & MAT. HOUSE INC. CEBU CITY**  
Name in Print: **MAS CHIVA BISSIGAN, P.O.**  
Title or Position: **Physician** Date: **JULY 20, 2001**

**XXIV. INFORMANT** (Name, Address, Date)  
Signature: *[Signature]* **Marikio Comp. E. Cortes street**  
Name in Print: **EVELYN J. ORTIZ** **Mireless, Nandanue City**  
Relationship to the child: **mother** Date: **JULY 20, 2001**

**XXV. PREPARED BY** (Signature, Name in Print, Title or Position, Date)  
Signature: *[Signature]*  
Name in Print: **OSHO PUER. CENTER**  
Title or Position: **CLERK**  
Date: **JULY 20, 2001**

**XXVI. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR** (Signature, Name in Print, Title or Position, Date)  
Signature: *[Signature]*  
Name in Print: \_\_\_\_\_  
Title or Position: \_\_\_\_\_  
Date: **JUL 31 2001**

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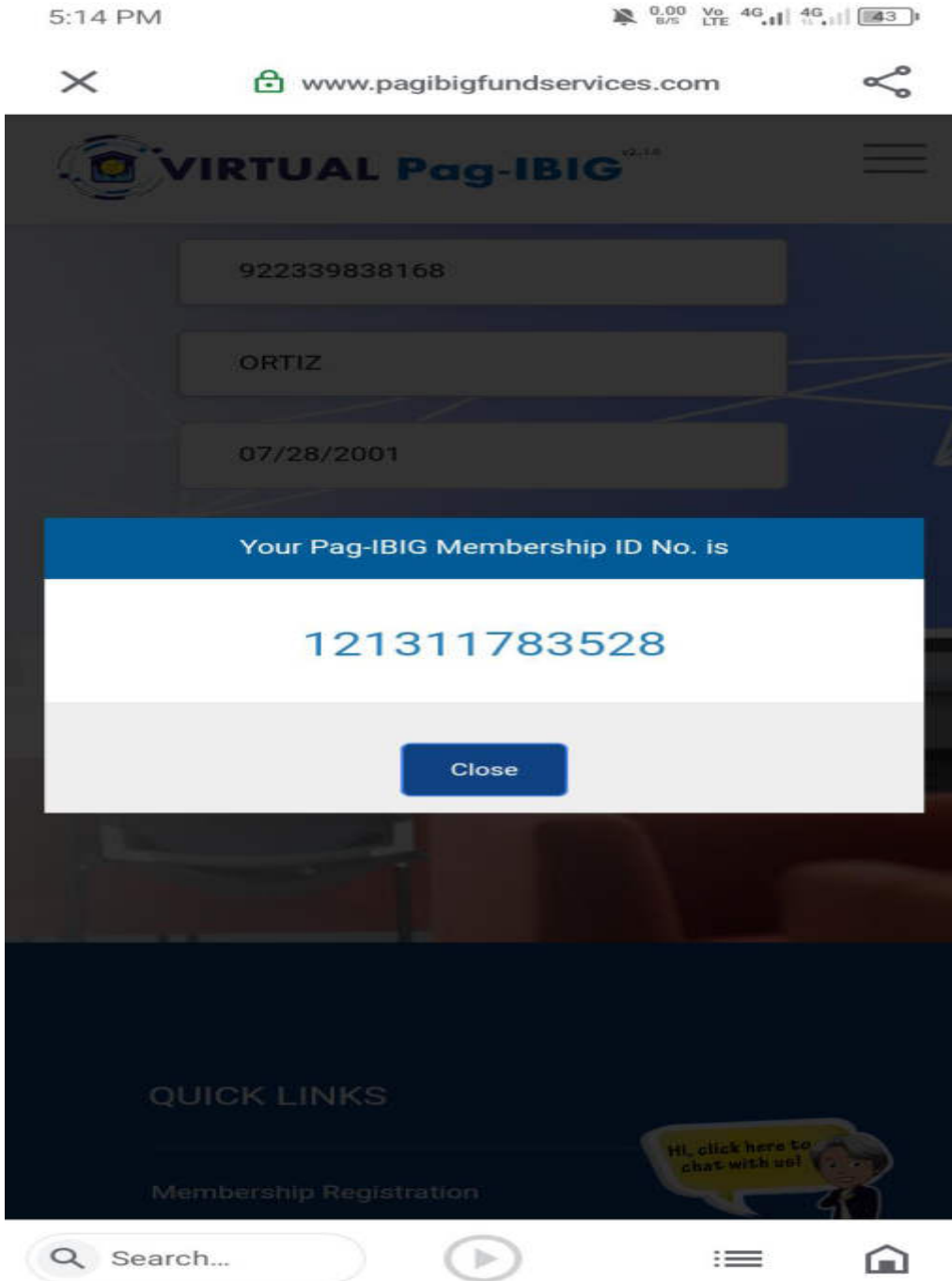


*CDSM*  
CLAIRE DENNIS S. MAPA, Ph. D.  
National Statistician and Civil Registrar General  
Philippine Statistics Authority

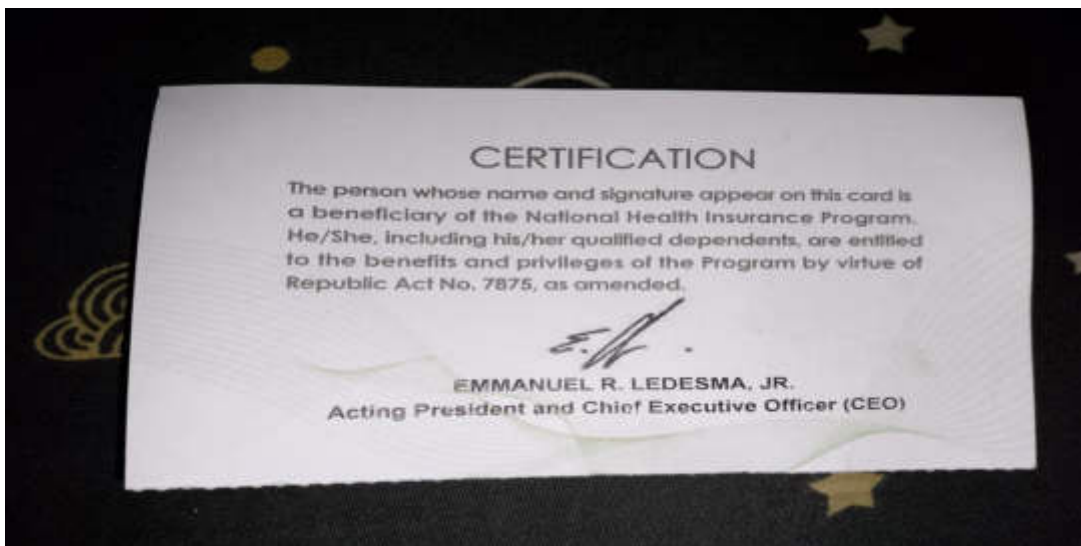


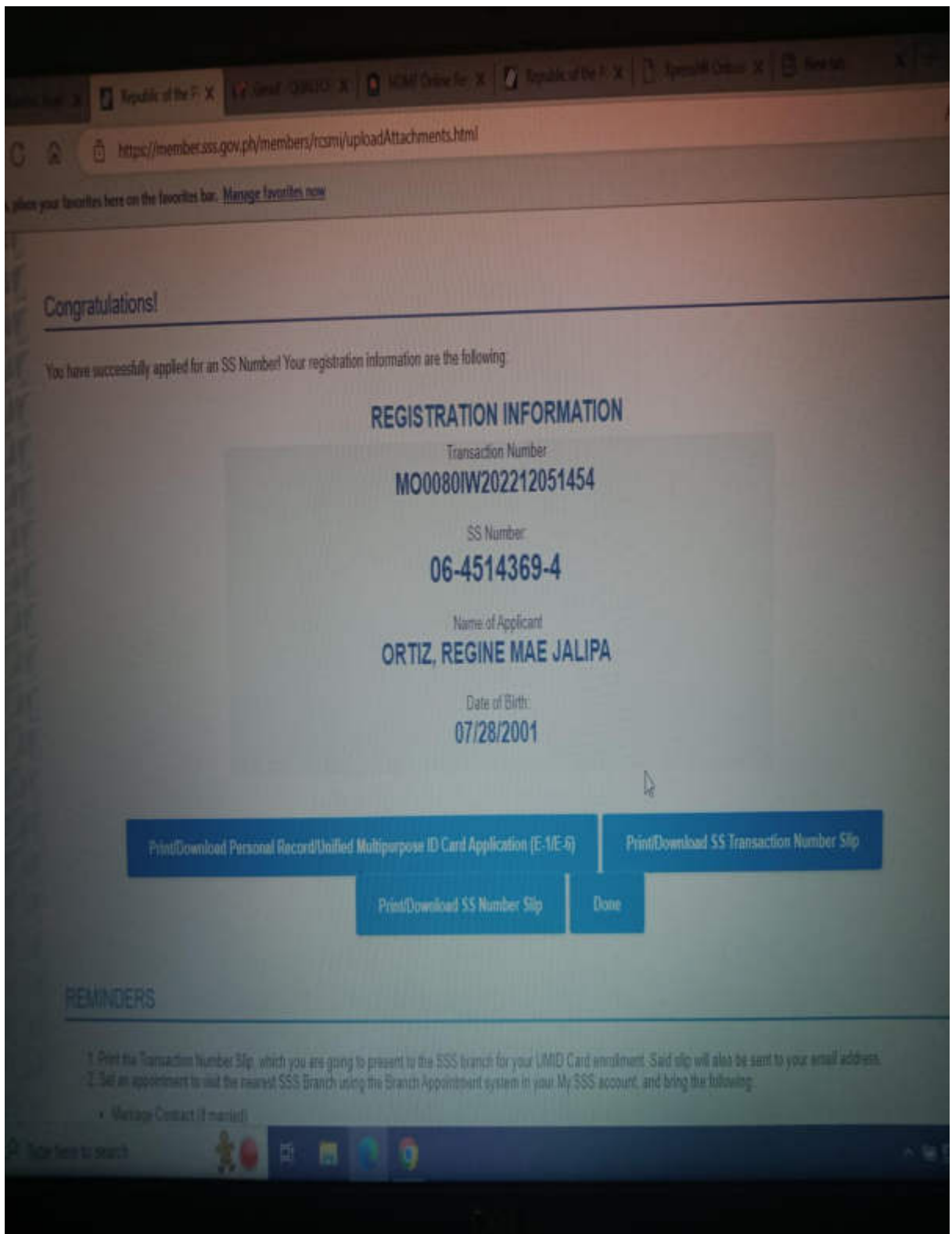
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PAG-IBIG NUMBER




PHILHEALTH ID NUMBER





SSS NUMBER

TIN NUMBER


 **BUREAU OF INTERNAL REVENUE**  
Revenue District No. 080  
2nd Floor Insular Square Bldg., J.P. Rizal St.,  
Tabok, Mandaue City

**TIN VERIFICATION**  
Query Results

TIN : 619-675-871  
NAME : ORTIZ REGINE MAE ✓  
DATE OF BIRTH : JULY 28, 2001 ✓  
ADDRESS : TIPOLO MANDAUE CITY

RDO CODE : 049-NORON MAKATI

TAXPAYER CLASSIFICATION : LOCAL EMPLOYEE  
Cell No. :  ONETT  
E.O. 98 ✓  
Email Add. :  BUSINESS  
 PROFESSIONAL

19 OCT 2023 ANIELYN L. CAPARAS, CPA,   
Revenue Officer  
BIR, RDO 080 MANDAUE CITY

# TRANSCRIPT OF RECORDS (TOR)

Republic of the Philippines  
**CITY OF MANDAUE**  
**MANDAUE CITY COLLEGE**  
 10th Avenue, Jasaan Ave., Cebu, Mandaue City  
 Contact No. (032) 238-6329, 420-9291 | Email: MCC@mandauccitycollege.edu.ph

**OFFICIAL TRANSCRIPT OF RECORDS**

Page 1 of 1

**PERSONAL DATA**

Student Name: **ORTIZ, REGINE MAE JALIPA**  
 ID Number: 11306218  
 Birthdate: **July 28, 2001**  
 Birthplace: **Cebu Post Office 6th Floor Div., Cebu City**  
 Sex: **Female**  
 Religion: **Roman Catholic**  
 Citizenship: **Single**  
 Civil Status: **Single**  
 Address: **Tigapo, Mandaue City**  
 Tel. No. / Mobile No.: **0903 119 2579**  
 Parent / Guardian: **Rosemarie Ortiz**  
 Address: **Tigapo, Mandaue City**  
 Tel. No. / Mobile No.: **0910 809 8618**

**ENTRANCE DATA**

Elementary: **Kareit Elementary School** Academic Year: **2012-2013**  
 Secondary: **Kareit National High School** Academic Year: **2018-2019**  
 College: Academic Year:

**GRADING SYSTEM**

97 above - 1.0 Excellent 89 - 1.8 Very Good 81 - 2.2 Good 73 - 2.8 Fair 65 - Officially Dropped  
 94 - 1.1 Superior 86 - 1.7 Very Good 82 - 2.3 Good 76 - 2.6 Fair 68 - Officially Dropped  
 93 - 1.2 Superior 85 - 1.8 Very Good 83 - 2.4 Good 75 - 2.9 Fair W - Withdrawn with  
 92 - 1.3 Superior 84 - 1.9 Very Good 84 - 2.4 Good 74 - 3.0 Fair F - Official Notice  
 91 - 1.4 Superior 83 - 2.0 Very Good 78 - 2.8 Fair Inc. - Suspended  
 90 - 1.5 Superior 82 - 2.1 Good 74 - 2.9 Fair

NOTE: Any absence or alteration within the whole transcript reveals certain irregularities reported by the Registrar.  
 This document is subject to correction if the records upon which it is based are subsequently found to be fraudulent.

This institution unit of credit is one hour lecture or equivalent each week or a total of 18 hours in a semester. Three hours of laboratory work each week of a total of 54 hours a semester are regarded as one unit of credit.

The semester average grade of a student is computed by multiplying the grade earned by the corresponding units assigned to a course and the product, as summarized, is divided by the total units earned for the semester.

The medium of instruction in this college is English.

NOTE: This transcript is original if it bears the embossed seal of the College and the ink signature of the Registrar.

REMARKS: **FOR EMPLOYMENT PURPOSES ONLY**  
 Date: **September 22, 2021**  
 Prepared by: **JANETTE SUDZ BEAGAN**

NOT VALID WITHOUT MCC SEAL  
**WILFREDO MARANIS C. PALACIO**  
 Registrar

CHARGED TO GRADUATION FEE

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**OFFICIAL TRANSCRIPT OF RECORDS**

Page 2 of 2

Student Name: **REGINE MAE J. ORTIZ**

Term	Course Code	Descriptive Title	Units	Grade	Remarks
1 <sup>st</sup> Sem. AY 2019-2020	BSSED 0047H	Enrich. 001	1.0		
	PE 001	Physical Education	1.0		
	MA7H 001	Mathematics in Modern World	1.0		
	MA7H 002	History of Math	1.0		
	PE07H 001	Understanding the Self	1.0		
	PE07 001	Reading in Phil. History, Constitution & Local History	1.0		
	PE 001	Movement Enhancement	1.0		
2 <sup>nd</sup> Sem. AY 2020-2021	PE 001	National Service Training Program I	1.0		
	PE 001	Physical Education	1.0		
	STS 001	Emergence of Participatory Pedagogies: Science, Technology and Society	1.0		
	WLD 001	Art Appreciation	1.0		
	MA7D 001	Calculus	1.0		
	MA7H 001	College and Advanced Algebra	1.0		
	MA7H 001	Plane and Solid Geometry	1.0		
3 <sup>rd</sup> Sem. AY 2021-2022	PE 001	Physical Education	1.0		
	PE 001	National Service Training Program I	1.0		
	EDUC 001	Gender and Society	1.0		
	EDUC 001	The Child and Adolescent Learners and Learning Principles	1.0		
	EDUC 001	The Teaching Profession	1.0		
	MA7H 001	Logic and Set Theory	1.0		
	MA7H 001	Modern Set Theory	1.0		
4 <sup>th</sup> Sem. AY 2022-2023	MA7H 001	Mathematical Science	1.0		
	MA7H 001	Elementary Statistics & Probability	1.0		
	PE 001	Physical Activities Towards Health and Fitness I	1.0		
	MA7H 001	Trigonometry	1.0		
	MA7H 001	Calculus with Analytic Geometry	1.0		
	MA7H 001	Mathematics in Environment	1.0		
	MA7H 001	Linear Algebra	1.0		
5 <sup>th</sup> Sem.	ARI 001	Indigenous Creative Crafts	1.0		
	EDUC 001	The Teacher & the Community, School, Culture, & Organizational Leadership	1.0		
	EDUC 001	The Contemporary World	1.0		
	PE 001	Physical Activities Towards Health & Fitness II	1.0		

\*\*\*\*\*Continue Next Page\*\*\*\*\*

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 Registrar

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**OFFICIAL TRANSCRIPT OF RECORDS**

Student Name: **REGINE MAE J. ORTIZ**

Page 7 of 7

Term	Course Code	Descriptive Title	Grade		Units
			Rating	Re-Taken	
Summer AY 2020-2021	MAT 101	Advanced Statistics	2.0		3
	MATH 101	Abstract Algebra	2.0		3
	REL	Life and Works of Dr. Rizal	1.0		3
1 <sup>st</sup> Sem. AY 2021-2022	EDUC 104	Foundation of Special and Inclusive Education	2.0		3
	MTHC 101	Teaching Principles and Theory	1.7		3
	MTHD 304	Facilitating Learning-Centered Teaching	1.6		3
	MTHD 304	Assessment in Learning	2.0		3
	TTL 101	Technology for Teaching and Learning 1	2.0		3
	RES 300	Research Writing and Methods	1.4		3
2 <sup>nd</sup> Sem. AY 2021-2022	MATH 301	Problem Solving, Mathematical Investigation and Modeling	1.2		3
	MATH 301	Calculus I	1.4		3
	MATH 301	Calculus II	1.5		3
3 <sup>rd</sup> Sem. AY 2021-2022	TTL 102	Technology for Teaching and Learning 2	1.2		3
	MTHD 301	Instrumentation and Technology in Mathematics	1.8		4
	RES 300	Research in Mathematics	1.8		4
	MTHD 301	Building and Enhancing New Literacies Across the Curriculum	1.4		3
	MTHD 301	The Teacher and the School Curriculum	1.0		3
Summer AY 2021-2022	MTHD 301	Assessment in Learning 1	1.8		3
	MATH 301	Principles and Strategies in Teaching Mathematics	1.0		3
	MTHD 301	Assessment and Evaluation in Mathematics	1.0		3
1 <sup>st</sup> Sem. AY 2022-2023	FS 101	Field Study 1	1.0		3
	FS 102	Field Study 2	1.5		3
3 <sup>rd</sup> Sem. AY 2022-2023	PRACT	Practicum Teaching/Teaching Internship	1.0		3

TRANSCRIPT CLOSED

NSTP SERIAL NO.: C-07-001922-20

GRADUATED CUM LAUDE FROM THE BACHELOR OF SECONDARY EDUCATION MAJOR IN MATHEMATICS ON JUNE 16, 2023 PER APPROVED MCC-BOT RES. NO. 017-2023 ON JUNE 07, 2023

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REMARKS: **FOR EMPLOYMENT PURPOSES ONLY**

Date: September 22, 2023

DDC STAMP #4141

IF NO. 175-4152 DATE 11/01/2023

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Prepared by: *[Signature]*  
 JUEL J. D. BRAGAS

*[Signature]*  
 WILFRED B. JAMES C. PALACIO  
 Registrar

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**OFFICIAL TRANSCRIPT OF RECORDS**

VERIFIED TRUE COPY  
 DATE: 11/22/2023  
 BY: *[Signature]*  
 WILFRED B. JAMES C. PALACIO  
 REGISTRAR

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**VERIFIED TRUE COPY**  
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 BY: [Signature]  
**WILFRED RYAN JAMES C. PALACIO**  
 COLLEGE REGISTRAR

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