



OFFICE OF THE GRADUATE PROGRAM
College of Social Sciences and Philosophy
University of the Philippines Diliman

**CERTIFICATION OF
LANGUAGE PROFICIENCY EXAMINATION RESULT**

Date: _____

FOR: The DEAN
College of Social Sciences and Philosophy

This is to certify that Mr./Ms./Mx. _____ has taken and passed the **Language Proficiency Examination** in the following area, with the corresponding grade:

Area/Language	Date Administered	Grade/Remarks
_____	_____	_____

Signature over Printed Name of Examiner

This certification is approved as fulfillment of the Language Proficiency Examination requirement for the degree _____.

Remarks: _____

Department/Institute Graduate Program Coordinator
Date: _____

Department Chair / Institute Director
Date: _____

Noted:

Coordinator, Office of the Graduate Program
Date: _____

Dean
Date: _____