



JOHN B. LACSON COLLEGES FOUNDATION (BACOLOD), INC.

Alijis, Bacolod City

BASIC EDUCATION DEPARTMENT

DepEd School ID No. 403019



BED Form 9

Student's Copy

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

TO : All Teachers Concerned

Please excuse \_\_\_\_\_ of Grade/Section: \_\_\_\_\_  
(Name of Student)

from your class from \_\_\_\_\_ to \_\_\_\_\_ (if dates are definitely identified).

Reason(s): \_\_\_\_\_

ADVICE: To secure an excuse slip upon return

For your guidance and information.

Remarks:  
\_\_\_\_\_  
Medical-Dental

\_\_\_\_\_  
Class Adviser/Guidance Counselor

Noted: MA. EVA M. HILAY, PhD  
Principal



JOHN B. LACSON COLLEGES FOUNDATION (BACOLOD), INC.

Alijis, Bacolod City

BASIC EDUCATION DEPARTMENT

DepEd School ID No. 403019



BED Form 9

Adviser's Copy

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

TO : All Teachers Concerned

Please excuse \_\_\_\_\_ of Grade/Section: \_\_\_\_\_  
(Name of Student)

from your class from \_\_\_\_\_ to \_\_\_\_\_ (if dates are definitely identified).

Reason(s): \_\_\_\_\_

ADVICE: To secure an excuse slip upon return

For your guidance and information.

Remarks:  
\_\_\_\_\_  
Medical-Dental

\_\_\_\_\_  
Class Adviser/Guidance Counselor

Noted: MA. EVA M. HILAY, PhD  
Principal



JOHN B. LACSON COLLEGES FOUNDATION (BACOLOD), INC.

Alijis, Bacolod City

BASIC EDUCATION DEPARTMENT

DepEd School ID No. 403019



BED Form 9

Guidance Office Copy

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

TO : All Teachers Concerned

Please excuse \_\_\_\_\_ of Grade/Section: \_\_\_\_\_  
(Name of Student)

from your class from \_\_\_\_\_ to \_\_\_\_\_ (if dates are definitely identified).

Reason(s): \_\_\_\_\_

ADVICE: To secure an excuse slip upon return

For your guidance and information.

Remarks:  
\_\_\_\_\_  
Medical-Dental

\_\_\_\_\_  
Class Adviser/Guidance Counselor

Noted: MA. EVA M. HILAY, PhD  
Principal

"To maintain the highest standards of Quality, Health, Safety, Environmental Protection and Pollution Prevention in our consistent drive to satisfy and strive to exceed