

**Return from Leave of Absence (LOA) \***

**REGISTRARS'S COPY**

Name : \_\_\_\_\_

College : \_\_\_\_\_

Student No. : \_\_\_\_\_

Degree Program : \_\_\_\_\_

Granted Leave of Absence (LOA) from \_\_\_\_\_ Semester, Academic Year 20 \_\_\_\_\_ - 20 \_\_\_\_\_ until  
Semester, Academic Year 20 \_\_\_\_\_ - 20 \_\_\_\_\_.

I will resume my studies in the University starting \_\_\_\_\_ Semester, Academic Year 20 \_\_\_\_\_ - 20 \_\_\_\_\_.

Signature of Student : \_\_\_\_\_

**NOTED** : (Signature over printed name) :

\_\_\_\_\_  
**Associate Dean for Mentoring Academic Progress and Advancement**

\_\_\_\_\_  
**University Registrar**

*(Student is required to submit a Medical Certificate from UPHS for LOA of more than one semester)*

**Return from Leave of Absence (LOA)**

**DEAN'S COPY**

Name : \_\_\_\_\_

College : \_\_\_\_\_

Student No. : \_\_\_\_\_

Degree Program : \_\_\_\_\_

Granted Leave of Absence (LOA) from \_\_\_\_\_ Semester, Academic Year 20 \_\_\_\_\_ - 20 \_\_\_\_\_ until  
Semester, Academic Year 20 \_\_\_\_\_ - 20 \_\_\_\_\_.

I will resume my studies in the University starting \_\_\_\_\_ Semester, Academic Year 20 \_\_\_\_\_ - 20 \_\_\_\_\_.

Signature of Student : \_\_\_\_\_

**NOTED** : (Signature over printed name) :

\_\_\_\_\_  
**Associate Dean for Mentoring Academic Progress and Advancement**

\_\_\_\_\_  
**University Registrar**

*(Student is required to submit a Medical Certificate from UPHS for LOA of more than one semester)*

**Return from Leave of Absence (LOA)**

**STUDENT'S COPY**

Name : \_\_\_\_\_

College : \_\_\_\_\_

Student No. : \_\_\_\_\_

Degree Program : \_\_\_\_\_

Granted Leave of Absence (LOA) from \_\_\_\_\_ Semester, Academic Year 20 \_\_\_\_\_ - 20 \_\_\_\_\_ until  
Semester, Academic Year 20 \_\_\_\_\_ - 20 \_\_\_\_\_.

I will resume my studies in the University starting \_\_\_\_\_ Semester, Academic Year 20 \_\_\_\_\_ - 20 \_\_\_\_\_.

Signature of Student : \_\_\_\_\_

**NOTED** : (Signature over printed name) :

\_\_\_\_\_  
**Associate Dean for Mentoring Academic Progress and Advancement**

\_\_\_\_\_  
**University Registrar**

*(Student is required to submit a Medical Certificate from UPHS for LOA of more than one semester)*

*\* Get a request form of the following to the Graduate Office prior to enrollment*

1. U.P. Health Service Form ( for Medical Exam) = if you have a medical certificate issued/done within 6 months, present it to the U.P. Health Service for clarification/verification
2. Program of Study
3. Student Directory

*Present all the above requirements at the Graduate Office for issuance of request of the University Admission Slip (UAS). Proceed to Office of the University Registrar for UAS then return the UAS to the Graduate Office. Update your profile and go to your respective units for enlistment.*