Office of the Associate Dean for Mentoring Academic Progress and Advancement

GRADUATE OFFICE

REQUEST FOR LATE REGISTRATION/ CHANGE TO MATRICULATION / ENROLLMENT / PAYMENT/DROPPING/LOA

Date: _____

Dr. Fidel R. Nemenzo
Chancellor, University of the Philippines, Diliman

Thru Channels:

Dear Chancellor Nemenzo:

This is to request for: (Please Check Appropriate Box ☐ and state your reason below) *
☐ Late Registration (fill-out certificate of attendance)
☐ Late Change of Matriculation (with endorsement from the Faculty handling the class) and Payment.
☐ Late Enrollment and Payment ** (fill-out certificate of attendance)
☐ Late Payment ** (fill-out certificate of attendance)
☐ Late Payment of Dropping
☐ Late Payment of Leave of Absence (LOA)
☐ Withdrawal of Residence

_____

_____

_____

_____

_____

Respectfully yours,

_____ _____ _____
Signature over Printed Name | Degree Program | Student Number

This is to certify the attendance of the student during the ____ Semester of Academic Year _____

CERTIFICATE OF ATTENDANCE

SUBJECT/S	SCHEDULE OF CLASSES	NUMBER OF CLASSES MISSED	NAME AND SIGNATURE CERTIFIED BY INSTRUCTOR

Endorsed by:

_____
Signature over Printed Name
Director / Program Coordinator

Endorsed by:

EIZADORA T. YU, Ph.D.
Associate Dean for Mentoring
Academic Progress and Advancement

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