SCIENCE EDUCATION INSTITUTE

Department of Science & Technology

Accelerated Science & Technology Human Resource Development Program

(UP Diliman-ASTHRDP)

**Another Extension Request**

NAME: DATE:

DEGREE / COURSE:

START OF SCHOLARSHIP:

|  |  |
| --- | --- |
| **REQUIREMENTS CHECKLIST** | **✓** |
| Request letter duly endorsed by the Adviser and Institute/Unit Director | 🞐 |
| True Copy of Grades (For College of Home Economics & School of Statistics only. If from College of Sciences courses, no need to submit your TCG) | 🞐 |
| Program of Study - POS (Photocopy) | 🞐 |
| Financial Assistance Breakdown - FAB (optional) | 🞐 |

*☞To be filled out by ASTHRDP Staff only…*

EVALUATION: 🞐**Complete** 🞐**Approved by Project Leader** 🞐**Disapproved**

REMARKS:

EVALUATED BY:

DATE OF APPROVAL: