

UNIVERSITY OF THE PHILIPPINES LOS BAÑOS

College, Laguna

OFFICE OF THE UNIVERSITY REGISTRAR**APPLICATION FOR STUDY PRIVILEGES***For Non-Earning Dependents of U.P. Personnel*

School Year: _____ Semester/Summer, 20____-20____

NOTE: The deadline for submission is the second day before the first day of regular registration for each semester or summer.

Student Name: _____ Student No. _____ Date of birth: _____

Sex: _____ College: _____

Home Address: _____

A. I hereby certify that the above mentioned student is my son/daughter/spouse and at present is not
(pls. encircle)
employed or has no other means of income.

Printed Name of U.P. Personnel _____

Designation _____

Signature _____

Office and Unit _____

B. 1. For Currently Employed Personnel (To be accomplished by HRDO)

This is to certify that _____ is a () regular fulltime faculty/non-teaching staff () regular part time faculty () faculty/non-teaching staff with temporary appointment* (co-extensive with the semester or term for which the privilege is applied for) with the following status:

☐ not on leave☐ on vacation leave without pay☐ on sick leave☐ on secondment to another gov't agency or outside the country on academic assignment☐ on vacation leave with pay**2. For U.P. Retirees and other Personnel:**

This is to certify that _____ was already separated from the service in the University due to () compulsory retirement () optional retirement () death () disability on _____ with an aggregate service in the University of not less than ten (10) years.

Date _____

Chief, Human Resource Development Office _____

C. (To be filled up by the student)

Grades obtained during the last Enrollment

_____ Semester/Summer, 20____ - 20____

SUBJECT	GRADE	UNIT
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_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total No. of Units : _____

This to certify that the above mentioned student () has not exceeded the allowed maximum residence and the grades for all the subjects enrolled in as of the last day of late registration for said semester/summer are complete and accurate.

College Secretary _____

Date _____

(To be accomplished by the Registrar's Office)**Recommending Approval:**☐ 100% discount on tuition, miscellaneous and lab fees☐ 50 % discount on tuition, miscellaneous and lab fees☐ not entitled to any discountROSALINA A. MONTARAS

Administrative Officer V

Date _____

Approved:

MYRNA G. CARANDANG

University Registrar

Subject to Enroll (to be accomplished by the student)

SUBJECT	UNIT	SUBJECT	UNIT
1. _____	_____	6. _____	_____
2. _____	_____	7. _____	_____
3. _____	_____	8. _____	_____
4. _____	_____	9. _____	_____
5. _____	_____	10. _____	_____