



Office of the Associate Dean for Mentoring Academic Progress and Advancement

GRADUATE OFFICE

FOR ACCEPTANCE/DEFERMENT

Name of Student: _____

Date: _____

Degree Program: _____

School Year Admitted: _____

Please let us know as soon as possible if you wish to accept this admission. Indicate below and submit to the Graduate Office on or before enrollment and bring the following requirements:

Accept Admission

1. Two (2 pcs.) 2x2 or passport size picture
2. Official Transcript of Records (OTR)/True Copy of Grades (TCG)
3. Certified True Copy of Diploma/Certificate of Graduation
4. PSA Birth Certificate (Original and Photocopy)
5. Female (if married) PSA Marriage Certificate (Original and Photocopy)
6. Study Permit from ISP (for foreign student)
7. TOEFL/IELTS score report (for foreign student)
8. Medical certificate issued within (6) months

Defer Admission

Reason(s) for Deferment:

I will enroll on 1st Semester 2nd Semester 3rd Semester of School Year: _____

Deferment period should not exceed one academic year (2 semesters). Approved notice of application will send to your email address and the original may claim during enrollment period.

Recommending Approval:

Recommending Approval:

Approved:

Name and Signature
Unit Coordinator

GIL M. PENULIAR, PhD
Associate Dean for Mentoring
Academic Progress and Advancement

LAURA T. DAVID, PhD
Acting Dean, College of Science