



Brgy. San Jose, San Pablo City
Tel No.: (049) 536-7830
Email Address: plsp.registraroffice@plsp.edu.ph

(1ST / 2ND / Mid-year) Semester of Academic Year _____

Date : _____
Student No: _____

I, Mr./Ms. _____ hereby request
(Last Name, First Name, Middle Name)

Irregular

Regular

(Signature over Printed Name)

Approved by:

Dean	Date
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Encoded by

EMISO	Date
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“Primed to Lead and Serve for Progress”