



PAMANTASAN NG LUNGSOD NG SAN PABLO
Brgy. San Jose, City of San Pablo
OFFICE OF THE REGISTRAR
dlspl_reg@yahoo.com/ +63 948 682 7292

Form No. 5

ADDING / DROPPING / CHANGING FORM							
SUBJECTS	ADDING		DROPPING		CHANGING		INSTRUCTOR'S SIGNATURE
	Section	Units	Section	Units	From	To	

Name: _____		Date: _____
Program: _____	Student's Signature: _____	Student's No.: _____
Academic Year: _____	Semester: _____	
Parent's Signature: _____	Cellphone #: _____	
Reason(s): <input type="checkbox"/> Financial <input type="checkbox"/> Relocational <input type="checkbox"/> Going Abroad <input type="checkbox"/> Physical Illness <input type="checkbox"/> Others: (Please Specify) _____		
Approved:	Verified/Encoded:	Verified:
Dean: _____	MIS Office: _____	Registrar: VRENALI R. TOLENTINO

- Notes:**
1. Refund of Tuition in dropping of subjects shall be in accordance with the school rules and regulations.
 2. Students shall consult their flowchart for the requirements of subjects enrolled. Violation on this is strictly prohibited.
 3. A week after the start of classes, teacher's signature is required in accomplishing this form.
 4. Students are required to carry a minimum of 15 units. Maximum load is based on their curriculum.
 5. By signing the Form No. 5. I am agreeing to the DLSP Privacy Notice and giving my consent to the collection and processing of my personal data in accordance thereto.

REVISED – November 2018



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