



### REQUEST TO CROSS REGISTER

**NOTE:** 1. This permit will be presented to the University Registrar of the Host-Unit/Accepting School for appropriate action. If approved, the student enrolls the approved subjects during the scheduled registration. Only those subjects recommended by the Program Chair and approved by the Dean and University Registrar of the student's home institution shall be allowed for enrollment.  
2. A copy of the final certificate of registration form (UP Form5 Dean's copy) will be forwarded to UPOU after the registration period.

STUDENT NUMBER: \_\_\_\_\_ NAME: \_\_\_\_\_  
 DEGREE/PROGRAM: \_\_\_\_\_ YEAR/LEVEL/BATCH: \_\_\_\_\_  
 LEARNING CENTER: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

I would like to request permission to cross-enroll at \_\_\_\_\_ for the (term) \_\_\_\_\_  
 AY \_\_\_\_\_ for the following reasons: \_\_\_\_\_.

Subject requested:	Units:	Program Chair's Recommending approval	Alternate subject requested	Units	Program Chair's Validation
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

**No. of units registered at home unit:** \_\_\_\_\_ **No. of units applied for as cross registrant:** \_\_\_\_\_ **Total academic load:** \_\_\_\_\_

**HOME UNIT APPROVAL**

**HOST UNIT APPROVAL**

\_\_\_\_\_  
UPOU Dean

\_\_\_\_\_  
Dean

\_\_\_\_\_  
UPOU University Registrar

\_\_\_\_\_  
University Registrar

FOR CROSS REGISTRATION OUTSIDE UP SYSTEM: \_\_\_\_\_  
 Vice Chancellor for Academic Affairs

*(Please detach and submit to home unit)*

THE REGISTRAR  
UP Open University

This is to certify that \_\_\_\_\_ has been admitted as cross-enrollee  
 this \_\_\_\_\_ Semester/Academic Year \_\_\_\_\_ for \_\_\_\_\_ units in the College of \_\_\_\_\_.

Subjects requested: \_\_\_\_\_ Units: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
Signature over printed name  
University Registrar – Host Unit