



UNIVERSITY OF THE PHILIPPINES OPEN UNIVERSITY
Office of the University Registrar

APPLICATION FORM FOR DROPPING OF COURSES

NAME OF STUDENT:	STUDENT NUMBER:
PROGRAM/MAJOR:	LEARNING CENTER:
COURSE NO./TITLE:	TERM OF EFFECTIVITY:
REASON FOR DROPPING:	

() DROPPING FEE PAID UNDER OR # _____
DATED _____ IN THE AMOUNT OF _____

SIGNATURE OF STUDENT

NOTED:

Tutor's signature over printed name Date

LC Coordinator Date

IMPORTANT: A STUDENT MAY DROP A COURSE BEFORE THE THREE-FOURTHS (3/4) OF THE SEMESTER/TERM HAS ELAPSED. THE REGISTRATION PRIVILEGE OF A STUDENT WHO DROPS A COURSE WITHOUT THE APPROVAL OF THE DEAN SHALL BE CURTAILED OR ENTIRELY WITHDRAWN.

DO NOT FILL THIS PORTION

NOTE TO THE **FACULTY-IN-CHARGE:** IF A COURSE IS DROPPED AFTER THREE-FOURTHS (3/4) OF THE SEMESTER/TERM HAS ELAPSED, INDICATE THE CLASS STANDING OF THE STUDENT AT THE TIME OF DROPPING. *AFTER FILING UP THIS PORTION, PLEASE SUBMIT THIS TO THE OFFICE OF THE FACULTY DEAN.*

Subjects Enrolled in	Class Standing (Passing or Failing)	FIC's Signature
1.		
2.		
3.		
4.		

APPROVED:

DEAN

DATE