



APPLICATION FOR READMISSION

UPOU Form No.2
Revised October 2005

UNIVERSITY OF THE PHILIPPINES OPEN UNIVERSITY
Los Baños, Laguna 4031
Philippines

Requirements:

1. Correctly and complete accomplished application form for readmission
2. One recent 2"x2" colored photo (print complete name and program at the back)
3. Proof of payment of application fee of P 225.00* (see payment procedure)

What program are you applying for readmission?

Program: _____

Major: _____ Learning Center: _____

A. PERSONAL DATA

Please print

¹ NAME _____				
<i>Family</i>		<i>First</i>		<i>Middle</i>
² GENDER <input type="checkbox"/> Male <input type="checkbox"/> Female	³ AGE	⁴ DATE OF BIRTH	⁵ BIRTHPLACE	⁶ CITIZENSHIP
⁷ CIVIL STATUS <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widow/er <input type="checkbox"/> Separated	⁸ PRESENT OCCUPATION/POSITION		⁹ EMPLOYER _____ <input type="checkbox"/> Private <input type="checkbox"/> Government <input type="checkbox"/> Semi-Private <input type="checkbox"/> Others: _____	
¹⁰ OFFICE ADDRESS _____ Tel. No: _____ Province: _____ Zip Code: _____ Region: _____ Fax No: _____			¹¹ HOME ADDRESS _____ Tel. No: _____ Province: _____ Zip Code: _____ Region: _____ Mobile No: _____	
¹² PREFERRED MAILING ADDRESS: _____ <input type="checkbox"/> Office <input type="checkbox"/> Home		¹³ E-MAIL ADDRESS _____		
¹⁴ Name, address and tel. no. of person to be notified in case of emergency: _____				

B. EMPLOYMENT BACKGROUND

¹⁵Indicate the three (3) most recent occupational experience.

Please use additional sheet if necessary.

Name & Address of Employer	Position	Date		Brief Description of Duties
		From	To	

C. EDUCATIONAL BACKGROUND

¹⁶Have you been previously enrolled in the University of the Philippines? Yes No
 If yes, Regular Non-degree Special Others: _____ UP student number: _____
 What program/degree? _____

¹⁷Are you currently enrolled in another college/university? Yes No
 If yes, in what program/degree? _____
 Institution: _____

¹⁸List schools previously attended.

Institution(s) Attended	Degree	Major Field	Inclusive Date	
			From	To

¹⁹References. List down names, positions and addresses of the persons whom you have requested to recommend you.

Name	Position	Address

²⁰Explain reasons for being absent without leave (AWOL)

Student Declaration:

“ I hereby affirm that all information supplied herein is complete and accurate. Withholding or giving false information will make me ineligible for admission or subject to dismissal. If admitted, I agree to abide by the policies rules and regulations of the UP Open University.”

 Signature

 Date

**Please attach
 2" x 2" photo here.**

**Please paste ID.
 Do not staple.**