



University of the Philippines
[Constituent University]
Request to Change/Add/Cancel Matriculation
 _____ Semester, AY _____

Name: _____ Student Number: _____
 Degree Program: _____ SAIS Number (if applicable): _____
 Registration Status: _____

Type ¹	FROM:	Course	Units	Section	Day	Time	Room	Fees Charged	
<input type="checkbox"/> CHANGE <input type="checkbox"/> ADD <input type="checkbox"/> CANCEL	FROM:							CM fee:	
	Instructor Signature:								Tuition:
	TO:							Lab fee:	
	Instructor Signature:								
Total Amount, ₱									
Less Scholarship/Privilege/Grant, ₱									
Total Amount Payable, ₱									
OR No.									
Date of Payment									
Certified by:									

Reason (please check):

- ill-advised
 conflict of schedule
 lacks pre-requisite
 section closed
 section dissolved
 others, specify: _____

Endorsed:

Approved:

 Name & Signature of Student

 Name & Signature of Adviser

 Name & Signature of Dean
 (or College Secretary if authority is delegated)

Reminders:

1. Kindly refer to the Academic Calendar for the Change/Add/Change Matriculation period.
2. Please copy furnish the Office of the University Registrar with a copy of the approved form.

¹If a student is requesting to change/add/cancel more than one (1) course, he/she must accomplish separate forms for each.