						Copy for: OCS, C	OUR & Student	
		University of the Philippines [Constituent University] APPLICATION FOR LEAVE OF ABSENCE						
THE I	DEAN				L			
	e of College] ess of College]							
Sir/Ma	adam:							
	I,			wit	h Student Number	wo	uld like to	
apply	for leave of absence fro	om my degree prog	gram/course in			effective First/Se	cond/Third	
Semes	ter/Trimester AY	up to First/	Second/Third Sem	nester/Trim	ester AY			
	REASON/S FOR LC	DA:						
Very tru	ly yours,		Ν	Noted by:				
	Signature	of Student		Name and Signature of Parent/Guardian Date:				
lea 2. If v wit 3. <u>NC</u> Note to t	ve of absence is due to vithdrawal is after ¾ of thdrawal is failing. <u>0</u> leave of absence is per the Instructor:	sickness, please att f the semester/tern rmitted within two	tach MEDICAL C n , your instructor : o weeks from the l	LEARANC may give yo ast day of c	f Student Affairs that you E from the UP Health Se ou a grade of "5" if your lasses.	ervice. class standing up to	o the time of	
	ed to indicate the class		-			, the instructo.	r concerned	
Count	Subject enrolled	Class standing	Instructor's signature	Count	Subject enrolled	Class standing	Instructor's signature	
1 2				5 6				
3				7				
4				8				
SCHUL	ASTIC STANDING as	Good Good		r bation	: □ Enrol	led		
CLEARA	ANCE	□ Warning		idmitted	□ Not e			
Name & Signature of Program Coordinator			Date	Name & Signature of Unive		sity Librarian	Date	
N	Name & Signature of Co	ollege Secretary	Date	Nan	ne & Signature of Directo Affairs	or of Student	Date	
NOTED	:				ROVED / DISAPPRO	OVED:		

Name & Signature of Adviser	Date	Name & Signature of Dean	Date
LOA FEE paid under O.R. No	dated	in the amount of One Hundred Fifty F	Pesos (₱150.00).

Note: LOA should not exceed one year but may be renewed for at most another year. When not taken in two (2) successive years, the aggregate LOA should not exceed two (2) years.