



**REQUEST TO CROSS REGISTER**

STUDENT NUMBER: \_\_\_\_\_ NAME: \_\_\_\_\_

DEGREE/PROGRAM: \_\_\_\_\_ YEAR/LEVEL/BATCH: \_\_\_\_\_

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 Validation:	Alternate subject requested	Units	Program Chair's Validation
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

No. of units registered at home unit: \_\_\_\_\_

No. of units applied for as cross registrant: \_\_\_\_\_

Total 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/ Chancellor

----- (Please detach and submit to home unit)

**ACKNOWLEDGEMENT**

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

**NOTE:** 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. **It is understood that one copy of the final certificate of registration form (UP Form5 Dean's copy) will be forwarded to UPOU after the registration period.**