



UNIVERSITY OF THE PHILIPPINES
OPEN UNIVERSITY
Los Baños, Laguna 4031

Copy for the Registrar

PRINT IN BLOCK LETTERS

UNIVERSITY CLEARANCE FORM FOR STUDENTS

NAME					
<i>Last Name</i>	<i>First Name</i>	<i>Middle Name</i>			
STUDENT NUMBER	PROGRAM	MAJOR (If applicable)			
FIRST ENROLLMENT		LAST ENROLLMENT			
<input type="checkbox"/> First Semester	<input type="checkbox"/> First Trimester	<input type="checkbox"/> First Semester	<input type="checkbox"/> First Trimester	Academic Year	Academic Year
<input type="checkbox"/> Second Semester	<input type="checkbox"/> Second Trimester	<input type="checkbox"/> Second Semester	<input type="checkbox"/> Second Trimester	20_____ - 20_____	20_____ - 20_____
<input type="checkbox"/> Midyear	<input type="checkbox"/> Third Trimester	<input type="checkbox"/> Midyear	<input type="checkbox"/> Third Trimester		
REASON FOR CLEARANCE					
_____			_____		
<i>Office of Student Affairs, In-Charge</i>			<i>Library, In-Charge</i>		
_____			_____		
<i>Date</i>			<i>Date</i>		

<i>Faculty Dean</i>					

<i>Date</i>					
_____			_____		
<i>University Registrar</i>			<i>Date</i>		
Graduation fee paid under C.R. No. (disregard if not graduating) _____ dated _____.					
Deposit fee paid as new student (Php 100.00):					
<input type="checkbox"/> For refund					
<input type="checkbox"/> For donation to UPOU Alumni Foundation Incorporated (UPOU AFI)					
If I do not refund the deposit fee after one (1) semester upon approval of the clearance from the university, I am authorizing the UPOU to transfer the funds to the UPOU AFI.					
_____			_____		
<i>Signature of Student</i>			<i>Date</i>		

Important: Always retain one copy which you will present to the Office of the University Registrar each time you transact business requiring clearance (e.g. application for transcript, claim of diploma, etc.)



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Los Baños, Laguna 4031

Copy for the Faculty Dean

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UNIVERSITY CLEARANCE FORM FOR STUDENTS

NAME		
<i>Last Name</i>	<i>First Name</i>	<i>Middle Name</i>
STUDENT NUMBER	PROGRAM	MAJOR (If applicable)
FIRST ENROLLMENT	LAST ENROLLMENT	
<input type="checkbox"/> First Semester	<input type="checkbox"/> First Trimester	Academic Year
<input type="checkbox"/> Second Semester	<input type="checkbox"/> Second Trimester	20____ - 20____
<input type="checkbox"/> Midyear	<input type="checkbox"/> Third Trimester	
REASON FOR CLEARANCE		
_____ <i>Office of Student Affairs, In-Charge</i> _____ <i>Date</i>	_____ <i>Library, In-Charge</i> _____ <i>Date</i>	
_____ <i>Faculty Dean</i> _____ <i>Date</i>		
_____ <i>University Registrar</i>	_____ <i>Date</i>	
Graduation fee paid under C.R. No. (disregard if not graduating) _____ dated _____.		
Deposit fee paid as new student (Php 100.00):		
<input type="checkbox"/> For refund		
<input type="checkbox"/> For donation to UPOU Alumni Foundation Incorporated (UPOU AFI)		
If I do not refund the deposit fee after one (1) semester upon approval of the clearance from the university, I am authorizing the UPOU to transfer the funds to the UPOU AFI.		
_____ <i>Signature of Student</i>	_____ <i>Date</i>	

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UNIVERSITY OF THE PHILIPPINES
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Copy for the Student

PRINT IN BLOCK LETTERS

UNIVERSITY CLEARANCE FORM FOR STUDENTS

NAME		
<i>Last Name</i>	<i>First Name</i>	<i>Middle Name</i>
STUDENT NUMBER	PROGRAM	MAJOR (If applicable)
FIRST ENROLLMENT	LAST ENROLLMENT	
<input type="checkbox"/> First Semester	<input type="checkbox"/> First Trimester	Academic Year
<input type="checkbox"/> Second Semester	<input type="checkbox"/> Second Trimester	20_____ - 20_____
<input type="checkbox"/> Midyear	<input type="checkbox"/> Third Trimester	
REASON FOR CLEARANCE		
_____ <i>Office of Student Affairs, In-Charge</i> _____ <i>Date</i>	_____ <i>Library, In-Charge</i> _____ <i>Date</i>	
_____ <i>Faculty Dean</i> _____ <i>Date</i>		
_____ <i>University Registrar</i>	_____ <i>Date</i>	
Graduation fee paid under C.R. No. (disregard if not graduating) _____ dated _____.		
Deposit fee paid as new student (Php 100.00):		
<input type="checkbox"/> For refund		
<input type="checkbox"/> For donation to UPOU Alumni Foundation Incorporated (UPOU AFI)		
If I do not refund the deposit fee after one (1) semester upon approval of the clearance from the university, I am authorizing the UPOU to transfer the funds to the UPOU AFI.		
_____ <i>Signature of Student</i>	_____ <i>Date</i>	

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