

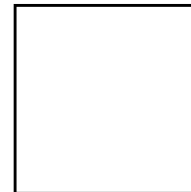


UNIVERSITY OF THE PHILIPPINES OPEN UNIVERSITY

College, Laguna 4031, Philippines

OFFICE OF THE UNIVERSITY REGISTRAR
Tel. Nos. +6349 5366001 to 6 local 103 & 104

APPLICATION FOR COMPREHENSIVE EXAM



INSTRUCTIONS:

1. This form should be filled out not later than **ONE MONTH** before the intended date of examination;
2. Students applying for comprehensive examination must be officially registered / enrolled during the term in which the examination is scheduled;
3. Proof of payment (UPOU official receipt) representing comprehensive examination fee amounting to Php 200.00 should be attached to this form; and,
4. A True Copy of Grades duly certified by the Office of the University Registrar will be provided by the Student Records and Appraisal Section (SRAS) upon submission of the application form and proof of payment to the respective Office of the Faculty of Study and SRAS.

◆ FED - fed@upou.edu.ph

◆ FICS - fics@upou.edu.ph

◆ FMDS - fmds_student_support@upou.edu.ph

◆ SRAS, OUR - records@upou.edu.ph

STUDENT NUMBER		PROGRAM	YEAR/SEMESTER STARTED
SURNAME		FIRST NAME	MIDDLE NAME
PRESENT MAILING ADDRESS			
PERMANENT MAILING ADDRESS			
MAJOR	MINOR	EXPECTED DATED OF COMPLETION <input type="checkbox"/> 1st <input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> MIDYEAR ACADEMIC YEAR _____	
Type of Examination: (Please check) <input type="checkbox"/> Written <input type="checkbox"/> Oral <input type="checkbox"/> Others			
DATE OF EXAMINATION	PLACE	TIME	
Indicate whether : <input type="checkbox"/> First Examination <input type="checkbox"/> Second Examination			SIGNATURE OF APPLICANT

To be filled out by the Examination Committee

EXAMINATION COMMITTEE

(Please affix signature on top of the printed names)

RECOMMENDING APPROVAL:

Chair, Examination Committee

NOTED:

APPROVED:

Program Chair

Faculty Dean