☐ *Copy for the Student*
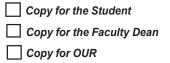☐ *Copy for the Faculty Dean*
☐ *Copy for OUR*

UNIVERSITY OF THE PHILIPPINES
OPEN UNIVERSITY
Los Baños, Laguna 4031

PRINT IN BLOCK LETTERS

UNIVERSITY CLEARANCE FORM FOR STUDENTS

NAME

Last Name	*First Name*	*Middle Name*

STUDENT NUMBER	PROGRAM	MAJOR *(If applicable)*

FIRST ENROLLMENT
☐ First Semester ☐ First Trimester
☐ Second Semester ☐ Second Trimester
☐ Midyear ☐ Third Trimester
Academic Year 20_____ - 20_____

LAST ENROLLMENT
☐ First Semester ☐ First Trimester
☐ Second Semester ☐ Second Trimester
☐ Midyear ☐ Third Trimester
Academic Year 20_____ - 20_____

REASON FOR CLEARANCE

_____
Office of Student Affairs, In-Charge

_____
Date

_____
Library, In-Charge

_____
Date

_____
Faculty Dean

_____
Date

_____
University Registrar

_____
Date

Graduation fee paid under O.R. No. (disregard if not graduating) _____ dated _____.

Deposit fee paid as new student (Php 100.00):

☐ For refund
☐ 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.

_____
Signature of Student

_____
Date

Reminders:
1. Student should email the accomplished form to records_documentsupport@upou.edu.ph.
2. The file naming convention to be followed when emailing the form is Faculty Office Name_DegreeProgram _StudentLastName_First Name_MiddleName.   example: FMDS_MPM_Cruz_Juana_Garcia
3. File Format is PDF.