COLLEGE OF ECONOMICS AND MANAGEMENT University of the Philipphines Los Banos

APPLICATION FOR SUSBTITUTION OF COURSES

NAME	STUDENT No.:										
	LAS	Γ		FIRS	Т	M.I.					
DEGREE Program:	Choose [egree	Major:				Classification:	Choose classification			
COURSE(S) REQUIRED					COURSE(S) TAKEN						
Course	Des	criptive Title		No. of	Course	Descri	iptive Title	No. of	GRADE	Where	When
No.				Units	NO.			Units		Taken	Taken
1											
Reason(s) for Substitu	ution:										
								SIGNATURE OF STUDENT			
RECOMMENDING APPROVAL									APPROVED:		
									ROW	ENA A. DOI	RADO
ADVISER	ISER DIRECTOR/CHAIR		R/CHAIR	DIRECTOR/CHAIR**		IR**	DIRECTOR/CHAIR***		COL	COLLEGE SECRETARY (For the Dean)	
Day Month	Year Day Month Year			Day Month Year		Day Month Year		Day Month Year			
Date		Date		Date		Date		Date			

- * To be signed by the head of the mother unit
- ** For Courses belonging to the same department
- *** For Courses belonging to different department