

LYCEUM OF THE PHILIPPINES UNIVERSITY

Manila Makati Cavite

Student Records Management Department
(Office of the University Registrar)

APPLICATION FOR RE-ADMISSION

To be accomplished by the
Records Section:

Deficiency/ies:
() F-137A
() Transcript of Records

NAME (Print): _____
Last First Middle

Student No. _____ Course: _____

Last enrolment in LPU (specify semester/s or summer and academic year): _____

By affixing my signature on this form, I hereby acknowledge and certify that I have carefully read and understood the terms and conditions of the Data Privacy Policy of the Lyceum of the Philippines University (LPU). By providing personal information to LPU, I am confirming that the data is true and correct. I understand that LPU reserves the right to revise any decision made on the basis of information I provided should the information be found to be untrue or incorrect. I likewise agree that any issue that may arise in connection with the processing of my personal information will be settled amicably with LPU before resorting to appropriate arbitration or court proceedings within the Philippine jurisdiction. Finally, I am providing my voluntary consent and authorization to LPU and its duly authorized representatives to lawfully process my / my child's data information.

Signature Over Printed Name of Student

ACTION OF THE SCREENING COMMITTEE

Note: This Re-Admission Form shall be valid for:

() First Sem. () Second Sem. () Summer AY 20 _____ 20 _____ Enrolment

1.) ACCOUNTING DEPARTMENT

Signature / Date

2.) STUDENT AFFAIRS OFFICE

Signature / Date

3.) GUIDANCE AND TESTING CENTER

Signature / Date

4.) INFORMATION COMMUNICATION
TECHNOLOGY

Signature / Date

5.) COLLEGE DEAN

Signature / Date

6.) REGISTRAR'S OFFICE

Signature / Date

Action of the Admissions Section

() SPR Encoded Date: _____

() For File Date: _____