UNIVERSITY OF THE PHILIPPINES CEBU
CHANGE OF MATRICULATION

_____ Sem/Sch Yr 2020-2021

Name _____ Student Number _____ Course & Year _____

Subjects Cancelled	Instructor	Units	Time	Day	Room

Subjects Authorized	Instructor	Units	Time	Day	Room

☐ Ill Advised _____
☐ Conflict of time _____
☐ Lacks Prerequisite _____
☐ Class Dissolved _____
☐ Section Closed _____
☐ Others _____

Fee Charged _____
OR No. _____
Date _____

Remarks _____

Endorsed by: _____ Approved: _____
Adviser Dean