

## University of the Philippines Diliman, Quezon City

## APPLICATION FOR ADVANCE CREDIT WITHOUT VALIDATION

(For transferee who had taken at least 66 units upon admission to UP)

Dr.\_\_\_\_ Dean,\_\_\_\_ U.P. Diliman, Quezon City

Dear Dean \_\_\_\_\_,

This is to recommend the following courses taken by Ms. /Mr \_\_\_\_\_\_, a bachelor of \_\_\_\_\_\_, student of the college for automatic validation of courses which s/he may be entitled to under rules and regulations adopted by the University.

#### (1) Evaluated by:

(2) Recommended by:

Student Records Evaluator College of Social Work and Community Development Date:

# College Secretary

Program Adviser

(3)

| Courses completed at the | Equivalent course/s in        | Action of the    | Signature over     |
|--------------------------|-------------------------------|------------------|--------------------|
| University/ College of   | University of the Philippines | department/      | Printed Name of    |
|                          |                               | college offering | Chair offering the |
|                          |                               | the course       | course             |
|                          |                               | (approved or     |                    |
|                          |                               | disapproved)     |                    |
| Subject/s Units          | Subject/s Units               |                  |                    |
|                          |                               |                  |                    |
|                          |                               |                  |                    |
|                          |                               |                  |                    |
|                          |                               |                  |                    |
|                          |                               |                  |                    |
|                          |                               |                  |                    |
|                          |                               |                  |                    |

## (4) Approved / Disapproved

(5) Noted by:

Dean

Date:\_\_\_\_\_

University Registrar

Date: \_\_\_\_\_