



GRADUATE ADMISSIONS DEFERMENT/REPROCESSING FORM

Please print all entries

Reference Number		ID Number (If applicable)								
Term & AY of Acceptance	Term	1		2		3		AY		
Expected Time of Return	Term	1		2		3		AY		
Admission Type	Please (√)check one					Degree Program Accepted to			DTS Number	
		PhD								
		MA/MS								
		Diploma								Received By / Date & Time
	Others									
Personal Information						Contact Information				
Last Name						Address				
Given Name						Tel. No.				
Middle Name						Mobile No.				
Last School Attended						Email Address				
Reason/s For Deferment										
Two (2) copies of this form must be submitted to the Office of Admissions and Scholarships on or before the specified deadline (See DTS). By submitting this form, I understand that:										
<ol style="list-style-type: none"> The validity of the result of the DGAT exam I took and the ADMIT status I earned are for the duration of 3 trimesters (this term included in the count) only. I might face penalties in the event I belatedly submit a copy of this form specially after confirmation and/or enrollment. The program to which I was accepted to on the trimester when I have decided to enroll may not be offered. Should I have paid the Confirmation Fee, the said fee shall be non-refundable and non-transferable. Should I have paid the corresponding tuition and fees, any request for refund shall be according to the policy for refund by the University; and I am responsible for consequences applied for my deferment. 										
Signature (Applicant)						Date				

- **NOTE:** 1. This form must be filled out completely and accomplished in duplicate.
 2. The Applicant must have read the conditions indicated in the form prior to affixing his/her signature.
 3. Submission deadline of this Form is first week of classes of the Term where one was admitted.