



Student No.: 2020-4692-39729	College: Institute of Physical Education, Sports and Recreation	School Year: 2020-2021 2nd Semester
Name: AMBA, SIMON SALVADOR CALUNGSOD	Program: Bachelor of Physical Education	
Gender: Male	Major:	Curriculum: BPED
Age: 19	Year Level: First Year	Scholarship: FREE EDUCATION

SCHEDULE							
Code	Subject	Unit Credit Lec Lab	Class	Days	Time	Room	Faculty
NSTP 12	Cwts/Lts/Rotc	(3.0) 3.0 0.0	BPED 1B	W	09:00 AM-12:00 PM	IPESR-01-IP1-2 03	LABARDA, S.
GEC 14	Mathematics In The Modern World	3.0 3.0 0.0	BPED 1B	M	09:00 AM-12:00 PM	IPESR-FIELD-1 04	TOMENIO, E.
GEC 15	Purposive Communication	3.0 3.0 0.0	BPED 1B	F	01:00 PM-04:00 PM	IPESR-FIELD-1 20	BUENCONSEJO, M.
Fil 22	Sosyedad At Literatura/Panitikang Panlipunan (Soslit)	3.0 3.0 0.0	BPED 1B	M	01:00 PM-04:00 PM	IPESR-FIELD-1 04	ASAYTUNO, A.
Educ 2	The Teaching Profession	3.0 3.0 0.0	BPED 1B	Th	09:00 AM-12:00 PM	IPESR-01-IP1-2 03	ORZALES, S.
BPED 14	Principles Of Motor Control And Learning Of Exercise, Sports And Dance	3.0 3.0 0.0	BPED 1B	T	01:00 PM-04:00 PM	IPESR-FIELD-1 07	AREVALO, A.
PE 12	Muscoskeletal Fitness Resistance Training Program	2.0 2.0 0.0	BPED 1B	W	01:00 PM-03:00 PM	IPESR-FIELD-1 03	MANDANE, J.
GEC 16	Art Appreciation	3.0 3.0 0.0	BPED 1B	F	09:00 AM-12:00 PM	IPESR-FIELD-1 02	REX, R.
BPED 13	Physiology Of Exercise And Physical Activity	3.0 3.0 0.0	BPED 1B	T	09:00 AM-12:00 PM	IPESR-01-IP1-2 02	GONZALES, J.
Totals:: Subjects: 9 Credit Units=23.00 Lecture Units=26.00 Lab Units=0.00							

ASSESSED FEES

Total Units (23.00)	-
Tuition Fee - UG/CP/ETEEAP	4,025.00
Matriculation Fee - UG/CP/ETEEAP	10.00
Med. & Den. Fee - UG/CP/ETEEAP	20.00
Library Fee - UG/CP/ETEEAP	50.00
Athletic Fee - UG/CP/ETEEAP	40.00
Guidance Fee - UG/CP/ETEEAP	50.00
Cultural Fee - UG/CP/ETEEAP	20.00
SCUAA Fee - UG/CP/ETEEAP	50.00
Universitarian Fee	12.00
Internet Fee - UG/CP/ETEEAP	175.00
NSTP Fee	262.50

Total Assessment:	4,714.50
Less: Financial Aid:	0.00
Net Assessed:	4,714.50
Total Payment:	0.00
Outstanding Balance	4,714.50
Add'l Previous Balance:	4,839.50

Official Receipt: _____
Payment/Validation Date: _____

AMBA, SIMON SALVADOR CALUNGSOD
Student's Signature

ALLAN A. ARAÑA
College Registrar

KEEP THIS CERTIFICATE. YOU WILL BE REQUIRED TO PRESENT THIS IN ALL YOUR DEALINGS WITH THE COLLEGE.

