*Instructions:*

1. *Fill up this form completely and accurately. Print or type the information requested.*
2. *Adding, changing or dropping of subjects shall be done within 2 weeks of classes only.*
3. *Return this form to the Office of the Student Records together with a photocopy of the official receipt*

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| **LAST NAME** | | | **FIRST NAME** | | | **MIDDLE NAME** | | **SUFFIX (If Any)** |
|  | | |  | | |  | |  |
| **PROGRAM:** |  | | | | | MAJOR |  | |
| MINOR |  | |
| **SEMESTER** |  | | | | **SCHOOL YEAR** |  | | |
| SUBJECT/S ADDED | | | | UNITS | SUBJECT/S DROPPED | | | UNITS |
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| OR NUMBER: | | AMOUNT PAID | | DATE | Reason/s for Adding/Changing or Dropping: | | | |
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SIGNATURE OVER PRINTED NAME OF STUDENT SIGNATURE OF PROFESSOR CONCERNED

Recommending Approval: Approval:

PROGRAM CHAIRPERSON DEAN

DMMMSU-CGS-F010  
Rev. No. 00(07.15.2020)

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**STUDENT COPY**

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