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| Macintosh HD:Users:test:Documents:Bachelor of Technology:BT Programs:Logos:Technological_University_of_the_Philippines_Seal.svg.png | **TECHNOLOGICAL UNIVERSITY OF THE PHILIPPINES CAVITE CAMPUS**  Carlos Q. Trinidad Avenue, Salawag, Dasmariñas City, Cavite, Philippines  Telefax: (046) 416-4920  Email: cavite@tup.edu.ph │ Website: www.tup.edu.ph | |
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| **DIT** | **CONSULTATION FORM** | Page 1/1 |
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| **Date of Consultation** | **Time of Consultation** | **Number of Hours** |
| **Department :** |  | |
| **Name of Teacher :** |  | |
| **Name of Student/s :** |  | |
| **Summary of Consultation** |  | |
| **Action Taken** |  | |

**Student’s signature:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

(Signature over Printed Name)

**Signature of Faculty:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

(Signature over Printed Name)