

College Dean

## Colegio de San Juan de Letran Office of the registrar



## **Collegiate Returnee Application Form**

## A. Please provide the following information: Student No. \_\_\_\_ Name: \_\_ LAST NAME FIRST NAME \_\_\_\_\_ Year Level : \_\_\_\_\_ Program previously enrolled: \_\_\_\_\_ Semester: First Second Summer School year last attended: \_\_ Filed leave of absence: Yes No Reason/s for discontinuance of study: \_\_\_\_\_ Did you enroll in other school while on Leave of Absence? $\square$ Yes $\square$ No If yes, what school? \_\_ I hereby certify that the information given herein is true and correct. Any falsification of information on this form will automatically nullify my application and/ or subject me for dismissal from the Colegio. Students Signature/ Date Parents or Guardian Signature/ Date B. Screening and Evaluation: Total units taken: \_\_\_\_\_ Total units failed: \_\_\_\_\_ Total units to be taken: \_\_\_\_\_ Remarks: Evaluated by: Approved by: Evaluator Registrar C. Secure clearance form the following offices: Department Remarks Date Financial Affairs Division Department of Student Affairs Guidance, Counseling, Testing, and Placement Library Media Services D. Secure Approval:

Vice President for Academic Affairs