

UNIVERSITY OF THE PHILIPPINES DILIMAN  
QUEZON CITY

First Semester AY 2025-2026 (Regular)

Regular

STUDENT NUMBER	NAME (Last, Given, Middle)	COLLEGE	DEGREE & MAJOR
2022-35251	VELDA, ADAM RISH CAIYOD	CS	BS Physics

CLASSES ENLISTED					Adviser's Instructions		Checker
CLASS CODE	COURSE NO/SECTION	SCHEDULE & ROOM	INSTRUCTOR(S)	UNITS	Action*	Remarks	
41498	App Physics 155 THV-TX-2	TTh 11:30AM-1PM lec NIP LP103; T 1-4PM lab NIP R209	CONCEALED	4.0	<input type="checkbox"/> Cancel at NIP		<input type="checkbox"/> OK
37516	BIO 11 WFR	WF 8:30-10AM lec IB 250	PUZON, JJ et al.	3.0	<input type="checkbox"/> Cancel at IB		<input type="checkbox"/> OK
37518	BIO 11.1 WFX	WF 2:30-5:30PM lab IB 308	LIM, EJ	2.0	<input type="checkbox"/> Cancel at IB		<input type="checkbox"/> OK
25118	PE 2 TK SGI	S 12-2PM PE TBA	BUSTO, BJ	(2.0)	<input type="checkbox"/> Cancel at DPE		<input type="checkbox"/> OK
41506	Physics 108 TWHFU	T 10-11:15AM disc NIP LP103; WThF 10-11:15AM lec NIP LP103	CONCEALED	5.0	<input type="checkbox"/> Cancel at NIP		<input type="checkbox"/> OK
42019	STS 1 SHQ	S 7-10AM lec IB 250	CANOY, RJ	3.0	<input type="checkbox"/> Cancel at SSP		<input type="checkbox"/> OK
Total units enlisted				17.0			

\*For more updated information on where to cancel your classes, as well as information about delegations and blocks, please visit your Student Registration module.

CLASSES TO BE ADDED AS ADVISED				Advised by	Remarks	Checker
						<input type="checkbox"/> OK
						<input type="checkbox"/> OK
						<input type="checkbox"/> OK
						<input type="checkbox"/> OK
						<input type="checkbox"/> OK
						<input type="checkbox"/> OK
						<input type="checkbox"/> OK
Total units to be added						
Total number of units to be enrolled				<input type="checkbox"/> Permitted to overload up to	units	<input type="checkbox"/> ALL OK

ADVISER'S REMARKS	PROCEED TO THE FOLLOWING OFFICES TO SETTLE ACADEMIC DELINQUENCIES/ACCOUNTABILITIES
	CS (College of Science)

Notice to Student: If you wish to take subjects other than those advised above, please obtain the consent of your department/adviser.

Adviser's Printed Name:		Adviser's signature		Date Validated	
		Checked by:		Date Checked	