



University of Southeastern Philippines
Office of the University Registrar

College/School: CTET

PRE-REGISTRATION FORM

Name: _____ Id No: _____ Year Level: 4th
Course: Bachelor of Science in Information Technology Major: Information Security

Semester	School Year	Sex	Scholarship	Did you file a LOA?
[<input type="checkbox"/>] 1 st Sem [<input type="checkbox"/>] 2 nd Sem [<input type="checkbox"/>] Off Sem	<u>2025-2026</u>	[<input type="checkbox"/>] Male [<input type="checkbox"/>] Female	Kindly indicate: <i>n/a</i>	[<input type="checkbox"/>] Yes [<input type="checkbox"/>] No If yes kindly indicate the inclusive date of LOA. From: _____ To: _____
TYPE OF STUDENT				
[<input type="checkbox"/>] Old Student		[<input type="checkbox"/>] New Student		
[<input type="checkbox"/>] Transferee	Last School Attended:		Number of semester/s from previous school:	
[<input type="checkbox"/>] Shiftee	Previous Program:		Number of semester/s from previous program:	
[<input type="checkbox"/>] 2 nd Courser	Degree:		Last School Attended:	

Course ID	Course Description	Units	Days	Time	Room
ITPR 401	IT Practicum	4	M T	1:00PM - 3:00PM	13 - PECC 1
			W Th	1:00PM - 5:00PM	13 - PECC 1
ICE 414	Professional Elective 4	3	M W	9:00AM - 10:30AM	13 - PECC 1
ICE 415	Professional Elective 5	3	T Th	9:00AM - 10:30AM	13 - PECC 1
ITCP 400	IT Capstone Project	2			

CHECK THE BOX TO INDICATE THE TYPE OF STUDENT:

- NON-PAYING STUDENT** (Students who avail the free tuition and other benefits under RA 10931 and commit to comply with the return service under the act.)
- PAYING STUDENT** (Students who voluntarily opt out of the free higher education provision.)
 - **Type of Paying Student** (Please check only one)
 - 2ND Courser
 - Exceeded the period covered for FHE
 - Already availed StuFAP
 - Voluntary opt out of the FHE

Approved by:

Student's Signature _____
Date Signed: _____
Student Mobile No.: _____
Email address: _____

Signature over Printed Name of Program Head/Adviser
Date Signed: _____

WE BUILD DREAMS WITHOUT LIMITS
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