



UNIVERSITY OF THE PHILIPPINES VISAYAS
GRADUATE SCHOOL

General Luna St., Iloilo City 5000 Philippines
Email Address: gs-secretary.upvisayas@up.edu.ph



APPLICATION FOR READMISSION FROM LOA

Date

The Dean

Graduate School
UP Visayas, Iloilo City

Dear Sir/Madam:

This is to request that the undersigned be allowed to be re-admitted to the _____ degree program effective _____ Semester/Trimester, AY _____ for the following reason/s:

Thank you.

Very truly yours,

Signature over Printed Name

Email Add: _____

Student Number: _____

Contact No.: _____

Recommendation: Approval / Disapproval
Remarks:

Recommendation: Approval / Disapproval
Remarks:

Graduate Program Coordinator

Date: _____

Graduate School Secretary

Date: _____

ACTION: APPROVED / DISAPPROVED

Graduate School Dean

Date: _____

REQUIRED ATTACHMENT: Copy of approved application for LOA.