

**University of the Philippines
Diliman, Quezon City**

REQUEST FOR SUBSTITUTION OF SUBJECTS

Name:	Student No	Course	Year	Date

The Dean
College of Engineering

I have the honor to request for the following substitutions:

Subject(s) Required	Units	Subject(s) Taken	Units	Semester Taken	Grade	Reason/Remarks

Respectfully yours,

Signature of Student

1.
Recommending Approval

Approval ()

Disapproval ()

Signature over printed name of Adviser

2.
Recommending Approval:

Dept.

Signature over printed name
Department Chair/Institute Director
(Subject(s) Required)

3.
Recommending Approval:

Dept.

Signature over printed name
Department Chair/Institute Director
(Subject(s) Taken)

4.
Action Taken:

APPROVED: ()

DISAPPROVED ()

DR. RIZALINDA L. DE LEON
Dean

05-03-11