

REQUEST FOR SUBJECTS ON SPECIAL ARRANGEMENT

WESTVISAYAS STATE UNIVERSITY

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Name:				ID No.
(Family) Degree Program		(First)	(Middle)	Date:
Level: Undergra	duate Gradu	ate		
The Registrar This University				
Dear	:			
I am respectfu			n the following subject/Summer:	et(s), on special arrangement,
Course No.	Subject Title		Instructor / Professor e assigned by the Dean/Direct	Signature of Instructor / Professor
			on fee of the subjects,	I have to pay the approved
			Ver	ry truly yours,
Recommending Approva	s1-		_	(Student's Signature)
Dean / Director		Action Ta () App () Dis		
			Registrar	
		Concurre	d:	
		Director	of Instruction / Director of	f Academic Affairs

Assessment			
Name of Fee	Amount		
Tuition			
Tutorial Fee			
Total			
Assessed by:			

Payment				
Amount	OR No.	Date		
×				
. ,				
Collected by:				

Note: Please attach the following:

1. a certified copy of Transcript of Records
2. a copy of Degree Program/Prospectus