CSSP-OGP Form 20 (Rev. 2023-09-18)



OFFICE OF THE GRADUATE PROGRAM

College of Social Sciences and Philosophy University of the Philippines Diliman

APPLICATION FOR SUBSTITUTION OF ADDITIONAL COURSE

Date:

FOR: The Dean

College of Social Sciences and Philosophy

I hereby apply for substitution of course in relation to the additional course requirement. I was granted an extension of academic residence from _______ to ______, and would like to enroll in _______ in fulfillment of the additional course requirement, for the following reason(s):

Signature over Printed Name of the Student

Endorsed and respectfully forwarded to the Dean.

Department/Institute Graduate Program Coordinator Date: _____

Department Chair / Institute Director Date: _____

[] Recommending approval of substitution as requested[] Not recommending approval

Remarks:

Coordinator, Office of the Graduate Program Date: _____

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Action Taken:

] Approved] Disapproved

Remarks:

Dean Date: _____