



OFFICE OF THE GRADUATE PROGRAM

College of Social Sciences and Philosophy
University of the Philippines Diliman

OFFER OF ACCEPTANCE

_____ Date

**To: The Dean
College of Social Sciences and Philosophy**

Re: Offer of Acceptance to the M.A./Ph.D. _____ of the
College of Social Sciences and Philosophy, dated _____ .

- () I hereby **accept** the above offer of admission;
- () I **accept** the offer of admission, but hereby request **deferral** of my initial enrolment in the program to the _____ semester AY _____ for the following reason(s):

- () I **do not accept** the offer of admission and hereby withdraw my name from the list of enrollees to the program.

(Signature above Printed Name)

(Date signed)

-
- () Noted
 - () Recommending approval of request for deferral

MA. LIZA RUTH A. OCAMPO, Ph.D.
Coordinator, CSSP Graduate Program

Date

Action Taken:

- () Noted
- () Deferral approved

MARIA BERNADETTE L. ABRERA, Ph.D.
Dean, CSSP

Date