



## DEFERMENT OF ENROLLMENT

**NOTES:**

1. This form must be filled out completely and accomplished in duplicate.
2. The Applicant must have read the conditions indicated in the form prior to affixing his/her signature.

Please print all entries

<b>Reference Number</b>		<b>ID Number</b> <i>(If applicable)</i>	
<i>Please (√) check applicable fields</i>		<b>Term 1</b>	<b>Term 2</b>
		<b>Term 3</b>	<b>Academic Year (AY)</b>
<b>Term &amp; AY of Acceptance</b>			
<b>Term &amp; AY Request to Enroll</b>			
<b>Admission Type</b>		<b>Degree Program Accepted to</b>	
Freshman			
Transferee			
2 <sup>nd</sup> Undergraduate Degree			

<b>Personal Information</b>		<b>Contact Information</b>	
<b>Last Name</b>		<b>Address</b>	
<b>Given Name</b>		<b>Telephone No.</b>	
<b>Middle Name</b>		<b>Mobile No.</b>	
<b>School</b>		<b>Email Address</b>	
<b>Reason For Deferment</b>			

<b>By submitting this form, I understand that:</b>			
<ol style="list-style-type: none"> <li>1. The validity of the result of the DCAT exam I took is for the duration of 3 trimesters (one academic year).</li> <li>2. The program to which I was accepted to on the trimester when I have decided to enroll may not be offered.</li> <li>3. Should I have paid the Reservation/Confirmation fee of P 10,000.00, the said fee shall be non-refundable and non-transferable.</li> <li>4. Should I have paid the corresponding tuition and fees, any request for a refund shall be according to the policy for refund by the University.</li> <li>5. I am responsible for the consequences applied for my deferment.</li> <li>6. Should there be any changes decision for my deferment of enrollment, I must email admission.requirements@dlsu.edu with Subject heading: Cancellation/Changes in Decision for Deferment Request</li> <li>7. As soon as the Deferment Form is submitted the decision is final and irrevocable unless the applicant emails the Office of Admissions and Scholarship regarding the changes in decision for deferment request submitted.</li> </ol>			
<b>Signature over Printed Name</b> <i>(Applicant)</i>		<b>Date</b>	
<b>Signature over Printed Name</b> <i>(Parent / Guardian)</i>		<b>Date</b>	

----- DO NOT FILL -----

	<b>Approved</b>		<b>Final Degree Program</b>
	<b>Disapproved</b>		<b>Disapproved Reason</b>
<b>Remarks</b>			
<b>Director, Office of Admissions and Scholarships</b>			<b>Date</b>