OFFICE OF THE REGISTRAR

950 P. Ocampo St., Mlaate, Manila, Philippines 1004
Phone No. (632) 230-5100 loc. 3322-3325
Email add.: registrar@benilde.edu.ph

ACCOMMODATION FORM

Fill in the appropriate section of the form:

_____Term, School Year_____

_____   _____   _____
Family Name/Given Name/M.I.   ID Number   Degree Program

Per policy on accommodation:

[ ] Student is graduating at the end of the term. (The course is a requirement to graduate but the said course is not offered during the term.) and /or

[ ] the course is a requirement in the old curriculum but is not anymore offered and has no equivalency.

[ ] Other meritorious cases as approved by the Registrar.

TO: The Registrar

FROM: _____
                    Academic Adviser

Please allow accommodation for:

Course Code/Course Title: _____

Section: _____

Day: _____   Time: _____   Room: _____

Note to Students:
1. Accomplish Form in triplicate (distribution: Student, Chairperson, Registrar).
2. Submit accomplished form to the Registrar within the period as announced by the Office of the Registrar. Request is deemed null and void for submissions beyond the deadline.

Approved by:

_____   _____
Program Chair   Date

Noted by: Processed by:

_____   _____
Associate Registrar / Date   Enrollment Associate / Date