

UNIVERSITY OF THE PHILIPPINES DILIMAN Office of the University Registrar

T.M. Kalaw St. corner Quirino St., U.P. Diliman, Q.C. 1101 • P.O. Box 161, U.P. Diliman, Q.C. 1101 Direct Line 927-6084 • U.P. Diliman Trunk Line No. 981-8500

07 May 2019

OUR Memorandum No. MTTP 2019-09

To:

All Graduate Program Coordinators

Through:

The Deans

From:

ATHERESA T. PAYONGAYONG, PHO

University Registrar

Subject:

Processing of University Admission Slips (UAS) of New Graduate Students

Please submit to the Office of the University Registrar the list of new graduate students admitted for the First Semester 2019-2020 with the following attachments:

LOCAL STUDENTS	FOREIGN STUDENTS					
1. College Admission Slip	1. College Admission Slip					
2. Student Directory (two copies). Revised form can be downloaded at	2. Student Directory (two copies). Revised form can be downloaded at					
http://our.upd.edu.ph/forms/OUR%20FORM%2 03.doc	http://our.upd.edu.ph/forms/OUR%20FORM%2 03.doc					
Honorable Dismissal/Certificate of Transfer Credentials	3. Transcript of Records used for evaluation certified by the college					
4. Transcript of Records used for evaluation certified by the college	4. Official Transcript of Records (OTR) with degree and date of graduation authenticated by Embassy /Dept. of Education					
5. Official Transcript of Records (OTR) including certified copy of transcripts prior to last school/university attended with remarks "Copy for UP Diliman"	5. Two (2) passport size photos					
6. Two (2) passport size photos	6. Program of Study (original copy)					
7. Program of Study (original copy)	7. Medical Certificate from University Health Service (original copy)					
8. Medical Certificate from University Health Service (original copy)	8. Birth Certificate and passport (photocopy & original copy to be presented)					
9. Birth Certificate from Philippine Statistical Authority /Report of birth from Philippine Statistical Authority if Filipino born abroad (original copy)	9. If married, Marriage Certificate (photocopy and original to be presented)					

10. If married, Marriage Certificate from	10. Study Permit issued by OILD ¹
Philippine Statistical Authority (original)	
11. Permit to transfer if within Diliman	11. If medium of instruction in the school attended is not English, an Official TOEFL ² or IELTS ³ score report must be submitted.
	12. Student Insurance

- OILD Office of International Linkages Diliman located at Rm. 102, Diliman Interactive Learning Center (DILC) Bldg., Apacible corner Magsaysay St, UP Diliman, QC
- A score of 500 in the paper-based, or at least 173 in the computer-based, or at least 61 in the internet-based exam
- A score of at least 5.5

Also, please take note of the following:

- 1. The OTR (Official Transcript of Records) should be submitted within the semester.
- The student needs to sign the provisional admission form.
- 3. Deadline of issuance of acceptance letter to foreign students is on 28 June 2019 (First Semester) and 29 November 2019 (Second Semester).

The OUR will issue the University Admission Slip (UAS) with Student Number and temporary password to be used by the student to access the CRS (Computerized Registration System).

Strictly observe the following schedule for the Issuance of UAS:

	1				
MBA/FINANCE (Cesar E.A. Virata	First Trimester 2019-2020	Second Trimester 2019-2020	Third Trimester 2019-2020		
School of Business)	4 th week of June	2 rd week of October	3 rd week of February		
Archaeological Studies Program	First Trimester 2019-2020	Second Trimester 2019-2020	Third Trimester 2019-2020		
	4 th week of June	3 rd week of October	4 th week of February		
Professional Masters in Tropical Marine	First Trimester 2019-2020	Second Trimester 2019-2020	Third Trimester 2019-2020		
Ecosystems Management Program	2 nd week August	1 st week of December	1 st week of May		
OTHER GRADUATE PROGRAMS	First Semester 2019-2020	Second Semester 2019-2020	Midyear Term 2019-2020		
	4 th week of June	1 st week of December	1 st week of May		

As in previous semesters, we hope you can make registration procedures systematic and efficient as possible. You may wish to adjust your schedule of entrance examinations, interviews and other required screening procedures when necessary.

Thank you for your cooperation.

OUR Form No. 3											
Revised March 2	2019										
	ST	UDEN	T DIR	ECTO	RY			c. 5			
PLEASE WRITE IN BLOCK LETTERS. Use an X mark in answering information preceded by a box											
STUDENT NUMBER	NAME (Last, Given, Middle, If a married woman encircle maiden name.) COLLEGE DEGREE						DEGREE	MAJOR		РНОТО	
SEX ASSIGNED AT BIRTH Male Female	CIVIL STATUS Single Widow Married Divor	ved 🗀] Philip	OF CITIZEN	ISHIP		DATE OF BIRTH PLACE OF BIRTH				
PRESENT ADDRES											
						NTACT NO.					
EMAIL ADDRESS	EMAIL ADDRESS PARENT'S EMAIL ADDRESS							5			
SCHOOLS ATTENE	DED STARTING FROM HIGH SCH	oor	DIPLO	OMA/TITL	E/DEGR	EE	D,	ATE OF GRA	DUATION	HONORS RECEIVED	
							_	- 111 to 111 to 11 to			
	THE UNIVERSITY OF THE PHILIP										
	JP College/School of JP College/School of										
	If any										
FOR READMISSION STATUS During the period of AWOL/LOA, have you been enrolled in other schools/universities? YES NO If YES, please specify name of schools/universities											
Do you have a disability? YES NO If YES, please specify.i.e.,physical, psycho-social, cognitive,etc)								and RA 9442)			
Would you wish to avail of possible services for students with disability offered by the university? (Note that if you answer YES, your name, college, contact number, email address and class schedule will be included in the database of UPD students with disability, and will be supplied to office/s and college/s that will implement services.)											
Please enter your	PWD ID number			01	SWSN	iD n	umber*	<u></u>			
										ty Health Service.	
PARENTS/GUARD	IAN/SPOUSE	Living /Dec	eased		ADDRES	SS		CONTA	CT NO.	OCCUPATION	
1. Father's Name			¬ -		· •						
2. Mother's Name					· · · · · · · · · · · · · · · · · · ·						
3. Guardian's/Spo	use Name		 							***************************************	
PERSON TO BE NOTIFIED IN CASE OF EMERGENCY AE			ADDRESS	DRESS				CONTACT NO.			
STUDENT PLEDGE: I hereby certify that all information given above is correct. In consideration of my admission to the UNIVERSITY OF THE PHILIPPINES and of the privileges of a student in this institution, I hereby promise and pledge to abide by and comply with all the rules and regulations laid down by competent authority in the University and in the College or School in which I am enrolled.											
DATE			S	SIGNATUR	E OF ST	UDE	NT				
PLEASE INFORM THE	OFFICE OF THE DEAN AND THE OFF	ICE OF THE I	JNIVERSIT	TY REGISTRA	AR ABOU	TAN	Y CHANGE I	N THE ABOVE	DATA.		