

University of the Philippines Diliman  
**REQUEST FOR SUBSTITUTION OF SUBJECTS**

Name: \_\_\_\_\_ Student No: \_\_\_\_\_  
 Course: \_\_\_\_\_ Date: \_\_\_\_\_  
 The Dean  
 College of \_\_\_\_\_

Sir/Madam:

I would like to request for the following substitution:

Subject Required	Units	Subject Taken	Units	Semester & Year Taken	Grade	Justification

Note: Attach syllabi of subjects taken. Use one form for courses required and taken in one department only.

Respectfully yours,

\_\_\_\_\_  
 Signature of Student

Recommendation of the Adviser _____ Approval _____ Disapproval Signature over Printed Name Adviser		Department _____		Action Taken <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved Signature over Printed Name Dean/Director	
Recommending Approval: _____ Signature over Printed Name Department Chair (Subject Required)		Recommending Approval: _____ Signature over Printed Name Department Chair (Subject Taken)		Department	