

University of the Philippines
COLLEGE OF MUSIC

NOTICE OF UNDERLOADING

Name: _____ Student Number: _____

Degree/Program, Major: _____

Year Level: [] First [] Second [] Third [] Fourth [] Other _____

Semester and Academic Year of Underloading: _____

Total Units Enrolled This Semester (excluding PE and NSTP): _____

Reason for Underloading:

- Last semester in BM, no other subjects to enroll** (Student must submit updated curriculum checklist)
- Health** (Student must submit medical certificate, confirmed by the University Health Service)
- Employment** (Student must submit copy of payroll and appointment papers indicating, among others, the duration of employment)
- Unavailability of subjects** (Student must submit certification by the adviser and copy of schedule of classes)
- Others** (Please specify)

*I understand that my underloading – unless it is during my last semester in the BM program or it is due to health reasons, unemployment, or unavailability of subjects – is **grounds for my disqualification from Latin honors**. Further, I understand that the supporting document for the reason of my underloading must be submitted **during the semester of underloading**; otherwise, my underloading may not be justified.*

(Signature over Name of Student)

Date: _____

Noted:

(Signature over Name of Adviser)

Date: _____

Note: For online submission of this form, please name your file using this format:
<LAST NAME, FIRST NAME>_Notice of Underloading_<Semester and Academic Year>