

OFFICE OF THE VICE PRESIDENT FOR ACADEMIC AFFAIRS

Visca Baybay City, Leyte 6521-A, Philippines Phone/Fax: +63 053 563 7106; Local 1003 Email Address: odie@vsu.edu.ph Website: www.vsu.edu.ph

REQUEST FORM FOR CHANGING DEGREE PROGRAM OR MAJOR FIELD

tudent Number : 20-1-01374		
ame of Student : Ryalida I. Man	agbanag	
ROM:	TO:	
Current Degree Program: BS in Forestry	Desired Des BS in A	gree Program: _ griculture
Major Field:		Horticulture 1st Sem. [√] 2nd Sem. [] Summer,
Reason(s) for Changing:		
I really enjoyed being a Forestry	student, at the same	time, since this pandemic started I
appreciated planting vegetables transfer course so that I can real	and other plants mor	e and this is the reason why I want to
transfer course so that I can real	ly locus on what i rea	my love.
Recommending Approval:		
i d	MANOLO B. LORET	0
9	Dean of Students	1000 1000 100
	Date:	
ANATOLIO N. POLINAR		
ANATOLIO N. POLINAR Department Head		Department Head
Department Head		Department Head Desired Program/Major Field
Department Head Current Program/Major Field		
Department Head Current Program/Major Field Date:		Desired Program/Major Field
Department Head Current Program/Major Field Date:		Desired Program/Major Field
Department Head Current Program/Major Field Date: Change of Academic Adviser:	To:	Desired Program/Major Field
Department Head Current Program/Major Field Date: Change of Academic Adviser: From:	To:	Desired Program/Major Field
Department Head Current Program/Major Field Date: Change of Academic Adviser: From: ANATOLIO N. POLINAR	To:	Desired Program/Major Field Date:
Department Head Current Program/Major Field Date: Change of Academic Adviser: From: ANATOLIO N. POLINAR Printed Name & Signature of Former	To:	Desired Program/Major Field Date: Printed name & Signature of New
Department Head Current Program/Major Field Date: Change of Academic Adviser: From: ANATOLIO N. POLINAR Printed Name & Signature of Former Academic Adviser	To:	Desired Program/Major Field Date: Printed name & Signature of New Academic Adviser
Department Head Current Program/Major Field Date: Change of Academic Adviser: From: ANATOLIO N. POLINAR Printed Name & Signature of Former Academic Adviser	To:	Desired Program/Major Field Date: Printed name & Signature of New
Department Head Current Program/Major Field Date: Change of Academic Adviser: From: ANATOLIO N. POLINAR Printed Name & Signature of Former Academic Adviser		Desired Program/Major Field Date: Printed name & Signature of New Academic Adviser
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Department Head Current Program/Major Field Date: Change of Academic Adviser: From: ANATOLIO N. POLINAR Printed Name & Signature of Former Academic Adviser Date:	ed:	Desired Program/Major Field Date: Printed name & Signature of New Academic Adviser
Department Head Current Program/Major Field Date: Change of Academic Adviser: From: ANATOLIO N. POLINAR Printed Name & Signature of Former Academic Adviser Date:		Desired Program/Major Field Date: Printed name & Signature of New Academic Adviser

*For Component Colleges the Director/Head of Student Affairs will sign in lieu of the Dean of Students. This form should be filled up in 4 copies: 1-Registrar, 1-ODS, 1-Department, 1-Student