



OFFICE OF THE DEAN OF STUDENTS

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APPLICATION FOR STUDENT ASSISTANTSHIP

(THIS PORTION IS FOR THE STUDENT APPLICANT)

	Y: 202 New applicant		cant/Renew	ral			•	
	ate M. Bayarcal		se/Year:		Ct	udent No.: _	18-101132	
In-Campus/Off	-campus Address: Mo	rendo boarding to	use Bray. U	tod Baybay	city Sex:	F	Age: 24	
Do you have a	ny scholarship/grant?	[] Yes: What sc					[/]No	
State exactly th	te exactly the time you are available for worl Monday Tuesday		7:00 - 11:00			PM		
Wednesday Thursday Friday			7:00 - 11:00 7:00 - 11:00					
information ma	EBY CERTIFY that the de in connection with alification form future :	my application for	r student as					
	Juch							
Signature of the Appli								
9-28-22							2	
1						Date		
Certification of	SUBJECTS AND GRADES (Previous Term or Mid-term) Subjects Units Grades Grades							
_	topo 200-2	0.0	-		Agro. 200		2.0	
	NGU 200-2	2.0			70,0.200			
_	Total no. of units:	2-0	GPA:		Total no	. of units:	20	
	CERTIFIED CO					ORRECT:		
			/		Univ	versity Regist	rar	

Vision: Mission: