



REQUEST FOR LEAVE OF ABSENCE

01/13/2025

Date

MARILYN M. BELARMINO
Director, Graduate Education
VSU, Visca, Baybay City, Leyte

Dear Dr. Belarmino:

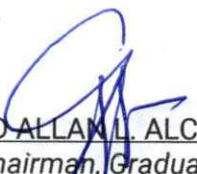
I wish to request for leave of absence from VSU Graduate School from 2nd Semester 2024-2025 to 2nd Semester 2025-2026 because of the following reasons:

For personal reasons.

Very truly yours,


JULIE MARJ CAYANGHO
Name and signature

Noted:


ED ALLAN L. ALCOBER
Chairman, Graduate Advisory Committee
Date: _____

Approved:

MARILYN M. BELARMINO
Director, Graduate Education
Date: _____

Distribution of copies: Graduate Student, Major Department, Graduate Education

* Indicate N/A or NONE for fields not applicable

