



REQUEST FORM FOR CHANGING DEGREE PROGRAM OR MAJOR FIELD

Student Number : 20-1-01358

Name of Student : SANDY G. CASIL

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FROM:

TO:

Current Degree Program: BACHELOR OF
ELEMENTARY EDUCATION

Desired Degree Program: BACHELOR OF
PHYSICAL EDUCATION

Effective [] 1st Sem. [] 2nd Sem. [] Summer ,
A.Y. 2021- 2022

Reason(s) for Changing:

Encountered difficulties in the Subjects

Recommending Approval:

[Handwritten signature]
MANOLO B. LORETO
Dean of Students
Date: Feb. 13, 2022

GPA: 2.406

DR. JOEL Q. MABALHIN

Department Head of Current Program

Date: _____

DR. CHARIS B. LIMBO

Department Head of Desired
Program

Date: _____

Change of Academic Adviser:

From:

To:

MS. LOUISA MARIE B. ANDRADE

*Printed Name & Signature of Former
Academic Adviser*

Date: SEPTEMBER 20, 2021

*Printed name & Signature of New
Academic Adviser*

Date: _____

Approved:

DR. BAYRON S. BARREDO
College Dean of the Desired Program
Date: _____

This form should be filled up in 4 copies: 1-Registrar, 1-USSO, 1-Department, 1-Student