



GRADUATE SCHOOL
UNIVERSITY OF THE PHILIPPINES LOS BAÑOS

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Date: _____

JOMAR F. RABAJANTE D.Sc.

Dean

Graduate School, University of the Philippines Los Baños
College, Laguna

Dear Dr. Rabajante,

I am _____ with student number _____
Name of Student (First, Middle, Last)

under the degree of _____
Degree Program

writing to formally request for ☐ re-enrollment from absence without official leave (AWOL)
☐ reinstatement from absence without official leave (AWOL) to
leave of absence (LOA)

Note: Tick 're-enrollment from AWOL' if you failed to enroll during the registration period and failed to apply for LOA. Tick 'reinstatement from AWOL to LOA' if you failed to enroll last semester and then filed a LOA after the AWOL status.

in the ☐ 1st ☐ 2nd ☐ Midyear of the Academic Year/Term 20____-20____ due to

Thank you very much for considering my request.

Sincerely,

Endorsed by:

Name and Signature of Student

Temporary Adviser / Chair of Guidance Committee /
Chair of Advisory Committee

Date: _____

APPROVED / DISAPPROVED:

JOMAR. F. RABAJANTE, D.Sc.

Graduate School Dean

Date: _____