Form No. UG-08

STATEMENT OF RESPONSIBILITIES

In co	onnection with the admission and enrollme	NAME OF THE STUDENT (L	ast Name, First Name, and Middle Name)
the p	person named below is the designated Par	·	,
	LAST NAME	FIRST NAME	MIDDLE NAME
Maili	ing Address:		
Rela	ationship to Student:	Email Address:	
Telephone Number:		Mobile Number:	
We i	understand and agree with the following:		
1.	The reservation fee of PhP10,000. withdrawn/cancelled.	00 is non-refundable and will cover	er administrative costs in case enrollment is
2.	The student/parent/guardian on-record must pay the tuition and fees (including any increase) as assessed by De La Sall University or any tuition and fee increase mandated by the government (if any), for the entire duration of the student's stay in th University.		
3.	The student/parent/guardian on-record must abide by the rules and regulations governing the student's enrolment at De La Sal University, as specifically stated in the DLSU Student Handbook and/or other University circulars/memoranda.		
4.	The parent/guardian on-record has equal access to the student's official school records through the My.LaSalle parent account.		
5.	The student shall (and the parent/guardian on-record allows the student to) undergo the Mandatory and Random Drug Testing initiated by DLSU and the government pursuant to RA No.9165 and the DLSU Student Handbook.		
6.	The parent/guardian on-record shall be the addressee of all relevant communications, if any, to be sent by De La Salle University. Communications may be sent to any of the contact information provided herein, and that the same is valid unti superseded through a notarized written notification by the student/parent/guardian on-record.		
7.	The parent/guardian on-record shall be the payee of all checks in connection with tuition refunds, if any.		
8.	The administrative costs in connection with a change of the parent/guardian on-record may be assessed by De La Salle University.		
9.	DLSU may disclose personal information of the student to DLSU administrators and offices in the university for legitimate purposes. Legitimate purposes include compliance to government and accrediting agencies such as CHED, PRC, PAASCU AUN, as well as compliance to requirements in the UAAP, when applicable.		
10.	For applicants with incomplete requirements, admission status is conditional. After 1 trimester, failure to submit complete requirements will cause admission status to be revoked and all enrolled courses will not be credited.		
	SIGNATURE OF PARENT/GUARDIAN ON DATE	/ER PRINTED NAME SIGN	ATURE OF STUDENT OVER PRINTED NAME DATE

Note: This form must be accomplished in duplicate.