

## AGREEMENT FORM FOR COMPLETION OF REQUIREMENTS

Please prir	nt all	entries
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Last Name			
Given Name			
Middle Name			
Academic Plan (Degree Code)		Academic Year/ Term	
I, together with my circumstances:	Parent On-Record,	understand and agree that g	iven the present
	nally admitted beca admission credentia	ause I have not submitted the als.	e required HARD
•	,	venrolled once I submit the Hone Office of Admissions and S	
	I am a Grade 12 g gation from the follo	raduate and I have no pend wing school:	ing clearance or
all the units	have taken will not	enrollment will be automatica t be credited if I fail to submit entials until the end of Term 1	HARD COPY of
administrative the D	e La Salle Universi	e from any liability, whether ty, in my acceptance and enobligations provided in this do	rollment, and the
Student		Parent On-Record	
Signature over P	rinted Name	Signature over Prin	ted Name

\*\*Note: This form must be accomplished in duplicate.

Date

Date