

Office of the
University Registrar

QUALIFICATION FOR EMPLOYEE DISCOUNT

(For employees of DLSU-Taft, Makati, BGC and Laguna Campus only)

PLEASE PRINT

Term / AY _____

Section A: Personal Information

LAST NAME, FIRST NAME, MIDDLE NAME

Section B: Student Information

ID NUMBER	DEGREE CODE	COLLEGE / DEPT.
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Section C: Employee Information

ID NUMBER	POSITION	LA SALLE UNIT / OFFICE
TYPE OF EMPLOYMENT (please check one)		EMPLOYMENT STATUS (please check one)
<input type="checkbox"/> Full-time Faculty <input type="checkbox"/> Part-time Faculty* (Section C1 must be accomplished) <input type="checkbox"/> ASF / ASP <input type="checkbox"/> Co-Academic Personnel <input type="checkbox"/> Others _____		<input type="checkbox"/> Permanent <input type="checkbox"/> Probationary <input type="checkbox"/> Contractual Expires on: _____

Section C1: Certification of Department Chair / Unit Head

Course Code	INDICATIVE LOAD ASSIGNMENT		Schedule
	Section	Units	

SIGNATURE OVER PRINTED NAME / DATE
Chair / Vice Chair / Unit Head

Section D: Enrollment History

LAST SY / TERM ENROLLED	AVAILED OF EMPLOYEE DISCOUNT? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Section E: Employee Undertaking

I understand that the privilege of employee discount may be reversed during the term of enrollment upon discontinuance of employment.

SIGNATURE OVER PRINTED NAME / DATE

Section F: Instructions to Student

1. Please surrender original copy of this form to the Office of the University Registrar **not later than Week 2 Day 6 of the Term.**
2. Please print your revised EAF through MLS after submission of the form
3. Please notify the Office of the University Registrar through registrar@dlsu.edu.ph for changes in employment status affecting employee discount.