

STUDENT VISA EXTENSION

Print all entries in CAPITAL LETTERS

FOR STUDENT USE Term, AY

ID Number		Are you enrolled this Term? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Last Name		Program/Degree	
First Name		Transferee ?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Middle Name		If Yes, name of previous school	
Birthday (mm/dd/yy)		Did you SHIFT ?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Address in the Philippines		If Yes, previous Program/Degree?	
Cell. Number		Visa Expiry	
E-mail address		ACR I-Card Expiry	

FOR I.C. USE

Required Documents	REMARKS
BI Application Form (CGAF)	
ACR I-Card (original and photocopy)	
Do you have a CHANGE of Address at the back of your ACR I-Card ?	Check box : YES <input type="checkbox"/> NO <input type="checkbox"/>
If YES, submit CERTIFICATE OF RESIDENCE and Php1,010 O.R. for change of address fee	
Certificate of Enrollment for the Current Term	
Certification of Courses Taken – 2 previous terms Term ____, AY _____ / Term ____, AY _____	
Passport (Original and photocopy)	
DLSU ID Photocopy (front & back)	
Annual Report Receipt	
O.R. of 9F Extension Payment	
For IS with FILIPINO lineage, submit photocopy of 1) birth certificate 2) parent/s' birth certificate 3) Certificate of Naturalization	
For LATE EXTENSION / EXPIRED Visa/ACR I-Card	
Letter of Explanation	
Late Extension Fee O.R. (Php _____)	
For TRANSFEREES	FOR SHIFTEES
Original Transcript from previous school	CHEd Endorsement
Certificate of Transfer Credentials or Honorable Dismissal	OUR Endorsement
Letter of Explanation	
CHEd Endorsement	

International Center RECEIVED AND VERIFIED BY	
Date	
Clearance	YES NO
Amount to be paid	

For OFFICE OF THE UNIVERSITY REGISTRAR	
Requests for Documents :	
1.	Certificate of Enrollment, T ____, AY _____ - _____
2.	Certificate of Courses for T ____, AY _____ - _____
3.	Certificate of Courses for T ____, AY _____ - _____
4.	CHEd Endorsement (Transferee) (Shiftee)
5.	Certificate of Residency, T ____, AY _____ - _____
Requested by :	
Date :	Services Management Specialist & IS Advisor, IC

This is to certify that the above information are true in accordance with my personal knowledge. I also authorize the International Center to process and claim my Transcript / Certification/s at the Office of the University Registrar, for purposes of my visa application.

Printed Name (with Signature on top) _____ (Date) _____