



**University of the Philippines  
Manila**

**APPLICATION FOR SUBSTITUTION OF COURSES**

**The Dean**

College of Pharmacy

I have the honor to request for the following substitution:

Student No.: \_\_\_\_\_

SUBJECT REQUIRED		SUBJECT TAKEN		COURSE TITLE OF SUBJECT TAKEN	College & CU where the course was taken	Semester & AY the course was taken	Grade Obtained	Signature of the Instructor of the Subject Required
Course Code & Number	Units	Course Code & Number	Units					

Reason for substitution:

Respectfully yours

\_\_\_\_\_  
*Name and signature of student*

**Recommending Approval/Disapproval**

**APPROVED / DISAPPROVED:**

\_\_\_\_\_  
Name and signature of Adviser

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name and signature of the Dean of  
Student's Home College

\_\_\_\_\_  
Name and signature of the Chair/Director of  
the Student's Home Department/Institute

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name and signature of the Chair/Director of  
the Department/Institute **offering** the course

\_\_\_\_\_  
Date

Attachments:

- Outlines of the courses taken and substitute courses  
 Evaluation of the faculty-in-charge of the substitute course