

UNIVERSITY OF THE PHILIPPINES LOS BANOS
College, Laguna

OFFICE OF THE UNIVERSITY REGISTRAR

Application for Identification Card Replacement

Name of Student Applicant: _____ (Please Print) Student Number: _____
Degree Course: _____ Classification: _____
Home Address: _____ Date of Birth: _____
Semester: _____ 1st _____ 2nd _____ Summer, 201 _____ UP Mail: _____
Sex: _____
First time to apply. Yes No (If no, please specify: _____)

I wish to apply for my I.D. replacement due to the following reason (s):

Please check:

My ID was lost. (Please explain fully)

Others (please specify, e.g., shifted to another course, faded, damaged, etc.)

I hereby certify that the information written herein has been accomplished by me and is true and correct. I understand that any false entry/ information that I provided in this application shall subject me to disciplinary action under the Student Rules and Regulations on Conduct and Discipline as approved by the Board of Regents on its 876th Meeting in Sept. 1976, as amended.

Student Applicant's Signature

Date

Note: Please attach the following documents to application form:

- 1 Form 5 of the current semester/summer of the student applicant.
- 2 Clearance from the College/Main Libraries.
- 3 Old ID card if reason for application is shifted to another course, damaged, faded, etc.

College Library (if applicable):

Main Library:

Person In-Charge

Person In-Charge

Recommending Approval/Disapproval:

APPROVED:

DIGNA D. FELISMINO
Administrative Officer V

Date

MARGARITA CARMEN S. PATERNO
University Registrar