



Republic of the Philippines
TARLAC STATE UNIVERSITY
OFFICE OF ADMISSION AND REGISTRATION
ADMISSION UNIT
 Tarlac City, Philippines

NOTICE OF ACCEPTANCE

- 2nd Courser
 Cross-Enrollee
 Prof. Ed. Units
 Returnee
 Transferee
 Others: _____

(1st / 2nd / Midyear) **SEMESTER**, (3rd) **TRIMESTER / ACADEMIC YEAR**: _____

DEAN: _____

COLLEGE: _____

_____ Date

This University

Dear Sir / Madam:

I, Mr. / Ms. _____ hereby apply as

(Last Name, First Name and Middle Name)

_____ in your College, preferably in the Course _____

(APPLICANT TYPE)

(COURSE APPLIED FOR)

Attached herewith are the pertinent documents for your consideration and approval.

SIGNATURE OVER PRINTED NAME

RECOMMENDING APPROVAL:

- Credentials are with the ARO
 Subject to availability of slots

Head, Admission Unit

ACTION TAKEN:

- APPROVED
 DISAPPROVED

College Dean