UST Form No. 6A
CHANGE/DROP COURSE

STUDENT NO.

UNIVERSITY OF SANTO TOMAS

España St., Manila, Philippines

Place a comma (,) between last and first names _____ Term / Special, Academic year 20_____ - 20_____

PRINT *LAST NAME* *FIRST NAME* *M.I.* *COLLEGE/PROGRAM*

TO BE DISCONTINUED:

	COURSES	Units	Days	Time	Room	Section
1.						
2.						
3.						
4.						

TO BE ADDED:

	COURSES	Units	Days	Time	Room	Section
1.						
2.						
3.						
4.						

NEW TOTAL UNITS

Dean or Representative *Student's Signature*

COPY FOR THE STUDENT

UST:S033-00-FO04

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