COLLEGE OF VETERINARY MEDICINE

University of the Philippines Los Baños

Application for Revision in the Approved Plan of Course Work*

(NOTE: Application for revision should be made before the course to be deleted, added or replaced is registered, the revision should not be due to failing grade) Please check the appropriate box(es): / / Change in Prevet Elective / / Change in Proper Elective / / Change in RGEP (Revitalized General Education Program) / / Change in P. E. activity Name: ______ Student No.: ______ Sem:____, Year:_____ **APPROVED** PROPOSED CHANGE** (Indicate Course No. and Descriptive Title) (Indicate Course No. and Descriptive Title) 2. _____ 3. Justification: (Please indicate justification for each proposed revision. Use extra sheet if necessary). APPROVED: Adviser and College Secretary Student's signature Date

^{* -} Attach photocopy of approved plan of course work

^{** -} Indicate semester and year to be taken