**CENTRAL PHILIPPINE UNIVERSITY**
**Iloilo City, Philippines**

**INSTRUCTIONS:**

1. Accomplish in three (3) copies (Distribution: Registrar, Dean, Department Chairman)
2. Fill out all necessary information in the form.
3. Attach scanned/photographed clear copy of the Transcript of Record for reference.
4. Attach scanned/photographed copy of the Course Description of subjects to be accredited when required.

## SUBJECT/S ACCREDITATION FORM

**NAME:** _____ **ID NUMBER:** _____ **COURSE & YEAR:** _____ **DATE FILED:** _____

**SCHOOL/COLLEGE LAST ATTENDED:** _____

| Subjects taken from other School/College (Course No./ Descriptive Title) | Grade | Credits | Subject Equivalent to CPU (Course No./Descriptive Title) | Credits | Recommending Approval (Dept. Chairman of Subject/Signature/Date) | Approved by: (Dean of Chairman /Signature/Date) |
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Noted by:

_____     _____     _____
Student's Signature over Printed Name     Department Chairman's Signature over Printed Name     Dean's Signature over Printed Name