



Notarized Provisional Enrollment Status Form (for Medicine)

Date: \_\_\_\_\_  
For: The Registrar – Admissions, Scholarships and Testing Section  
DLSMHSI

I am an incoming 1<sup>st</sup> year Doctor of Medicine student of De La Salle Medical and Health Sciences Institute. I am fully aware that I have not submitted the following document/s for admissions:

- \_\_\_\_ Photocopy of Birth Certificate
- \_\_\_\_ Photocopy of Transcript of Records / Certificate of Grades
- \_\_\_\_ Original General Weighted Average (GWA) / General Point Average (GPA) Certification
- \_\_\_\_ Original Honorable Dismissal / Transfer Credentials
- \_\_\_\_ Certificate True Copy of School Diploma or Certificate of Graduation in Baccalaureate Degree
- \_\_\_\_ Original National Medical Admission Test Result
- \_\_\_\_ Notarized Sworn Statement

Others: \_\_\_\_\_  
\_\_\_\_\_

1. We fully understand that the status of my admissions is considered conditional/probationary in nature until I have submitted the aforementioned lacking requirements **on or before October**. I am also aware that failure to submit these credentials on the given date would mean cancellation of my reservation/enrollment or cannot enroll for next semester enrollment.
2. I fully understand that the **Php 35,000.00** Reservation fee, Medical Examination fee & other fees made during my application in this Institution are non-refundable. We are also aware that the withdrawal of my documents would mean cancellation of the slot.
3. We fully understand that I am candidate for graduation this SY and I had no more obligations on my previous school.
4. I fully understand that if I transfer or withdraw in writing, within two (2) weeks after the beginning of the classes and if I already paid the tuition fee and other school fees in full or for any length longer than one month, I may be charged twenty-five percent (25%) of the total tuition fees for the term, or fifty percent (50%) if within the second week of the classes, regardless of whether or not I have actually attended classes. I shall also be charged the school fees in full if I withdraw anytime after the second week of classes (source: Manual of Regulation of Private Higher Education (MORPHE), Article XX, Section 100).

Conforme:

Witness:

\_\_\_\_\_  
Student's Signature over Printed Name  
Date: \_\_\_\_\_  
Contact Number: \_\_\_\_\_

\_\_\_\_\_  
Signature over Printed Name

*Note: The withdrawal of documents done at The Registrar – Admissions, Scholarships and Testing Section is only applicable to applicants whose transactions have already reached up to the Reservation of Slots. Withdrawal of documents after enrollment shall now be transacted at The Registrar.*

WITNESS MY HAND AND SEAL on the date, year and place above-stated.

Doc. No. \_\_\_\_\_  
Page No. \_\_\_\_\_  
Book No. \_\_\_\_\_  
Series of \_\_\_\_\_ 005F

NOTARY PUBLIC

cc: The Registrar, File