

University of Southeastern Philippines College of Technology

PRE-REGISTRATION FORM

NAME	ID No.:						
COURSE	:	Major:					
Semester	r School Year	Sex		Type[] Old Student[] New Student[] Transferee		Scholarship Kindly indicate:	
[] 1 st Sem [] 2 nd Sem [] Off Sem		[] Male [] Female					
Subject ID	Subject Des	Subject Description		Days	Time	Room	
			_				

CHECK THE BOX TO INDICATE THE TYPE OF STUDENT:

NON-PAYING STUDENT (Students who avail the free tuition and other benefits under RA 10931 and commit to comply with the return service under the act.)

PAYING STUDENT (Students who voluntarily opt out of the free higher education provision.)

PAYING STUDENT (18 yrs. old and above)

PAYING STUDENT (17 yrs. old below)

I hereby declare that, as a parent of a minor, I am fully aware of the Republic Act 10931 (Universal Access to Quality Tertiary Education of 2017) and all the privileges and responsibilities accorded and mandated to my child under this Act. However, my child voluntarily opts out of the free higher education provision. Thus, I hereby agree that my child shall waive all the benefits for the ______Semester of School Year ______ for the reason that we are capable of paying for his/her tuition and other related school fees.

Signature over Printed Name of Parent/Guardian

Date

Approved by:

Date Signed:

Student's Signature

Signature over Printed Name of Program Head/Adviser

Date Signed:______Student Mobile #:______

WE BUILD DREAMS WITHOUT LIMITS

Address: University of Southeastern Philippines Iñigo St., Bo. Obrero, Davao City Philippines 8000 Telephone: (082) 227-8192 local 262 Website: www.usep.edu.ph E-mail: ct@usep.edu.ph





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DATA PRIVACY PROVISION and CONFIDENTIALITY and NON-DISCLOSURE STATEMENT

It is expressly understood by the Undersigned that in the process of my admission to the University of Southeastern Philippines (USeP), the latter may collect data and information of students it deemed needed for the latter's admission to the University.

In view of this, the Undersigned agrees to allow, authorize, or give permission to USeP to gather, collect, handle, keep and manage such data or information, as provided to them by the Undersigned while being a student in the instant University.

Further, it is also expressly understood by the Undersigned that while enrolled in the University, the Undersigned may be exposed to data or information which may be deemed as classified by USeP. It is therefore imperative for the Undersigned to hold in confidence any such data or information and shall undertake to prevent its disclosure or transfer, consciously or unconsciously, to any party outside of this agreement without the knowledge and written consent of USeP.

By affixing my signature, the Undersigned hereby agrees with the foregoing conditions and subscribe to USeP's virtue of upholding the fundamental human right to privacy, in compliance to Republic Act 10173 or the Data Privacy Act of 2012.

Signed this _____ day of _____, 2021.

Signature over Printed Name

