



# LPU

LYCEUM OF THE PHILIPPINES UNIVERSITY  
MANILA · MAKATI · BATANGAS · LAGUNA · CAVITE

FM-LPU-REGO-28/04

Office of the University Registrar  
Tel +63 43 723 0706 loc. 157/158  
Telefax +63 43 723 2038

## REQUEST FOR CORRECTION OF NAME/DATE OF BIRTH

STUDENT NUMBER: \_\_\_\_\_

NAME: \_\_\_\_\_ COURSE/YEAR: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CONTACT NUMBER: \_\_\_\_\_

NATURE OF CORRECTION: \_\_\_\_\_

---

---

---

---

---

---

---

---

\_\_\_\_\_  
Signature

### DOCUMENTS SUBMITTED FOR VERIFICATION:

- \_\_\_\_\_ 1. Personal Request
- \_\_\_\_\_ 2. Certification of Live Birth authenticated by NSO
- \_\_\_\_\_ 3. Affidavit of 2 disinterested persons

Approved by:

GERALDINE D. DE ERIT  
University Registrar