



UNIVERSITY OF THE PHILIPPINES  
DILIMAN QUEZON CITY

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OFFICE OF THE VICE-CHANCELLOR  
FOR ACADEMIC AFFAIRS

MEMORANDUM NO. OVCAA-ECA 18-260

TO : ALL DEANS, DIRECTORS, AND HEADS OF UNITS

FROM :   
EVANGELINE C. AMOR, Ph.D.  
Vice-Chancellor for Academic Affairs

SUBJECT : Submission of Billing Statement for Medical, Admission, and Advance  
Placement Examination/Talent Determination Test Fees

DATE : 23 November 2018

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This is to request all concerned units to submit a billing statement to account for **Medical, Admission, and Advance Placement Examination/Talent Determination Test** fees for the First Semester 2018-2019 using the attached table. This is in connection with the billing of fees that needs to be consolidated by the Office of the University Registrar for submission to CHED/UNIFAST.

Kindly submit the accomplished table and all attachments to the Office of the University Registrar on or before **03 December 2018 (Monday)**.

For questions and clarifications, please contact the Office of the University Registrar at local 4552.

Please be guided accordingly. Thank you very much.

**FOR MEDICAL EXAMINATION OF FRESHMEN  
(c/o University Health Service)**

Student Number	First Name	Middle Initial	Surname	Degree Program	College	Cost of Medical Exam
<b>TOTAL COST</b>						

\*Only students who are eligible for Free Tuition shall be included in the list.

Certified:

\_\_\_\_\_  
Director of University Health Service

\_\_\_\_\_  
Vice Chancellor for Community Affairs

Attachment: Official Receipt of medical tests/procedures done outside UHS (for students who did not avail of UHS services)

**FOR ADMISSION FEE OF TRANSFER 1 STUDENTS**  
**(c/o Office of the College Secretary)**

Student Number	First Name	Middle Initial	Surname	Degree Program	College	Cost of Admission Fee
<b>TOTAL COST</b>						

\*Only students who are eligible for Free Tuition shall be included in the list.

Certified:

\_\_\_\_\_  
 College Secretary

\_\_\_\_\_  
 Dean/Director

Attachment: Students' Application for Transfer with the following details indicated:  
 application reference number, application fee, less higher education subsidy, and total amount due

Example:

Application for Transfer Reference Number: **001**  
 Application Fee: **PhP100.00**  
 Less Higher Education Subsidy: **PhP100.00**  
 Total amount due: **PhP0.00**

**FOR ADMISSION FEE OF TRANSFER 2 STUDENTS  
(c/o Office of the University Registrar)**

Student Number	First Name	Middle Initial	Surname	Degree Program	College	Cost of Admission Fee
<b>TOTAL COST</b>						

\*Only students who are eligible for Free Tuition shall be included in the list.

Certified:

\_\_\_\_\_  
University Registrar

\_\_\_\_\_  
Vice Chancellor for Academic Affairs

Attachment: Students' Application for Transfer with the following details indicated:  
application reference number, application fee, less higher education subsidy, and total amount due

Example:

Application for Transfer Reference Number: **001**  
Application Fee: **PhP100.00**  
Less Higher Education Subsidy: **PhP100.00**  
Total amount due: **PhP0.00**

**FOR BOR-APPROVED ADVANCE PLACEMENT (APE) EXAM FEE  
(c/o Departments/Institutes concerned)**

Student Number	First Name	Middle Initial	Surname	Degree Program	College	Cost of APE Fee
<b>TOTAL COST</b>						

\*Only students who are eligible for Free Tuition shall be included in the list.

Certified:

\_\_\_\_\_  
Department Chair/Institute Director

\_\_\_\_\_  
Dean/Director

Attachment: Students' Application for APE with the following details indicated: application reference number, application fee, less higher education subsidy, and total amount due.

Example:

APE Application Reference Number: **001**  
 Application Fee: **PhP100.00**  
 Less Higher Education Subsidy: **PhP100.00**  
 Total amount due: **PhP0.00**



**FOR BOR-APPROVED TALENT DETERMINATION TEST (TDT) FEE  
(c/o Departments/Institutes concerned)**

Student Number	First Name	Middle Initial	Surname	Degree Program	College	Cost of TDT Fee
<b>TOTAL COST</b>						

\*Only students who are eligible for Free Tuition shall be included in the list.

Certified:

\_\_\_\_\_  
Department Chair/Institute Director

\_\_\_\_\_  
Dean/Director

Attachment: Students' Application for TDT with the following details indicated: application reference number, application fee, less higher education subsidy, and total amount due.

Example:

TDT Application Reference Number: **001**  
 Application Fee: **PhP100.00**  
 Less Higher Education Subsidy: **PhP100.00**  
 Total amount due: **PhP0.00**