



Republic of the Philippines

DAVAO DE ORO STATE COLLEGE

Purok 10, Poblacion, Compostela, Davao de Oro, Philippines 8803

website: ddosc.edu.ph

email Address: registrar_compostela@ddosc.edu.ph

REGISTRAR SERVICES UNIT

DEPARTMENT

APPLICATION FOR LEAVE OF ABSENCE

Name of Student: _____

Permanent Address: _____

ID Number: _____ Contact Number: _____

Program: _____ Year: _____

REASON/S FOR FILING LEAVE OF ABSENCE:

Date of Admission to DDOSC: _____

Date of Filing: _____

Inclusive Dates of LOA:

From: _____ To: _____

Signature of Student

Recommending Approval:

Approved:

Program Coordinator

Program Head

Recorded by: _____
(Name & Signature) (Date Received/Recorded)

Pls. Check: First Filing (___) Second Filing (___)