ACKNOWLEDGMENT LETTER (MEDICINE FOREIGN APPLICANTS)

DATE: FOR:

The Registrar – Admissions, Scholarships and Testing Section

De La Salle Medical and Health Sciences Institute City of Dasmariñas, Cavite, Philippines

Dear Sir/Madam :

Greetings!

This is to inform your good office that we are duly informed and are submitting to the Admission Policies for Foreign Applicants of

- De La Salle Medical and Health Sciences Institute The Registrar Admissions, Scholarships and Testing Section. To wit:
 - 1. The Php 35,000.00 Reservation Fee is non-refundable and non-transferable should I decide to discontinue/withdraw my application. However, the aforementioned amount shall be deducted from my total tuition fees should I continue with my application and should I enroll during the regular period.
 - The Reservation Fee shall be forfeited should I decide not to enroll during the regular enrollment period scheduled by the institution.
 The medical examination is a major requirement for admission to De La Salle Medical and Health Sciences Institute and the medical examination fee
 - 3. The medical examination is a major requirement for admission to De La Salle Medical and Health Sciences Institute and the medical examination fee is non-refundable should I decide not to continue with my application.
 - 4. I am giving my consent to the Student Wellness and Guidance Services Department (SWGSD) / The Student Affairs (TSA) to provide a copy of my psychological test result to the aforementioned parties for the purpose of helping me holistically as the need arises.
 - 5. Payment of the Foreign Fee of Seven Thousand Dollars (\$7,000.00) during enrollment.
 - 6. If I decide to discontinue my study, the policy on dropping with refund shall be applied accordingly if covered by the dropping period.
 - 7. There shall be no refund for the said fee should I decide to change my citizenship to Filipino.
 - 8. I shall be required to attend meetings and general assemblies for all foreign students as scheduled by Center for Internationalization, Academic Affiliations and Engagements and other offices concerned.
 - 9. I should coordinate with the Liaison Officer of The Registrar for the requirements set by the Bureau of Immigration.
 - 10. The requirements for admissions should be completed and submitted before the enrollment schedule and issuance of the enrollment permit and registration form.

GENERAL REQUIREMENTS FOR ENROLLMENT

For incoming Medicine - applicants from DLSMHSI

- 1. Original NMAT Results
- 2. Photocopy of Birth Certificate
- 3. Certificate of Graduation or Photocopy of Diploma
- 4. Original Notarized Sworn Statement
- 5. 1 pc. 2x2 picture (white background)

For incoming Medicine - applicants from other school

- 1. Transfer Credential / Honorable Dismissal from previous school
- 2. Original NMAT Results
- 3. Photocopy Birth Certificate
- 4. Certificate of Graduation or Photocopy of Diploma
- 5. Original Certificate of General Weighted Average (GWA) / Certificate of General Pointed Average (GPA)
- 6. Original Notarized Sworn Statement
- 7. Certificate of Moral Character issued by the Student Affairs and its equivalent
- 8. 1 pc. 2x2 picture (white background)

For incoming Medicine - applicants from DLSU-Manila (Human Biology)

- 1. Photocopy of Birth Certificate
- 2. 1 pc. 2x2 picture (white background

Additional Requirements for Foreign Medicine applicants

- 1. Photocopy of passport/ Birth Certificate / NBI / Bureau of Quarantine / CEA
- 2. Photocopy of Alien Certificate of Registration (ACR) for permanent residents, native born, children of diplomats, or holder of any valid visa and Certificate of Residence for Temporary Students (CRTS)
- 3. Special Study Permit (SSP) for foreigners studying in the Philippines for less than a year or less than 18 years old (for foreign applicants).
- Notarized Affidavit of Support to cover for student's accommodation and bank certification
- 5. Certificate of Completion for Improving Tagalog Communication Skills (Special Filipino Class) from Institute's Center for Internationalization, Academic Affiliations and Engagements (CIAAE)

Sincerely,

SIGNATURE OVER PRINTED NAME OF PARENT/GUARDIAN

DATE

Conforme:

SIGNATURE OVER PRINTED NAME OF APPLICANT

DATE

cc: The Registrar, File