



**MINDANAO STATE UNIVERSITY
ILIGAN INSTITUTE OF TECHNOLOGY
OFFICE OF THE REGISTRAR**

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REQUEST TO UNBAR / LIFT SCHOLASTIC DELIQUENCY

Student Name: _____ Student ID Number: _____ (Date) _____

Degree/ Program: _____ College/Department: _____

Year Level: _____ Last Term & Academic Year Enrolled: _____

Contact No.: _____ Email: _____

Latest GPA: _____

Scholastic Delinquency (please check):

- ☐ Warning (C.1) Final grades below “3” in 25% to 49% of enrolled academic units
- ☐ Probation (C.2) Final grades below “3” in 25% to 75% of academic units (excluding those with fewer than 6 units)
- ☐ C.3 Dismissal:
- ☐ Below “3” in 76% or more of academic units (excluding those with fewer than 9 units)
 - ☐ On probation and again fails in 50% or more of academic units
- ☐ C.4 Permanent Disqualification: Below “3” in 100% of academic units (excluding those with fewer than 12 units)

Respectfully requesting to unbar / lift scholastic delinquency on my academic records due to:

Supporting Documents Submitted:

- ☐ Medical Certificate (if due to health)
- ☐ Guidance Counsellor’s Assessment (if due to mental health)
- ☐ Other: _____

	Notations / Remarks
Adviser’s Name and Signature	
Chairperson’s Name and Signature	
Dean’s Name and Signature	
Registrar	

Accomplish in 3 copies – for the University Registrar (original copy), the Student, the Department, and the College.